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Effective Nurse Recruitment Methods for Long-Term Care Facilities

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Walden University

College of Management and Technology

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Keith LaPrade

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2019

Abstract

Effective Nurse Recruitment Methods for Long-Term Care Facilities

by

Keith LaPrade

MBA, Keller Graduate School of Management, 2010

BS, Austin Peay State University, 1998

Doctoral Study Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Business Administration

Walden University

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Abstract

Nurse recruitment is a challenge for long-term care (LTC) leaders. Some owners of LTC businesses lack knowledge of how to attract, market, and hire qualified nurses to help ensure success. The purpose of this multiple case study was to explore the methods and strategies LTC leaders used to recruit nurses. The target population consisted of leaders of 3 LTC facilities who were responsible for recruiting nurses. This selection was based on findings that organization leaders experienced a downsizing of more than 20% of their personnel. The conceptual framework was the motivation-hygiene theory. Working conditions were influenced by Herzberg's 2-factor principles of job dissatisfaction. I focused on analyzing the participant data, public documents, and performance outcomes that demonstrated the effectiveness of participant recruitment strategies. Data were collected from semistructured interviews. I compared the motivational hygiene theory factors that influenced employee job satisfaction and dissatisfaction identified with the conceptual framework and any new studies published since beginning my study. Results of data coding and analysis revealed 3 major themes: communicating job descriptions to new LTC recruits, hiring for nurse–position fit to address turnover, and making the position attractive by offering competitive wages and benefits. Successful recruiting strategies included ensuring nurse position fit, contacting qualified candidates, and work conditions designed to meet candidates' needs, expectations, and requirements. Results of this study might contribute to social change by providing recruitment strategies to ensure quality nursing services in LTC and strategies necessary to sustain business operations.

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Dedication

A doctoral dissertation speaks loudly to commitment and hard work. I am dedicating this doctoral study to the late Flora Bush LaPrade and Betty Jean LaPrade, who provided unending support, knowledge, and values when I was young and growing up. I dedicate this to DaJuan Marquis LaPrade and Jahn Pierre LaPrade, hoping this will inspire and encourage them to always dream big, work hard, and never give up in life. A special thanks to Tammy Christiansen for her support and patience. Finally, I dedicate this to George and Maudie McIntosh, James LaPrade, and Joyce Thomas, who taught me to stay humble and encouraged me to excel in all things. Thanks to Freddie McIntosh, Pamela LaPrade Bell and all my friends and family for their support.

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Section 1: Foundation of the Study

New small businesses are vital contributors to a healthy job market and net job growth in the United States (Reedy, Strom, Calcagnini, & Favaretto, 2012). McCall (2001) defined long-term care (LTC) as a continuum of social and medical services developed to provide support to people who live with chronic medical problems that hinder their abilities to perform everyday activities adequately. LTC nurses provide care to patients with illnesses or disabilities that require them to have extended care (Raudonis, Kyba, & Kinsey, 2002). McGilton et al. (2016) noted that business owners and leaders had little information available on recruiting LTC nurses.

The Institute for the Future of Aging Services (2007) highlighted the workforce crisis in LTC in a report prepared for the National Commission for Quality Long-Term Care. The report indicated the negative consequences of the inability to recruit qualified nurses in LTC in health sector businesses (Institute for the Future of Aging Services, 2007). Recruiting LTC nurses is difficult due to nontraditional market forces, low compensation, and limited career opportunities (Stone & Harahan, 2010). The purpose of this qualitative multiple exploratory case study was to explore the perspectives of successful human resources (HR) recruiters regarding their strategies used to recruit LTC nurses. The results from this study may provide recruiters with new information on enhancing staff recruitment of LTC nurses.

Background of the Problem

The LTC nursing shortage continues to worsen for nursing facility employees. Researchers have documented high turnover rate of LTC nurses and shortage of trained

nursing facility employees against the predicted demand growth (Chan, Tam, Lung, Wong, & Chau, 2012; Hayes et al., 2012; Trinkoff et al., 2013). McGilton et al. (2016) showed that the shortage of LTC nurses was a recurring difficulty. LTC HR professionals face a decreasing supply of qualified nurses that escalates the demand for consistent recruitment of new LTC nurses (Brazil, Maitland, Ploeg, & Denton, 2012; H.-T. Kuo, Lin, & Li, 2013; Singh, 2014). There is a lack of comprehensive data on the national level that indicates the need to fill the shortage of LTC nurses; however, Brazil et al. (2012) and McGilton et al. (2016) reported the increasing gap in the time required to fill the position of LTC nurses at the state level.

Reilly, Nyberg, Maltarich, and Weller (2013) indicated the importance of leadership having effective hiring strategies for patient care and LTC financial success. The lack of stability in recruiting LTC nurses results in problems faced by consumers related to service access, which cause significant compromises in the quality of life and care, as well as safety of the consumer (Lea, Mason, Eccleston, & Robinson, 2015). The inability to recruit qualified LTC nurses results in the need for continuous recruitment, which poses challenges for training frequently changing staff (Brazil et al., 2012). In addition, the inability to recruit qualified LTC nurses results in excessive workloads for existing LTC nurses, which results in higher probability of compromises in the service quality of LTC nurses, thereby increasing rates of injuries and accidents (Fox, 2012).

Problem Statement

LTC business leaders in the United States are experiencing a shortage of nurses (U.S. Department of Labor, 2015). Haddad, (2019) reported an increase in LTC nursing

staff employee's turnover rates from 8.8% to 37.0% noting a high patient-to-nurse ratio, burnout, and job dissatisfaction as contributing factors. The general business problem was HR recruiters were often unable to recruit LTC nurses, thereby negatively affects business operations. The specific business problem was some HR recruiters lacked appropriate hiring strategies to recruit LTC nurses.

Purpose Statement

The purpose of this qualitative multiple exploratory case study was to explore the perspectives of successful LTC HR recruiters regarding their strategies used to recruit LTC nurses. I sampled 3 LTC HR recruiters from three different nursing facilities in Florida. Each facility had experienced a downsizing of more than 20% of their organizational personnel related to recruitment strategies. I aimed to contribute findings on the effectiveness of various recruitment strategies according to participants. The findings may influence social change by contributing knowledge on how to recruit experienced nurse professionals in the LTC setting. Adequate nurse staffing may improve community health care and the delivery of LTC services (Brazil et al., 2012). The potential improvement in community health care and delivery of LTC services related to having experienced LTC nurses may increase satisfaction of all stakeholders, including LTC nurses, organizations, and patrons of LTC services in the community.

Nature of the Study

The three research methods include qualitative, quantitative, and mixed methodology (Polkit & Beck, 2011). The qualitative method of research should occur in a natural environment (Austin & Sutton, 2014). Additionally, a qualitative approach

involves humanistic and interactive aspects (Eisenhardt, 1989). Quantitative methodology is more appropriate for closed-ended inquiries in which the goal is operationalization of variables to test hypotheses. Mixed-methods research consists of integrating qualitative and quantitative data from multiple perspectives on a single issue. Because the humanistic and interactive aspects of understanding LTC-nursing recruitment strategies were essential in the current study, I chose the qualitative method.

I considered case study, ethnography, and phenomenology as possible research designs. The ethnographic design would have been suitable if the purpose had been to examine group culture and group member interactions (see LeCompte & Goetz, 1982). E. Thomas and Magilvy (2011) noted that the phenomenological design is appropriate when a researcher aims to study participants' lived experiences related to the research problem to identify useful information about solving the problem. According to Yin (2017), a case study design is used to explore a problem in a real-life, practical environment to gain insights about the problem. A case study design was more suitable than the other designs for the current study due to its focus on identifying effective recruiting strategies as an alternative to practice, which was a problem that existed in a real-life, practical environment (see Zivkovic, 2012).

Research Question

The research question was the following: What strategies do successful HR recruiters use to recruit LTC nurses?

Interview Questions

1. What day-to-day hiring challenges do you face recruiting LTC nurses for the organization?
2. What have you done to overcome any hiring challenges regarding successfully recruiting LTC nurses?
3. How do you use media, headhunters, and other methods to attract LTC nurses to your organization?
4. What recruiting method do you find works best to recruit LTC nurses?
5. What strategies have you used to recruit LTC nurses?
6. What specific element or elements of your recruiting strategy are most appealing to nurse recruits?
7. Is there any other information that you would like to add regarding strategies that HR recruiters use to recruit LTC nurses?

Conceptual Framework

I used Herzberg, Mausner, and Snyderman's (1959) motivation-hygiene theory as the conceptual framework. Herzberg et al. examined the factors that influenced employee attitudes toward their jobs and introduced motivation-hygiene theory based on the two-dimensional factors that led to employee job satisfaction and employee job dissatisfaction: hygiene factors and motivators. Herzberg et al. identified these factors based on variation among the motivation and needs of humans. Herzberg et al. found that employees who reported satisfaction with their jobs had a higher engagement with their jobs due to higher personal interest in the work that they did, known as a *motivator*.

Conversely, employees who were dissatisfied with their jobs were dissatisfied due to their relationships with the environments in which they performed their jobs, known as the *hygiene factor* (Herzberg et al., 1959). Based on the analysis of attitudes and factors associated with work and influences on motivation, Herzberg et al. introduced two motivation-based dimensions.

The first dimension consists of motivation and satisfaction, as derived from activities that an individual does as part of the job, such as work and growth opportunities, empowerment, recognition, and achievement (Herzberg et al., 1959). The second dimension consists of factors that facilitate satisfaction and motivation, such as the organization, policies of the organization, supervision and support, working condition, interpersonal relations, and salary (Herzberg et al., 1959). Although these factors are extrinsic, if insufficiencies exist, these elements could serve as demotivators or dissatisfiers. Because this model provided a conceptual guideline in understanding the motivation of employees, it served as the theoretical guide in exploring and identifying HR recruitment strategies for LTC nurses.

Operational Definitions

Baby boomers: Baby boomers refer to members of the generation born from 1946 to 1964 (H. I. Kuo & Lu, 2013).

Geriatrics: A medical, nursing, and social work specialty associated with caring for the elderly (Isaacs, Jellinek, & Fulmer, 2019).

Limiting long-term conditions: Limiting long-term conditions are patient conditions that significantly influence patient care and experiences during an inpatient stay (Hewitson, Skew, Graham, Jenkinson, & Coulter, 2014).

Long-term care (LTC): McCall (2001) defined LTC as a continuum of social and medical services developed to provide support to people who live with chronic medical problems that hinder their abilities to perform everyday activities adequately.

LTC nurses: LTC nurses provide care to patients with illnesses or disabilities that require them to have extended care (Raudonis et al., 2002).

Recruiter: A recruiter searches and enlists the best qualified applicant within or outside of the organization for a job opening, in a timely and cost-effective manner to interview (Chen, Lee, Huang, & Ko, 2017).

Assumptions, Limitations, and Delimitations

The assumptions, limitations, and delimitations in this section were related to the participant's role. A researcher can define study limitations after recognizing boundaries (Leedy, Ormrod, & Johnson, 2019). Limitations such as the short time limit of the study may hinder the generalizability of the findings, while assumptions that participants would answer honestly may require justification. In this section, I also define the delimitations of the study.

Assumptions

Assumptions are claims considered true that have not been verified (Maxwell, 2012). I included only those assumptions critical to the meaningfulness of the study. There were several assumptions for this study. First, I assumed that participants who

opted to take part in this study were actively seeking to hire LTC nurses in Florida and constituted a diverse sample. The second assumption was that by using multiple interviews, I acquired enough data to reach a saturation point to answer the research question. I also assumed participants would answer the interview questions honestly.

Limitations

Limitations are potential weaknesses of the study over which the researcher has no control (Maxwell, 2012). This study had several limitations. One limitation was the small sample, which included HR recruiters from three LTC organizations. Having all participants from one geographic area may have limited the transferability of the results to nursing recruitment in other locations. I based the sample selection on purposeful sampling methods used in qualitative research in which a single case could be decisive in findings explaining best recruiting methods.

Delimitations

Delimitations are the factors defining the boundaries of a study that limit its scope (Maxwell, 2012). The current study was delimited to the geographic region of LTC organizations in Florida that were actively recruiting LTC RNs. This study involved one LTC recruiter per facility; the results may not be transferable to other populations or locations.

Significance of the Study

HR hiring strategies are of value to the health care organization and LTC industry. The goals of this study were relevant to the LTC industry from possible contributions to

effective practices of LTC businesses. Studying LTC industry hiring practices may lead to the development of new recruiting models.

Contribution to Business Practice

The findings of this study may be of practical use for human resource professionals. The findings may assist HR professionals in expanding their knowledge and awareness of recruitment practices for LTC nurses. In addition, the results may be used to increase hiring results, promote best recruitment strategies, and develop insight that may help LTC leaders recruit and hire skillful nurse recruits to LTC organizations.

Implications for Social Change

The implications for positive social change include the potential to alter hiring strategies over time to attract top nursing candidates to work in LTC facilities. Research in LTC recruitment may fill gaps in the literature that address behavior patterns of nurses equipped to work in LTC. The study findings may be used to prepare HR recruiters to determine best hiring methods. Assisting HR professionals who recruit top LTC nurse candidates may lead to improving emergency or critical care for patients, decreasing medical errors caused by declining nursing staff levels, and sustaining quality health care in local communities.

A Review of the Professional and Academic Literature

The objective of this qualitative multiple exploratory case study was to explore the perspectives of successful LTC HR recruiters on their strategies used to recruit LTC nurses. I conducted an in-depth inquiry to gain knowledge of recruiting strategies for RNs hired at LTC facilities. The review of literature focused on relevant studies on hiring

strategies for nurses from various peer-reviewed sources, such as websites, books, and relevant journal articles.

The 77 works addressed in this literature review include 69 peer-reviewed journal articles, five non-peer-reviewed journal articles, one dissertation, and two scholarly seminal books. Seventy-one (71) references out of 77 (92%) were published within the last 5 years, and 70 references out of 77 (91%) were peer reviewed. The literature review included strategies and processes used to recruit LTC nurses, and challenges that HR recruiters faced on the job. Other areas of the literature review addressed recruitment methods that influenced nurses to continue work in LTC or to seek different work.

I retrieved scholarly references for the literature review from (a) Walden University online library services, (b) Google Scholar, (c) ProQuest, (d) EBSCO, and (e) the Internet. I used various key words when conducting research for scholarly documents: *human capital theory, LTC business economics, RN recruiting, RN mental health recruiting, RN geriatrics recruiting, RN recruiter strategies, chronic diseases LTC, RN hiring statistics, LTC business statistics, health care recruiting LTC, health care job marketing, health care workforce shortage, LTC recruiters, LTC nursing culture, LTC businesses, RN hiring strategies, RN education LTC, Baby Boomers, RN recruitment strategies, mortality, morbidity, morale, LTC turnover, veterans affairs, LTC employer incentives*, or a combination of these key words.

In this literature review, I distinguish strategies crucial in recruiting qualified LTC nurses. During this review, I discuss the theoretical recruitment model based on the motivation-hygiene theory (Herzberg et al., 1959), populations that increase demand for

LTC, LTC workforce shortage, and hiring or recruiting strategies for nurses. I include these themes because these are relevant to the phenomenon being explored in this study. I incorporate the motivation-hygiene theory to assist in exploring the problem, as described in the literature regarding strategies that HR recruiters use to recruit LTC nurses (see Herzberg et al., 1959). In the next section, I focus on the patient groups that increase the demand for LTC nurses. Specifically, I investigate the factors causing the growth of specialized care.

Patient Groups That Increase the Demand for LTC

Patient groups with specialized needs contribute to the LTC health care environment population (Villalobos Dintrans, 2018). Identifying the health care population trends and demands allows for planning for the inevitably increased mortality rate in LTC (Ouellette-Kuntz, Stankiewicz, McIsaac, & Martin, 2018). Influencing factors include (a) aging LTC population with cancer, (b) chronic disease, (c) mortality concerns, (d) veterans, and (e) Alzheimer's and mental health needs (Ouellette-Kuntz et al., 2018).

Patient groups requiring LTC. Generally, older patients require longer care in the hospitals compared to younger patients. Injured trauma patients have at least one orthopedic injury and are 65 years or older (Peterson, Jiwanlal, Della Rocca, & Crist, 2015). The most common fractures are of ribs, distal radius, pelvic ring, facial bones, proximal humerus, clavicle, ankle, and sacrum (Kingsberg & Altman, 1970). Older adult patients with more severe injuries remain in the hospital longer, require greater use of resources after discharge, and die at triple the rate of the younger population (Urden,

2015). Higher mortality rates are common in the cervical spine, hip, and pelvic ring fractures (Hofmann, Prokuski, Allar, Tybor, & Ryan, 2018). As aging occurs and the older adult population grows, traumatic injuries directly influence mortality (Stein, et al., 2018). Hashmi et al. (2014) suggested that patient age and severity of injury are associated with higher mortality rates for patients who are 65 years and older.

Mortality rates and readmission rates might have an inverse relationship (Dharmarajan et al., 2017). Hospitals with lower mortality rates are likely to have higher readmission rates (Dharmarajan et al., 2017). Nevertheless, predictions about the mortality and readmission activities of patients within the LTC population are not yet well established (Clark, Ostrander, & Cushing, 2015). Reliable predictors of mortality tend to be weak predictors of readmission in LTC facilities. However, the odds of patients 85 years and older dying compared to patients 75 to 84 years old are not different. Severely injured LTC patients present significant risk factors for mortality (Aryee, James, Hunt, & Ryder, 2017).

McGilton, Tourangeau, Kavcic, and Wodchis (2013) studied the expected increase in the older adult population to determine appropriately skilled nursing staff requirements for LTC facilities. Resident populations inside LTC facilities require complex care (McGilton et al., 2013). Another issue regarding older adult patients is the aging of baby boomers. Pascala (2012) stated that by 2030, when the last baby boomers reach age 65, the U.S. population aged 65 and older would exceed 70 million, twice the number in 2000. More than 77 million baby boomers will increase the need for trained LTC professionals due to increased retirement rates (Colby & Ortman, 2014; McGilton et

al., 2013). The baby boomer population is vulnerable and requires the attention of trained and experienced RNs (LeVasseur & Qureshi, 2015). Recruitment of regulated nursing staff in these environments is essential.

Researchers considered the demographics and socioeconomic status of baby boomers who were most likely to require LTC in the future (Mudrazija, Thomeer, & Angel, 2015). King, Matheson, Chirina, Shankar, and Browman-Fulks (2013) added that, in 2010, the baby boomer population represented 26.1% of the U.S. population. In the same year, overall health status was lower when compared with the previous generation (King et al., 2013). Medicine and preventive health care measures improved significantly during baby boomers' lifetimes. More than half of baby boomers reported little or no physical activity, some smoking, and moderate drinking (King et al., 2013). Baby boomers are more likely to have hypertension, hypercholesterolemia, diabetes, and cancer. Statistics in this case have shown that trends were lower than the previous generation (King et al., 2013).

Health care must also meet the needs of the aging veteran subset, which frequently requires medical treatment. The U.S. Census Bureau (2013) emphasized that 12.4 million veterans over the age of 65 served in conflicts around the world. Shay, Hyduke, and Burris (2013) reported that goals of veteran care included transforming the veteran system and providing access for the veteran population. The increase in LTC patients has required veteran care to extend to noninstitutional settings to provide a mix of services comparable to those offered in the private sector for veterans (Colello & Panangala, 2017).

Aging generations and veteran populations are groups that frequently require LTC care; these populations experience high rates of chronic illness, including cancer. An aging population, especially one with cancer, creates challenges for health care facilities and providers (Durrani, 2016). Physicians diagnose cancer in this population at a rate of 53%, and the percentage of survivors is 59% in 65-year-old patients. Cancer is often only one of multiple coexisting health conditions of older adult patients.

In LTC, there is a professional workforce shortage of oncologists, geriatricians, and members of multidisciplinary care teams with expertise (Gilster, Boltz & Dalessandro, 2018). Similarly, there is a lack of LTC professionals to deal with these populations' high rates of chronic diseases. In a 2013 national survey, 44% of adult respondents reported helping a family member or friend with chronic disease management (Rosland et al., 2013). Rosland et al. (2013) noted that patients with limiting long-term conditions were more critical of their inpatient care quality compared to those with no limiting long-term condition. Overall, LTC chronic disease management influences individuals, families, and health services differently (Rosland et al., 2013). Care teams with similar patient goals benefit both patients and providers (Rosland et al., 2013).

People with limiting LTC conditions report poorer experiences and more problems with hospital care system, such as the treatment by nursing staff (Wei et al., 2015). This problem is compounded when physical illnesses are accompanied by mental health diseases and dementia, such as Alzheimer's (van der Wolf, van Hooren, Waterink, & Lechner, 2017). Alzheimer's disease and other mental health illnesses contribute to

increased demand for LTC patient care (Arias, Tyler, Oster, & Karlawish, 2018). In 2013, Alzheimer's disease was the most expensive condition in the nation, costing caregivers \$214 billion (Alzheimer's Association, 2014). Statistics from the Alzheimer's Association (2014) revealed that the disease was the sixth leading cause of death in the United States. Nurse caregivers in LTC facilities treat dementia, patients with an inability to perform activities of daily living (ADLs), and most neuropsychiatric symptoms (Alzheimer's Association, 2014).

Nurse shortage will influence a sizable population suffering from mental health illnesses, such as Alzheimer's disease; about 1 in 5 older adults has a mental disorder, and Karel, Gatz, and Smyer (2012) asserted that mental health disorders, including dementia, worsen with age. Health professionals have not adequately met the needs for behavioral health services, and the coming decade will present challenges requiring a need to double the number of LTC nurses and costs (Karel et al., 2012).

Due to the shortage of nurses, the debilitating long-term effects of mental health disorders and the inadequate responses from LTC leaders that pose the threat of higher costs in the future, additional clinical services, education, and research are essential to an aging society (Karel et al., 2012). To meet the needs of an aging population, LTC RNs, psychologists, and mental health practices will increasingly address primary care, dementia care, family caregiving services, decision-making capacity evaluation, and end-of-life care. These issues within LTC organizations are important to consider due to recruiting strategies for LTC nurses. LTC organization leaders must attract applicants

qualified to deal with the growing rates of cancer, Alzheimer's, mental health, and other chronic issues among vulnerable, aging, and veteran populations (Karel et al., 2012).

According to the motivation-hygiene theory of Herzberg et al. (1959), specific factors result in the workplace satisfaction of the employee, which are distinguished from factors that result in dissatisfaction. Other similar models for job satisfaction include Maslow's (1995) hierarchy theory and job characteristics model. Maslow proposed the theory to explain the general factors affecting motivation among humans, with the understanding that the simpler needs must be met before more complex requirements can be achieved. The hierarchy of needs consists of five factors, namely physiological needs, safety, belongingness/love, esteem, and self-actualization (Maslow, 1995). This theory, in the context of job satisfaction, had not received empirical support (Liu, Aunguroch, & Yunibhand, 2015) and was therefore not included in the conceptual framework for the current study.

Another alternative model is the job characteristics model (Hackman & Oldham, 1975). In this model, a work environment that promotes intrinsically motivating characteristics influences job satisfaction. Such characteristics include feedback, autonomy, task identity, task significance, and skill variety. These characteristics influence job satisfaction by affecting psychological states (Wan, Li, Zhou, & Shang, 2018). The job characteristics model received more empirical support than hierarchy theory (Hackman & Oldham, 1975); however, it was not appropriate as the conceptual framework for the current study because motivation-hygiene theory provided a model more in alignment with this study.

Based on motivation-hygiene theory (Herzberg et al., 1959), the recruitment process includes accurate assessments of what working for the company is like and the hiring expectations. To attract qualified and interested applicants, LTC organization leaders must be cognizant and communicative of the realities of the populations requiring LTC. In addition, when applicants require specialized experiences and skills, as LTC nurses do to deal with the aforementioned illnesses, LTC leaders must engage in strict quality-control processes before and during the hiring process.

Summary. In summary, the dramatic growth in the older adult population and the population requiring mental health care indicates a much higher demand for LTC capacities in the future (Graverholt, Forsetlund, & Jamtvedt, 2014; Hall et al., 2013; Karel et al., 2012; Rosland et al., 2013). With the increasing population of baby boomers who are about to reach retirement age, there will be an increase in potential patients who require LTC (King et al., 2013). The lifestyle of these baby boomers, as characterized by lack of physical activity and regard for fitness, further increases their likelihood of acquiring chronic physical illnesses (King et al., 2013). Because of the size of the baby boomer population, they are more likely to require LTC upon acquiring such illnesses compared to other populations (Hashmi et al., 2014; Krumholz, Lin, & Keenan, 2013).

Leaders of organizations must use practices based on factors that motivate LTC nurses, as described in the motivation-hygiene theory of Herzberg et al. (1959). Leaders can then recruit the nurses equipped to deal with these challenges. However, organization leaders may also consider factors that lead to the shortage of these workers. In the next

section, I continue the discussion with an issue related to the increasing demand for LTC nurses and the shortage of LTC workforce.

Long-Term Care Workforce Shortage

Ritter (2011) noted that in 2000, the nationwide shortage of nurses in the different health care departments and units was 6%, which was the equivalent to 110,000 nurses. This percentage had grown to 10% in 2005, which equated to 218,000 nurses (Ritter, 2011). Lartey, Cummings, and Profetto-McGrath (2014) and Ritter (2011) showed that the shortage in nurses was projected to increase and continue in the United States for the next 10 to 20 years. An understanding of the reasons for the shortage of LTC nurses was important for devising strategies to fill the vacant positions; hence, the discussion of the reasons for the shortage in supply of LTC nurses was included in this literature review.

Shortage due to population change. Ritter (2011) predicted the nursing shortage could grow to 29% by 2020 and that the number of people over age 65 would result in over 50% of the increase in RNs needed between now and 2020. The nursing workforce is also aging, thereby contributing to the nursing shortage (Donelan et al., 2014). As the aging baby boomer population doubles, so will the need for RNs in LTC (Donelan et al., 2014; Harris, Rosenberg, & O'Rourke, 2013; Resnick & Radulovich, 2014; Ritter, 2011).

Resnick and Radulovich (2014) reported that the American Geriatric Society found that the U.S. population was aging. Trained LTC RNs are in demand to care for older adults (Resnick & Radulovich, 2014). In 2010, there was one geriatrician per 10,000 adults 65 and older and one per 2,775 adults aged 75 and older (Resnick & Radulovich, 2014). Similarly, the U.S. Census Bureau (2013) expected that the

population of 65 and older would increase significantly from 43.1 million in 2012 to 92 million in 2060, which Harris et al. (2013) pointed out would require more LTC nurses. The health care need for all U.S. citizens will rise by 32 million people, increasing the number of health care providers needed (U.S. Census Bureau, 2013). These statistics indicate a significant gap that may cause issues in the LTC industry, as well as the increasing number of projected individuals who may depend on LTC nurses.

The projected increase in the aging population, dependent on the LTC industry for care, requires additional research into understanding the causes and possible strategies to tackle the shortage of LTC nurses. Employers in the LTC sector face a projected shortage of nurses credentialed in LTC because most LTC patients are geriatric (Lartey et al., 2014). Moreover, Academic Health Centers (AHCs) contribute to the shortage of geriatricians (Harris et al., 2013). Harris et al. (2013) noted that AHC faculties were not employing the models needed to improve senior care, which might hinder recruiting and training future geriatricians. A shortage of LTC RNs is imminent, and the lack of trained professionals affects the ability to deliver efficient and high-quality care to U.S. older adults (Lartey et al., 2014; Resnick & Radulovich, 2014); however, population change is not the only issue that contributes to the shortage of nurses, especially in the LTC division. The other issue that contributes to the shortage of nurses, especially in the LTC division, is the high turnover among LTC nurses.

Shortage due to LTC nurse turnover. Apart from shortages associated with the aging population, turnover of nurses is a cause for alarm, as it contributes significantly to the overall shortage of LTC nurses. Kagan and Melendez-Torres (2013) argued that

ageism specific to nursing was difficult to define and remedy, which would eventually lead to turnover. Conversely, Duffin (2014) stated that more than half of nurses surveyed wanted to leave their current employer. Duffin revealed out of 1,600 RNs, seven nurses were happy, and half said they considered leaving. RNs placed a high value on work-life balance, opportunities for career progression, and salaries. One RN out of five stated that the hospital's reputation was the first consideration when looking for a new job. The concept of life values was a determinant of an individual's work-related attitude and behaviors (Gahan & Abeysekera, 2009).

Brewer, Kovner, Green, Tukov-Shuser, and Djukic (2012) suggested that understanding organizational turnover was crucial due to high costs from replacing RNs in different health care settings. Turnover in hospitals is expensive, and almost 90% of new nurses work in hospitals (Brewer et al., 2012). Employers who can determine and match jobs with nurses have decreased turnover, which has indicated that work attitudes are distal determinants of turnover, and balancing attitude with workplace culture may lead to higher recruitment rates. Price and Mueller (1981) argued that turnover in organizations was identified by using three variables: work condition, job opportunities, and personal characteristics.

Li and Jones (2013) emphasized that nurse turnover is a global concern that affects the financial performance of health care delivery. Li and Jones calculated the turnover rate as 14% for bedside RNs and almost 28% for RNs in their first year of employment. In addition, Collini, Guidroz, and Perez (2013) found RN turnover averaged 14% between 2011 to 2013. Health care accounted for one out of every five new jobs

created in 2011, roughly about 297,000 jobs (Collini et al., 2013). Furthermore, Kennedy (2013) concluded that more than 26% of nurses left their positions within 2 years, although 92% went on to take another nursing job. Kennedy revealed a 10-year result showing that among new nurses, the rate of turnover within the first year was 13%. Employment projections in 2013 indicated a need for 1.2 million more nurses by 2020 to account for industry growth and replacement as RNs left the workforce (Collini et al., 2013). These statistics indicated the high turnover of LTC nurses in the private sector that, coupled with the projected increase in the need among older adult population, presented a need for additional research.

The turnover rate for nurses has become an alarming phenomenon. Employers faced with nurse shortages may experience worsening patient care and limited access to health care (Li & Jones, 2013). Moreover, with the increasing turnover, health care organizations tend to have higher recruitment rates, which require spending more money to replace nurses and involve losing the intellectual capital of nurses who leave (Collini et al., 2013). Kennedy (2013) acknowledged that recruitment of new RNs was a large investment due to the need for extensive training programs, in-service, and orientation to attract new candidates. The estimated cost of newly licensed RN turnover exceeds \$856 million and varies between \$1.4 and \$2.1 billion for society. In addition, with the impending increase in demand for nurses, especially in the LTC sector, having a high turnover may magnify the shortage problem (Banaszak-Holl, Castle, Lin, Shrivastwa, & Spreitzer, 2013).

Summary. Given the demand for more nurses because of population changes, LTC RN recruiters have faced recruiting deficits (Smith et al., 2013). Harris et al. (2013) argued that the need for nurses was evident. However, attaining the needed graduation rate to produce adequate numbers of nurses has proven a challenging task (Harris et al., 2013). Attrition rates of nursing students were high and problematic for many nursing programs. A total of 75,000 nursing applicants did not succeed in nursing programs in 2011 (Harris et al., 2013). Nontraditional students who are older, ethnically diverse, or enter college with varying degrees are at risk for attrition. Harris et al. (2013) and Smith et al. (2013) used demographic, personal, and academic factors to identify at-risk students.

I continue the review of literature in the following section by expanding the scope of the review. In the previous sections, I provided evidence regarding the burgeoning numbers of older adults and mental health patients in the United States and resultant LTC nurse shortage. In the next section, I focus on the process of hiring LTC nurses.

Hiring or Recruiting LTC Nurses

Employers face increasing difficulty in recruiting experienced nurses, especially when specialized skills are needed (Johnson, Butler, Harootunian, Wilson & Linan, 2016). Exploring recruiting practices is important to understand the shortage of nurses in the LTC industry. Moreover, as is evident from the analysis of Herzberg et al. (1959) in the motivation-hygiene theory, several major dimensions of recruiting include timing, messages, sources, and the representatives of the organization. A recruitment strategy

should include all these dimensions to attract appropriate applicants who would benefit the organization.

In the context of LTC patient care, the system demands a comprehensive approach to patient care, caregiver support, and delivery system redesign (Salmond & Echevarria, 2017). Bishop (2014) further added that the organization of nursing for LTC work was under cultural change. HR management and professionals search for high-performance nurses who fit in new structure work systems that offer increased autonomy, self-managed teams, and a flattened supervisory hierarchy. Successful high-performance work systems entail intensive recruitment, screening, and ongoing training of workers.

Employers' aims and objectives include recruiting competent LTC nurses suitable to work in a positive nurse practice environment (Johnson et al., 2016). The RN environment is essential to nursing satisfaction, and subsequently to nurse-sensitive patient outcomes (Dempsey & Reilly, 2016). Patient care demands are critical considerations when recruiting and developing strategies to hire RNs. Care transitions are improved patient care by creating a framework for incorporating LTC principles. Elements that increased holistic care include (a) increased transitions, (b) tailored care (c) built recovery plans, (d) predicted preventable admissions, and (e) adopted palliative care (Arbaje et al., 2014).

LTC RNs' hiring qualifications. The hiring qualifications for LTC caregivers can be understood in the framework of credentialism theory. The conclusions based on the theory have indicated that credentials create limits in the supply of labor in different sectors by not providing access to people who do not possess specific credentials that, in

the context of LTC nurses, may provide limited labor supply of LTC nurses to recruiters (Johnson et al., 2016).

Credentialism often results in providing individuals advantages in the labor market. In general, the credentials are educational. Conversely, in the context of LTC, DePasquale, Bangerter, Williams, and Almeida (2015) stated that LTC caregivers had dual roles in health care as family caregivers and professionals. Wohlgemuth et al. (2013) defined three themes regarding LTC nurses that the researchers considered when evaluating qualifications of nurse applicants: dual role had advantages and disadvantages, emotional impact of dual roles, and professional impact of family caregiving. Personal caregiving experiences influenced professional insight, empathy, and advocacy when caring for patients (Wohlgemuth et al., 2013). Credentials required for LTC nurses are not limited to educational qualifications. Such requirements from the applicants may result in limited supply of labor for the LTC human resource recruiters.

Important elements and strategies when hiring RNs. Geriatric LTC nurses were essential in treating LTC patients with multiple chronic illness and concurrent acute problems in older adult patients (Lam et al., 2018). However, recruiters in the geriatric workforce have not kept up with health care needs of aging populations, particularly those in nursing homes (Johnson et al., 2016). As Anen and McElroy (2015) reported, recruiters faced a resource-limited environment of newly hired nurses. HR recruiters must consider increasing expectations for service, acuity levels, and hiring efficiency to match patient demand (Anen & McElroy, 2015).

RN vacancies have continued to rise in health care businesses, and the cause of slow hiring stems from the recent recession (Johnson et al., 2016). Recruiters must develop new hiring practices and adapt to current market conditions to fill vacancies in LTC. To offset the retirement and turnover issues among LTC nurses, employers must develop new employment strategies to induce older nurses to extend their working lives (Lam et al., 2018). These HR recruiters often lack strategies to recruit LTC nurses (Gilster, Boltz & Dalessandro, 2018).

The loss of RNs threatens the continuity of health care delivery. Banaszak-Holl et al. (2013) showed that certain approaches and strategies might minimize turnover or improve the status of LTC RN supply. Banaszak-Holl et al. associated hierarchical internal process and group developmental values with lowered RN turnover. Banaszak-Holl et al. found that having a flexible organizational culture helped institutions in retaining nurses. Employer services with a stronger focus on customer needs had higher turnover rates amongst staff (Banaszak-Holl et al., 2013). Therefore, organization leaders must include these as part of the overall organizational performance to promote recruitment of qualified nurses, especially in the LTC sector.

Importance of systematic recruitment. A systematic approach to recruitment and selection of nursing vacancies is essential in attracting applicants and assessing candidates when making final hiring decisions (Fletcher et al., 2012). Valentine, Hollingworth, and Eidsness (2014) found that informal recruitment strategies filled the best jobs internally. Four major activity areas of recruitment plans included (a) formal recruitment, (b) informal recruitment, (c) selections, and (d) rewards (Valentine et al.,

2014). Similarly, Beardwell and Holden (1997) argued that recruiting nurses required a systematic approach to goals, priorities, and philosophies of job candidates. Recruitment and selection of candidates included defining vacancies, attracting applicants, and assessing candidates to make a final hiring decision. Therefore, following such a systematic approach to hiring is essential to recruitment. This approach was related to Herzberg et al.'s (1959) motivation-hygiene theory in the context of a hiring process where a systematic approach was necessary to understand the goals, priorities, and philosophies of job candidates, as these affected the job satisfaction or dissatisfaction and the job motivation of the individual.

Importance of communication and interaction with applicants for recruitment.

Fletcher et al. (2012) found that having good communication was important in ensuring recruitment of specialized nurses (e.g., LTC nurses). Successful recruitment was predicted by an awareness of research and proper communication of perceived patient barriers and perceived individual benefits for clinicians (Fletcher et al., 2012). Similarly, Tourangeau, Thomson, Cummings, and Cranley (2013) found that employers used different strategies for acute care nurses to promote effective recruitment of qualified applicants, who would ultimately remain in the organization. Tourangeau et al. highlighted that communicating or referring to incentives during recruitment was essential to hiring employees who would remain employed and would not easily leave the company. This finding was related to Barber's (2003) recommendation for accurate and honest communication between the applicant and the organization. This information

would include elements that made the company attractive, hiring expectancies, and likelihood of a job offer and acceptance.

Walker et al. (2013) posited that research enhanced recruitment and increased job seeker attraction to businesses. Walker et al. emphasized the importance of controlled communication throughout the recruitment process, as Fletcher et al. (2012) did. Walker et al. (2013) noted employers knew about potential job candidates by perceptions associated with recruitment interactions, influences, and job attraction. Findings from existing research indicated that organization leaders who effectively managed communication throughout the hiring process achieve recruitment goals (Fletcher et al., 2012; Walker et al., 2013).

Use of technology in recruitment. Zelenskaya and Singh (2011) observed that employers used technology when recruiting job candidates. A recruiter can use new technologies to identify a candidate's skills. Computer-based simulated virtual environments allow interactions between people in real time from practically anywhere. Zelenskaya and Singh evaluated the employer's perspective, advantages, and challenges using this model when recruiting potential employees. Online job fairs allow employers to reach out to applicants to recruit the best qualified. This method levels the field for those who apply (Zelenskaya & Singh, 2011).

Similarly, Brock (2013) noted that the recruitment, selection, and retention process for new and current employees played a significant role in maintaining a competitive advantage with technology that enabled a more efficient and successful hiring strategy. Practical yet strategic steps to using technology while recruiting

candidates can facilitate success in a changing economy and guard against implications and consequences of failing to meet hiring goals. Technology and consistent recruiting efforts yield positive results for employers (Brock, 2013).

Training as part of recruitment. Sustaining the training environment is an important factor in recruiting LTC nurses (Sherman et al., 2013). Having a training program enables the organization to filter qualified applicants based upon their performance. However, Pittman, Herrera, Bass, and Thompson (2013) questioned whether residency programs and training provided greater benefits to nursing recruits. Hospitals officials who offered residency programs attracted new nurse graduates' long-term (Pittman et al., 2013). Communicating benefits, such as residency and other training, is part of accurate recruitment message because such factors may positively influence employee motivation, as posited by Herzberg et al.'s (1959) motivation-hygiene theory.

Considering nursing knowledge during recruitment. Recruiters who hire LTC nurses make decisions involving vetting essential skills, knowledge, and abilities needed to perform the job. Health organizations officials are sometimes reluctant to share employment reference information about staff beyond the dates of employment and positions held, thus making the decision to hire more difficult (Malvey, Fottler, & Sumner, 2013). Recruiters may be at risk of hiring the wrong employee or overlooking qualified candidates (Jiang, Lepak, Hu, & Baer, 2012).

Investigators have linked nurses' knowledge to successful organizational and patient outcomes (Covell & Sidani, 2013). The role of the recruiter is to hire qualified

LTC nurses with competencies that align with the health care organization's goals. Job interests and experiences are key elements in matching professionals to the work environment (Haut & Madden, 2015).

Recruiters hiring LTC nurses are currently overwhelmed in designing new strategies to meet RN vacancy demands. Unprecedented change in technological, professional, and social realms defines the nature of health care and delivery (Fitzsimmons & Rose, 2015). To keep up with changes in recruitment and new strategies, recruiters must develop practices that save time and costs (Fitzsimmons & Rose, 2015). Hiring nurses with the right set of skills may be an effective strategy to consider when recruiting.

When utilizing the right mix of nursing skills, nursing outcomes and safety are less likely to be compromised (Browne, Cashin, Graham, & Shaw, 2013). Decreasing the vacancy rate with proven hiring strategies may improve workflow, mitigate recruitment shortages, and ensure program sustainability in health care delivery (Cramm & Nieboer, 2014). To attract nurses with desired skills, LTC organization leaders must first determine which skills are part of their ultimate recruitment goals and must develop a rating system for applicants to measure the presence or absence of the desired skills (Barnard, Dent, & Cook, 2010).

In this section, I discussed the increase of patient groups requiring LTC and the shortage of LTC workforce in the previous section. In this section, I also discussed the process of hiring LTC nurses. In the final section, I present a summary of the review of literature.

Summary

Based on literature, the demand for LTC was due to the increasing population of aging or older adult group, as well as those with severe and chronic physical and mental health illnesses (Graverholt et al., 2014; Hall et al., 2013; Karel et al., 2012; Rosland et al., 2013). Moreover, King et al. (2013) expected the demand for nurses in the LTC division in health care to increase with the changes in population, especially with the impending retirement of baby boomers with a high likelihood of acquiring illnesses that might require LTC. On the supply side, shortage in LTC nurses occurs because of the increase in the population that require LTC (Graverholt et al., 2014; Hall et al., 2013; Karel et al., 2012; King et al., 2013; Rosland et al., 2013), as well as turnover issues among nurses (Collini et al., 2013; Li & Jones, 2013). To address this issue, future researchers must explore recruitment of LTC nurses.

In this study, I focused primarily on nurse recruiter performance. There was a need for refined employer recruitment strategies to focus on hiring qualified, highly-skilled LTC nurses. However, there was a literature gap on generating empirically-based findings regarding the effectiveness of hiring strategies for LTC nurses. Researchers and LTC organization leaders might apply the analysis on motivation and job satisfaction in Herzberg et al.'s (1959) motivation-hygiene theory to fill this gap.

In this section, I discussed the possible contribution of the study. The healthcare environment would have a strong influence on nurse recruiting in LTC facilities in Florida. As the number of baby boomers continues to climb, so will the demand for LTC patient care. Employer strategies to recruit qualified nursing professionals are critical to

sustaining healthcare businesses. Using a qualitative case study approach, I explored recruitment characteristics involved in hiring LTC nurses in three Florida organizations. A qualitative exploration of this discipline led to more awareness, understanding, and other useful strategies for recruiting qualified LTC nurses.

Transition

In the first section of this study, I covered the background of the study, the problem, the research question, conceptual framework, the significance of the study, and a review of the professional literature. In Section 2, I describe participants, research method, research design, role played in the research process, description of the case, and interview questions. Section 2 contains a description of case selection, why the research topic is valuable and has personal relevance, and how the results of the study may provide implications for social change. Section 3 includes presenting the analysis of the findings in detail. The analysis includes how the findings support the conceptual framework of the study and the data collected in the literature review.

Section 2: The Project

In this section, I discuss the details of the project, which include information about the role of the researcher, participants, research method, research design, description of the case, population and sampling, ethical considerations, instruments and technique for data collection, organization technique and analysis method for the collected data, and interview questions. The purpose of this section is to provide a comprehensive description of the details related to how this study was conducted.

Purpose Statement

The purpose of this qualitative multiple exploratory case study was to explore the perspectives of successful HR recruiters regarding their strategies used to recruit LTC nurses. I used a population of three LTC HR recruiters from three different nursing facilities in Florida. I used purposive sampling to include participants from a population of first-level LTC care HR recruiters in Florida whose organizations experienced a downsizing of more than 20% of their personnel.

The study findings may influence social change by contributing knowledge on how to recruit experienced nurse professionals in the LTC setting. Enhanced recruitment of experienced LTC nurses may improve community health care and the delivery of LTC services (Brazil et al., 2012). The potential improvement in community health care and delivery of LTC services resulting from the prevalence of experienced LTC nurses may increase satisfaction of all stakeholders, including LTC nurses, organizations, and patrons of LTC services in the community. Regarding social change, the findings of this study may assist HR professionals who recruit LTC nurses in employing successful strategies

to recruit top LTC nurse candidates, which can lead to improving emergency or critical care for patients, decreasing medical errors caused by declining nursing staff levels, and sustaining quality health care in local communities.

Role of the Researcher

My role as the researcher was to design the research and collect, interpret, and analyze the data. Leech and Anthony (2011) stated that the role of the researcher was to propose a valid topic of study, amass data, and finalize outcome results. A researcher's role throughout all aspects of data collection is critical to the research process (Yin, 2017). Lincoln and Guba (1990) argued that humans were the most appropriate instrument needed for scientific inquiry. The case study design enables a researcher to obtain a deep understanding of individual experiences (Yin, 2017). Researchers must have documented research protocols to mitigate bias and ensure the use of ethical principles (Yin, 2017).

The data collection method in the current study was semistructured interviews with LTC HR nurse recruiters. The research strategy that I pursued ensured that ethical standards were in accordance with specific guidelines set forth by the Belmont Report (U.S. Department of Health, 2014). I was the primary instrument for data collection and performed all interactions with participants. HR recruiters participated in semistructured interviews, and I asked open-ended interview questions guided by an interview protocol. Qualitative questions during interviews are used to understand participants' experiences through their words and perspectives (Yin, 2017).

Gibson, Benson, and Brand (2013) noted that ethical research proceedings protect participants. I used textual data collection methods in the form of field notes and transcripts to develop analytical categories and explanations. I sought proper permission and followed protocols defined in the Belmont Report (see U.S. Department of Health, 2014). The findings of the Belmont Report indicated that a researcher should follow fundamental ethical principles when studying human subjects (U.S. Department of Health, 2014). In accordance with these suggestions, I ensured respect for members, beneficence, and justice to let each person know that each had a right to decide to participate in the research.

I had no personal relationships with the participants, which assisted me in remaining objective regarding the outcome of interviews, and I viewed data through an objective lens of trustworthiness. I aimed to minimize bias by limiting subjectivity during meetings. I followed the suggestions on data collection made by Roulston (2014) that encouraged interactions and answered challenges to questions. I planned to achieve fairness by representing viewpoints equitably and avoiding biased interpretations by asking open-ended questions and accurately recording responses.

Participants

I used purposive sampling to recruit participants from a population of first-level LTC care HR recruiters in Florida who had received appraisal from their organizations for excellence in recruitment practices. The participants were selected on the basis of the research purpose and research questions, which required studying HR professionals to explore their recruitment strategies and suggesting recommendations based on their

perspectives to strengthen the LTC nursing staff recruitment process. I obtained participants' names by contacting the organizations and providing information about the purpose of the study. I used e-mail communication to confirm each participant.

Once I obtained approval from employers, I introduced myself to study participants and establish the best means to communicate outside the formal data collection session, either by phone or e-mail. I made a sincere effort to be respectful, caring, and forthcoming at all times during the research process. I was prompt in all responses and empathetic when communicating with participants face-to-face. I anticipated recruiting at least three HR professionals from each of the three study sites. Inclusion criteria for research participation were (a) HR professional involved in LTC nurse recruitment and (b) employed for at least 3 years. Every study participant received the same high level of protection during the study.

Research Method and Design

The objective of this qualitative multiple exploratory case study was to explore the perspectives of successful LTC HR recruiters regarding their strategies used to recruit LTC nurses. The qualitative nature of this study predisposed me to collect data based on the personal experiences of LTC HR professionals.

Research Method

Denzin (2010) defined methodology as a process by which a researcher gathers information from his or her surroundings to illustrate experiences through shared meanings. Ellis and Levy (2008) explained the three approaches as quantitative, qualitative, or mixed methods. I selected a qualitative methodology to (a) investigate, (b)

understand, (c) describe, and (d) discover. Yin (2017) argued that qualitative inquiry is useful for exploring and understanding individual perceptions, decisions, and processes. Instead of providing a broad view of a phenomenon generalized to the population, I used qualitative analysis to resolve a current situation and describe circumstances for a group. Qualitative researchers evaluate data to identify emerging themes, while quantitative researchers test hypotheses (Hanson, Balmer, & Giardino, 2011).

According to Marshall and Rossman (2015), qualitative methodology is appropriate in studies in which the goal is to explore a human or social problem. In the qualitative method, the researcher gains the ability to use participant observation, in-depth interviews, and focus groups that are smaller in size (Marshall & Rossman, 2011). In the quantitative research method, the researcher uses credible, transparent, and analyzable data in larger cases (Marshall & Rossman, 2011). The quantitative method is appropriate if the goal of the researcher is to conduct a study on a larger population and gather quantitative data for generalizable conclusions (Marshall & Rossman, 2011). However, the purpose of the current study was to obtain a descriptive understanding of HR strategies that recruiters use to recruit LTC nurses by exploring the perspectives of HR professionals from organizations in the LTC industry. Therefore, the qualitative method was appropriate given the purpose of the study.

Research Design

In the qualitative research method, there are a number of design options available to a researcher, such as case study, ethnography, and phenomenology (Merriam & Tisdell, 2015). The case study design is used to explore bounded systems or cases by

using data collected from multiple sources. The ethnographic design is used to examine social groups or cultures. Finally, the phenomenological design is used to investigate human lived experiences. I selected the case study as the most appropriate design for this study.

For reasons suggested by Yin (2017), I used a case study design to gain a comprehensive understanding of a particular issue. I conducted a comprehensive exploration of the HR practices for recruitment in the LTC industry to identify the reasons for higher vacancy and to provide recommendations for best practices. I did not use the phenomenological design because I explored HR professionals' perspectives; the lack of research focusing on LTC recruitment of nursing staff required a research design involving multiple qualitative data sources. Finally, I did not select the ethnographic design because I did not focus on interpreting social groups and cultures.

I chose a case study design to explore multiple cases over time through detailed, in-depth data collection involving multiple sources of information in a rich context. In addition, I used a case study design to explore how or why recruitment strategies worked. Cronin (2014) advised that researchers used the case study design to validate data and substantiate decisions; furthermore, the case study was an alternative to a survey-based inquiry of results in real-world settings. A case study design is more suitable than other models because of its focal point on refined recruiting strategies as an alternative to practices (Zivkovic, 2012). The case study design is used to explore a bounded system or a case over time. I aimed to study how a process worked through data collection from

three sources: semistructured interviews, document review, and archival records. The case study design was an appropriate choice.

Data saturation occurs when the collection of additional data provides minimal new information regarding a particular issue (Morse, Lowery, & Steury, 2014). Saturation of themes might come from differing numbers of participant interviews. I used purposive sampling to include participants from a population of first-level LTC HR recruiters in Florida whose organizations experienced a downsizing of more than 20% of their personnel. The number of participants is not required to be large because qualitative studies are more focused on human experiences rather than numerical data (Merriam & Tisdell, 2015). Using four participants was considered appropriate for this study because the data required for the research could be achieved through a small sample. I determined saturation when I did not receive significant new information on my fourth interview, so in this study, I did not include redundant data that I gleaned in my fourth interview. I followed Morse et al. (2014) during this process.

Population and Sampling

I focused on exploring the strategies used by HR professionals in LTC organizations for recruiting nursing staff and making recommendations by studying participants from a population of first-level LTC HR recruiters in Florida. This selection was based on findings that organization leaders experienced a downsizing of more than 20% of their personnel. In accordance with the case study design, I selected four participants for interviews. Trotter (2012) noted that the ideal size for a qualitative study sample is the number needed to achieve data saturation. A sample size of one participant

is satisfactory in a qualitative study when no new information or themes are observed in the data (Dworkin, 2012). I targeted a purposeful sample of three HR recruiting specialists who hired at least three LTC nurses per quarter. Shorten and Moorley (2014) stated that selecting the appropriate population sample is pivotal to ensuring that research questions will be answered.

Robinson (2014) stated that the population of participants should meet criteria related to the research topic. When selecting participants for my study, I used recruitment websites, social media, and state databases. I completed a systemic analysis of the problem and highlighted the patterns that emerged from the data until the factors that drove the purpose of the study emerged. Using purposeful selection limits cases and allows the researcher to gain knowledge to support data identified in the literature review (Hillen, Onderwater, Van Zwieten, De Haes, & Smets, 2012).

The researcher can select a sampling strategy among the following methods: (a) nonprobalistic, (b) probabilistic, and (c) census. Nonprobalistic sampling does not ensure that all members of a population have an equal possibility of being selected (Lucas, 2014). Probabilistic sampling occurs when members of the target population have an equal possibility of being selected (Lucas, 2014). The census-based sampling method accounts for 100% of the targeted population (Martínez-Mesa, González-Chica, Duquia, Bonamigo, & Bastos, 2016). I used nonprobalistic sampling to outline each element, topic, and purpose of research.

I used nonprobalistic sampling for participants to obtain the required information at each site. Cater and Justis (2009) used purposeful sampling in selecting participants

from various industries. I used this sampling method to obtain thick, rich data relevant to the issue in the study, with participants who might offer useful descriptions of their experiences related to the situation. I followed Patton (2002) in this process. This study's purposeful sampling included the type of facility, HR professional, and employees involved in hiring strategies for recruiting LTC nurses. Palinkas et al. (2013) stated that representative cases could yield purposeful analysis of the research topic or question. I used ethical research practices of respect, informed consent, and doing no harm to ensure satisfactory analysis of the data. I continued sampling until I recognized no new data were forthcoming. Lastly, notes were taken during participants interviews to meet methodological triangulation as suggested by Phillippi and Lauderdale (2017).

Ethical Research

For ethical protection of research participants, I acquired permission from the Walden institutional review board (IRB 11-28-18-0306886) prior to collecting data for this study. After selecting the prospective research sites and participants, I obtained permission from the appropriate authorities to conduct my interviews and sent a participation inquiry to all participants who met the criteria for participation. Before I began my interviews, I explained to all participants that their willing participation was required. If participants agreed to continue with the interview, they acknowledged their consent after receiving the informed consent form.

Participants received fair and ethical treatment in alignment with the Belmont Report (U.S. Department of Health, 2014). At all times, I respected the privacy of participants, obtained their informed consent, and treated them fairly. I disclosed

potential risks and tasks, and I addressed any questions or concerns they had prior to and during interviews. I supported the principles of respecting and not doing harm to participants in the study. I did no harm. I maximized benefits by accurately collecting subjective data and minimizing possible harm to respondents by not showing surprise or disapproval with a person's response. I was friendly, courteous, conversational, and unbiased. I asked questions in a conversational tone and avoided awkward pauses. The study participants received a copy of the informed consent via e-mail.

The participant consent form included disclosures for withdrawal from the study. The candidates could withdraw from the study at any time with no penalty. If an employee participant wanted to stop an interview at any point, he or she could do so and could request the deletion of the partially recorded interview by either contacting me directly in person or by sending an e-mail at any time. All communication with the participants directly and through the administrators included advice that there were no negative effects or consequences should participants choose to withdraw from the study at any point.

To maintain participant privacy, I uses pseudonyms known only to me. All interview audio recordings, transcripts, participant code sheets, and study data will remain confidential and locked in a filing cabinet at my residence during and for 5 years after completion of the study. After the 5 years, I will destroy paper data by shredding. I used a three pass overwrite process for electronic, audio, and digital data enusures removal of data, a process described by Leong, Bahl, Jiayan, Siang, and Lan (2013).

Data Collection Instruments

As the researcher, I was an active participant and part of the data collection process in this study. Leech and Anthony (2011), Merriam and Tisdell (2015), and Yin (2017) stated that the role of the researcher was to predispose a valid topic of study, amass data, and finalize outcome results. I interviewed three HR professionals in three LTC organizations, which were selected to include first-level LTC care HR recruiters in Florida to collect data using semistructured interviews with preselected questions from organizations experiencing a downsizing of more than 20% of their personnel, as suggested by Marshall and Rossman (2011).

The goal of choosing semistructured questions was to reveal perceptions and ideas of LTC recruiters. The inquiry method of semistructured question is used in qualitative studies, and it consists of a set of questions that prompt discussion, enabling the researcher to explore specific responses or themes (Yin, 2017). Qualitative research requires samplings that are useful to HR recruiters and offers data to analyze using constant comparison method (Slayter, Williams, & Michael, 2015). I used the central research question to maintain my study focus and subjects' answers to my interview questions revealed their experiences implementing and practicing hiring strategies. Before implementing a full study, I ensured the interviews remained trustworthy and reliable by conducting a pilot interview, assessing the results, and making revisions to my interview protocol and questions as necessary.

Prior to commencing the study after IRB approval, I used an interview protocol to guide the interviews. The format for these meetings was face-to-face with each interview

lasting 30 to 60 minutes. In-person, I collected a signed informed consent form from each participant. I found it necessary to conduct telephone interviews for response clarification during the member checking process. To ensure the accuracy of data collected, I audio recorded all interviews with a digital recording device. A qualitative researcher develops trust between researchers and participants to increase exploration of how perspectives, experiences, and relationships change over time (McInnes, Hoddinott, Britten, Darwent, & Craig, 2013).

Data Collection Technique

The data collection process began with the selection of the participants. I focused on exploring the strategies used by HR professionals in LTC organizations for recruiting nursing staff and making recommendations by studying participants from a population of first-level LTC care HR recruiters in Florida. I obtained the information regarding first-level LTC care organizations in Florida based on publicly available information, particularly via Florida Health Care Association, an organization that is dedicated to advocating LTC providers. I reviewed LTC business RN job descriptions, hiring and pay incentives, shifts offered, and work-related and facility conditions of relevant publicly available information on the website and social media networks of LTC facilities. I made a list of 10 organizations that met the inclusion criteria for the study. An introductory phone script was emailed to interview participants (see Appendix A). I contacted three HR recruiters identified through publicly available information about their organizations and conducted an informal conversation regarding the research study, its purpose, and the potential significance of the findings. I inquired the HR recruiters to ensure they had

hired at least three LTC nurses per quarter and, once ensured, their willingness to partake in the study. After obtaining IRB permission, I distributed informed consent forms via email to three selected HR recruiters, to account for attrition. The recruiters were encouraged to ask any question they may have regarding the study as well as their rights, but there were no questions. The participants were asked to reply to the email “I Consent” and return the informed consent forms via email to confirm their participation in the study, which was ensured before beginning the interview scheduling process.

Thomas and Feldman (2012) stated the employer’s venue was best suited to conduct face-to-face interviews to empower and engage participant’s voice. Weger, Castle, and Emmett (2010) stated that the workplace office or conference area offered a comfortable setting to collect data. Concepts gathered during interviews required active listening, typing interview responses, identifying themes, interpreting meanings, and reporting a complete description of participants. To conduct the interviews, I used an interview protocol within the informed consent document that described the process (see Appendix B). I scheduled semistructured interviews for a time and date mutually agreed on by the participant and myself. Leibold, Holm, Raina, Reynolds, and Rogers (2014) suggested researchers should use a private venue to interview participants permitted feelings to emerge through words, facial expression, and body language. Accordingly, I arranged semistructured phone interviews at the workplace in private rooms that allowed for privacy.

Bourne and Robson (2015) stated interview participants had an honest and open interaction with a neutral and non-judgmental environment. Before beginning the

interview, I reminded the participants of their rights by reading the informed consent forms and inquired if they had any question before beginning the interviews. Before beginning the interviews, I turned on a standalone Sony M-530 mechanical tape recorder, the permission for which the obtained in the informed consent form. Each interview lasted for 60 to 70 minutes. Through the use of a standard interview protocol, I asked the same interview questions to each participant. The interviews were based on open-ended questions. I presented each research question and then allowed the participants' responses to carry the conversation, ensuring my input was limited to providing a direction to the responses that was in accordance with the research. I gathered data from participant interviews and relevant, public documents. Following the completion of the interviews, I thanked the participants for their time.

Data Organization Technique

Following the completion of interviews, I began the data transcription process. I produced the transcripts without help from third party in order to ensure data confidentiality. I labeled each participant's file folder as *Participant 1* through *Participant 3* with colored labels. Using the audio recordings of the interviews, I developed the transcripts using MS Word. All personally identified information was removed from the transcripts during this process. The final transcripts were saved in my personal computer, which was protected by a password. Physical data resulting from the data collection were stored in locked cabinet. Both the digital and physical data will be stored safely for 5 years. After 5 years, I will destroy hard-copy data by shredding and use a three pass overwrite for electronic and digital data (Leong et al., 2013).

Data Analysis

After preparing the transcripts, I emailed a copy of each transcript to the respective participant via email to conduct transcript review. I encouraged each participant to read and review his or her transcript and suggest any feedback to ensure final transcript accuracy. I focused on theme correlation by conducting the literature review, analyzing the participant data, public documents, and using my conceptual framework of motivational hygiene theory. I compared the motivational hygiene theory factors that influenced employee job satisfaction and dissatisfaction identified with the conceptual framework and any new studies published since beginning my study. After confirming there was no feedback for change in the transcript and the transcripts were approved by the participants, I began the data analysis process.

After the transcript review, associated member checking validation, and expansion of identified points drawn from the semistructured interviews, I began the process of data analysis using coding software. NVivo 10 is a software platform that compiles and analyzes unstructured data, which allows a researcher to interrogate data that aids developing ideas and trends (Jones, 2014). The information was separated based on the major themes that developed from the collected data. I focused on critical themes and theme correlation by conducting the literature review, examining all participant data, and using the conceptual framework. I compared different themes that I identified with the conceptual framework and the factors that led to job satisfaction. To process the qualitative data that were collected, I used NVivo transcription, a voice-activated software to import textual transcripts into NVivo 10. The method of data analysis

involved (a) compiling, (b) disassembling, (c) reassembling, (d) interpreting, (e) and concluding known as *coding*. I used NVivo 10 software to store, categorize, and visualize data in one place, which I found helpful, and I would highly recommend this practice utilizing NVivo 10. I based this process on work from Yin (2017).

Reliability and Validity

In this section, I describe the measures taken to ensure reliability and validity of data in this study. As stated by Houghton, Dymrna, Shaw, and Murphy (2013), the flexible nature of the qualitative research should be embraced by using strategies to ensure rigor, reliability, and to determine the validity. In this section, I discuss strategies used to ensure the flexibility of qualitative research that does not overshadow the findings of the study.

Reliability

Methods to enhance the reliability of data include software to analyze formalized interviews that check transcripts for errors (Barratt, Choi, & Li, 2011). I increased the reliability of this study through member checking to build trust between myself and the participant and I allowed each participant to check my interpretation of the responses prior to inclusion in the final report, a practice suggested by Carlson (2010) in the context of qualitative studies. I used member checking to assess the adequacy of data results and to confirm particular aspects of the data. Member checking further reinforced dependability that data collected for the study were reliable.

In qualitative design, reliability requires accuracy and proper documentation of changes and surprise occurrences (Lincoln & Guba, 1990). I documented unexpected

events that might influence the subjective data provided by the participants to evaluate negligence or errors made to improve some degree of dependability. Barusch, Gringeri, and George (2011) suggested that qualitative research methods of checking reliability included member checking and thick, rich description of the data. To further ensure reliability in this study, I checked (verified) the accuracy of the interview responses using member checking. I had each participant validate the accurate interpretation of the intended message for each question so I could ensure the alignment between the purpose of the proposed study and the central research question.

I used multiple sourcing and methods during observations to increase accuracy. I based this process on Marshall and Rossman (2011). The narrative recorded included a descriptive picture of the participants, setting chosen, and interactions to identify boundaries adequately.

Validity

Qualitative researchers substantiate the trustworthiness of their studies through measures including validity, credibility, transferability, and confirmability. Lincoln and Guba (1990) recommended that qualitative researchers should make sure that the data supports their study findings. I made sure that I supported all study conclusions with all the data I gathered from semistructured interviews and relevant, public documents. To ensure the credibility of qualitative research verification, confirmation, of collected data is necessary (Hollweck, 2016). The data that I gleaned from semistructured interviews and relevant publicly available information on the website and social media networks of LTC facilities do support my research findings and study credibility. I reviewed LTC

business RN job descriptions, hiring and pay incentives, shifts offered and work-related and facility conditions. The three participants identified the inability to fill LTC vacancies were due to benefits offered, conditions at work, and comparable wages. However, the job vacancies posted on the subjects' websites, Facebook, and in newspapers, did not indicate these deficiencies, but supported my primary data I gathered from interviews. Cypress (2017) opined that in qualitative research, the validity of findings predicates the researcher's due diligence.

Strategies to ensure trustworthiness in this doctoral study included member checking and methodological triangulation. I utilized raw data obtained from each interview, and data from websites regarding job postings for LTC RN roles to complete methodological triangulation. The triangulation of data sources provides a crucial source of internal validation for the case-study (Nguyen & Bower, 2018). I used member checking to enhance validity, reliability of the study. The narrative transcript was emailed to all participants after each meeting with an 8-hour window to respond; everyone complied. The process of member checking includes confirming collected data with participants, constructing thematic categories, and the researcher interpretation of data and conclusion with each participant to ensure accuracy (Harvey, 2015).

I helped ensure confirmability through the proper documentation of the methodological process adopted to conduct the study. I described in detail the research steps taken through this study and documented any personal inclination of bias. These actions enhanced the confirmability of this study. I also confirmed results by documenting, rechecking, and evaluating data for bias or distortion.

Transferability of inquiry considers evidence of methods and procedures, while inviting readers to make connections between elements of the study and their experiences (Lincoln & Guba, 1990). I used transferability to consider how other researchers could use datasets and rich descriptions of procedures for applications in different settings or contexts in recruiting LTC nurses. I used interviewing and open-ended questions to see if these converged (see Denzin & Lincoln, 2005).

Data saturation occurs when a researcher collects additional data with minimal new information regarding a particular issue that reflects on the validity of the study (Morse et al., 2014). Saturation of themes might come from differing numbers of participant interviews. I used purposive sampling to include participants from a population of first-level LTC care HR recruiters in Florida who experienced a downsizing of more than 20% of their personnel. I aimed to enhance believability and robustness of results.

Transition and Summary

In Section 2, I detailed the role of myself and participants involved in the study. I defined the research, method, design, population, sampling, and data collection methods of the study. The purpose of this qualitative multiple case study was to explore the perspectives of successful long-term care (LTC) HR recruiters on their strategies used to recruit LTC nurses. I used purposive sampling to include participants from a population of first-level LTC care HR recruiters in Florida whose organizations experienced a downsizing of more than 20% of their personnel. I was the primary data collection instrument for this study using open-ended questions in semistructured interviews. I

included three HR professionals. I used measures of confidentiality of participant identity throughout this process. I safeguarded any sensitive participant information. I reviewed LTC business RN job descriptions, hiring and pay incentives, shifts offered, and work-related and facility conditions from relevant publicly available information on the website and social media networks of LTC facilities. During my methodological triangulation, I compared secondary data with primary data, to ensure consistency. I reviewed LTC business hiring strategies and this is the corroborating evidence I found. First, LTC nurse marketing strategies when specific, increased the number of qualified candidates hired. Second, when LTC nurse job descriptions included specific details of the work involved, job vacancy rates improved at those businesses. Last, businesses that continuously improved LTC marketing, hiring strategies, and vetting standards sustained a qualified LTC nursing staff. Section 3 includes the presentation of findings from the data collection and concludes with potential implications for social change and further areas of research.

Section 3: Application to Professional Practice and Implications for Change

Introduction

The objective of this qualitative multiple exploratory case study was to explore the perspectives of successful LTC HR recruiters regarding their strategies used to recruit LTC nurses. The data came from three LTC HR recruiter interviews. The findings indicated strategies that LTC HR recruiters used to recruit LTC nurses.

Presentation of the Findings

The research question was the following: What strategies do successful HR recruiters use to recruit LTC nurses? Answers to the research question were drawn from one-on-one, public documents, and semistructured interviews with three LTC HR recruiters. I audio-recorded interviews and transcribed them verbatim. I used member checking to improve data accuracy, validity, and credibility. Interview transcripts were uploaded to NVivo 12 software and coded according to the procedure described by Yin (2017). Three major themes emerged during data analysis to answer the research question: (a) initiating communication with candidates to address talent shortage, (b) hiring for nurse-position fit to address turnover, and (c) making the position attractive by offering competitive wages and benefits. Herzberg et al.'s (1959) two-factor principles that lead to job satisfaction/dissatisfaction were confirmed by themes that emerged. Challenges to recruiting LTC nurses can hamper business growth, quality, and delivery of patient care. LTC recruiters use effective strategies to fill jobs due to a demand for nurses. Table 1 indicates the frequencies of the themes.

Table 1

Theme Frequencies

Theme	Frequency	% of coded data units included in theme
Initiating communication with candidates to address talent shortage	21	46%
Hiring for nurse-position fit to address turnover	14	30%
Making the position attractive to address competition	11	24%
Totals	46	100%

Theme 1: Initiating Communication With Candidates to Address Talent Shortage

Theme 1 emerged during data analysis from the grouping of six related codes. Data associated with this theme indicated that participants perceived initiating communication with potential recruits as an effective means of overcoming challenges associated with recruitment. Specific strategies for initiating communication with potential recruits ranged from posting advertisements that described job requirements in specific terms to cold calling qualified nurses who might have been seeking new employment. Reaching out to potential recruits was considered effective because it allowed recruiters to overcome challenges associated with recruitment, such as an insufficient number of qualified job candidates and the difficulty of coordinating communication with job candidates. Table 2 indicates the codes grouped into Theme 1 and the frequency of each code.

Table 2

Theme 1 Code Frequencies

Code	Frequency	% of coded data units included in code
Challenges in recruiting LTC nurses	6	13%
LTC nurse solicitation methods	6	13%
Third-party referral effectiveness	4	9%
Importance of establishing LTC image	2	4%
Ineffective strategies for recruiting LTC nurses	2	4%
Speed is critical	1	2%
Totals	21	46%

Note. In the Totals column, 46% indicates that 46% of all coded data were related to Theme 1.

Challenges in recruiting LTC nurses. Challenges associated with recruiting qualified LTC nurses included a shortage of qualified applicants and the difficulties of coordinating communication with potential recruits who were currently working at a different facility. The shortage of qualified candidates for LTC nursing positions was cited by participants as a particularly acute challenge. Participant 4 stated, “Positions can go months before we get them filled.” Participant 1 referred to a condition of “talent shortage” and added that it increased competition among facilities, saying, “We are in constant competition with other facilities. . . nurses feel that they can shop for jobs since there’s such a high demand.” The finding that a shortage of qualified applicants was a challenge for recruiters was consistent with literature indicating that a shortage existed in part due to the aging U.S. population and the corresponding increase in demand for LTC nurses (Graverholt et al., 2014; Hall et al., 2013; Karel et al., 2012; Rosland et al., 2013).

Participant 2 referred to the challenge of coordinating communication with potential recruits currently employed at a different facility. Participant 2 explained that the threshold challenge was opening a channel of communication with a targeted recruit: “Getting the candidate who I’m targeting on the phone at a time when they can talk, this can be very challenging.” Participant 2 described how later stages of the recruitment process also resulted in challenges, which were addressed by the recruiter reaching out: “Sometimes, I have problems getting the candidate to follow through with a resume after our initial conversation; often they get busy, forget, and days go by in which I have to repeatedly reach out to them with reminders.”

LTC nurse solicitation methods. To address the shortage of qualified LTC nursing recruits, recruiters solicited applicants for open positions in two ways: by advertising and by cold calling qualified LTC nurses. Participant 3 stated, “I use a combination of print, digital fliers, and social media advertisements to attract nurses.” Similarly, Participant 2 stated, “I use social media to recruit candidates...outreach via LinkedIn and Indeed.”

Recruiters who tried both methods considered cold calling more effective. Participant 2 added, “As a company we employ a wide variety of online resources to advertise, but most often it is my direct cold calls into LTC communities that result in placements,” indicating that cold calling was more effective than advertising a position online. Participant 2 also described that when cold calling, an effective strategy was to reach out to as many candidates as possible: “Recruiting is a numbers game. I just have to reach out to as many folks as possible daily in order to hit that one that’s at the right place

in her career to consider making a change.” Participant 2 explained that reaching out to as many candidates as possible was important because a nurse’s willingness to be recruited was dependent on his or her day-to-day circumstances; for the same reason, it was appropriate and effective to contact a potential applicant more than once at different times: “Timing is everything. One day the nurse is happy and wants to retire with her company, the next time I call she’s angry because the company replaced her favorite supervisor and she’s itching to go.” Findings from existing research indicated that organization leaders who effectively manage communication throughout the hiring process achieve recruitment goals (Fletcher et al., 2012; Walker et al., 2013). Findings in the present study added to this knowledge that managing communication with potential recruits begins with initiating that communication as proactively as possible, not only by posting vacancies online but also by repeatedly cold calling potential applicants.

Third-party referral effectiveness.

Another strategy that recruiters found effective in addressing the shortage of qualified LTC nursing recruits was using referrals to find potential recruits. Referrals were also useful because the source of the referral (usually a nurse who was currently employed at the facility) could inform the potential recruit about the facility, as a supplement to communications from recruiters. Participant 4 stated, “Our best recruitment has come from word of mouth and colleagues of nurses working at our firm.” Participant 3 had also found referrals an effective recruiting strategy: “Referrals really work best from nurses working at the facility. LTC nurses know of other nurses that work in the same field at other facilities.... We use proactive employee referrals, skill-based

referrals, and referrals from referrals.” Participant 3 added that referrals were sought proactively and routinely during the onboarding of any new LTC nursing recruit: “When hiring new nurses, we ask them to list the top five nurses they worked with at the facility they came from.”

The literature indicated that recruiters who hired LTC nurses made decisions involving vetting essential skills, knowledge, and abilities needed to perform the job (Malvey et al., 2013). Health organization personnel are sometimes reluctant to share employment reference information about staff beyond the dates of employment and positions held, thereby making the decision to hire more difficult. Recruiters may be at risk of possibly hiring the wrong employee or overlooking qualified candidates (Jiang et al., 2012). Findings from the present study indicated that recruiters could effectively address these challenges by seeking referrals from current employees.

Importance of establishing LTC image. Findings indicated that when reaching out to potential recruits, recruiters found enhancing the image of the facility an effective strategy. Participant 1 spoke of sharing information about the facility’s reputation for providing quality care to patients, saying that a recruiter should, “build the hiring brand recognition off the reputation the company has established for care.” Participant 4 spoke of sharing information about the quality of the working environment for the nurses themselves: “We try to paint an image of a fair working environment with intellectual and professional growth, education, and a voice in the daily process.” Consistent with the findings of Graverholt et al. (2014), Karel et al. (2012), and Rosland et al. (2013), enhancing the facility’s image when reaching out was perceived as an effective strategy

for addressing the talent shortage described in the literature and the resulting condition that LTC nurses could “shop for jobs” (Participant 1).

Ineffective strategies for recruiting LTC nurses. Two strategies for reaching out were identified as comparatively ineffective: e-mailing and posting generic job descriptions online. Participant 2 said of e-mail, “I think people have come to see e-mail as more of a hassle than an essential part of their day...[and] the less intrusive job offers are to candidates the better.” Participant 1 explained that online job postings might be ineffective because “posting of the job announcement in some cases adds little or no value to what’s being offered. The required information in job postings other than specific nursing duties can be confusing and conflicting.” These findings were consistent with previous literature indicating that organizations that effectively managed communication throughout the hiring process achieved recruitment goals (Fletcher et al., 2012; Walker et al., 2013). Findings in the present study also indicated that cold calls and referrals were more effective recruitment strategies than ads in electronic media.

Speed is critical. Participant 4 explained that speed and decisiveness were essential at every stage of the recruitment process. Participant 4 said, “The more time you wait, [the more you] deplete the energy in recruiting. The process needs to be swift and precise because first impressions are important.” Participant 4 added that hiring decisions should not be delayed: “Making a decision to hire right away is best; when there are delays recruits lose interest.” The literature indicated that to keep up with changes in recruitment and new strategies, recruiters must develop practices that save time

(Fitzsimmons & Rose, 2015). Findings in the present study added that time-saving recruitment practices benefited the facility by expediting the hiring process.

Theme 2: Hiring for Nurse-Position Fit

I found Theme 2 from the grouping of three related codes. Data associated with this theme indicated that participants perceived hiring for good nurse-position fit as an effective recruiting strategy. Participants reported that recruiters assess nurse-position fit through candid communication between the applicant and the recruiter. Recruiters discuss what each party has to offer and needs. Specific strategies include open communication from the recruiter about job requirements and conditions, open communication from the candidate about his or her needs and preferences, and open communication from the recruiter about compensation and benefits associated with the position. According to participants, recruited LTC nurses consider hiring for fit an effective means of minimizing turnover, a concern that previous researchers described as urgent because turnover increases costs to facilities and lowers the overall quality of care for patients (Brewer et al., 2012; Li & Jones, 2013). Table 3 indicates the codes grouped into Theme 2 and the frequency of each code.

Table 3

Theme 2 Code Frequencies

Code	Frequency	% of coded data units included in code
Being transparent about job requirements and working conditions	6	13%
Learning the candidate's needs and preferences	6	13%
Being transparent about compensation and benefits	2	4%
Totals	14	30%

Note. In the Totals column, 30% indicates that 30% of all coded data were related to Theme 2.

Being transparent about job requirements and working conditions.

Participants indicated that an effective strategy for hiring for good nurse-position fit was for the recruiter to remain transparent with the candidate about job requirements and working conditions. Participant 2 described this process as an open exchange of information with candidates:

When I call [candidates] directly, it enables me to address their hesitations and open their eyes to opportunities which they may not have known without my call.

Speaking and listening to what job aspects appeal to them is an art.

Participant 4 stated, "You have to focus on the work and position you are hiring for to see if the candidate is a good fit." In addition to promoting transparency about candidate qualifications and job requirements, Participant 4 arranged meetings with nurses currently working at the facility to achieve further transparency about job

conditions: “Potential candidates are able to contact nurses that work here. This allows the nurse to ask questions they may not be comfortable asking during the interview.”

Participant 4 added that it was important to emphasize positive working conditions when communicating with candidates: “We like to assure nurses that by coming to work with us there’s a bright future ahead. During the interview cycle we show them ways to grow, further their education, and perhaps lead the organization.”

Beardwell and Holden (1997) argued that recruiting nurses requires a systematic approach to goals, priorities, and philosophies of job candidates. Recruitment and personnel selection include defining vacancies, attracting applicants, and assessing candidates to make a final hiring decision, therefore following a systematic approach to hiring is essential to positive recruitment outcomes (Campion, Campion, & Campion, 2019). Findings in the present study indicated that a critical part of a systematic approach to recruitment is ensuring transparency about candidate qualifications, job requirements, and working conditions to optimize nurse-position fit.

Learning the candidate’s needs and preferences. Participants indicated that an effective strategy for hiring for good nurse-position fit is for the recruiter to learn the candidate’s needs and preferences. Participant 1 noted that preferences could vary among candidates, so information seeking on the part of the recruiter is critical: “Some nurses prefer later shifts and dealing with patients long-term, while to others this may be totally unattractive. Getting to know the recruit during the hiring process is critical.” Participant 3 also noted that preferences can vary among candidates, saying, “Some nurses are

looking for a certain amount of pay while others are focused on the right work scenario that will best help them to excel in their career.”

Participant 1 added that a recruiter should learn candidates’ preferences and requirements regarding rewards: “I focus on pairing job perks the candidate is looking for with what the firm has to offer to see if it’s a good fit.” Participant 2 agreed that candidates’ needs should be assessed and “paired” with the benefits associated with a position: “I pair up as many incentives as I learn after speaking with the candidate... I normally ask new recruits to list three things they look for in an LTC employer.” This finding was related to Herzberg et al.’s (1959) motivation-hygiene theory in the context of a hiring process, where a systematic approach was necessary to understand the goals, priorities, and philosophies of job candidates as these affected the job satisfaction and job motivation of the individual. Findings indicated that recruiters should take a proactive role in learning candidates’ needs and preferences, and to augment success in nurse-position fit and job longevity.

Being transparent about compensation and benefits. Participant 2 indicated that an effective strategy for hiring for good nurse-position fit was for the recruiter to be transparent about compensation and benefits. Participant 2 stated, “I make it a point to highlight what’s offered by the facility to attract the right nurse, such as benefits, bonuses, growth, etc.” Participant 2 indicated that communicating these factors was important because “career, tenure, and growth on the job are key factors when recruiting LTC nurses. For recent nurse graduates, incentives to pay student loans are important when starting a new career.” Tourangeau et al. (2013) highlighted that communicating or

referring to incentives during recruitment was essential to hiring employees who would remain employed and will not easily leave the company. This finding related to Barber's (2003) recommendation of accurate and honest communication between the applicant and the organization. Findings in the present study confirmed these conclusions.

Theme 3: Making the Position Attractive to Address Competition

Theme 3 emerged during data analysis from the grouping of four related codes. Data associated with this theme indicated that participants perceived making the position attractive to job candidates during the recruiting process as an effective means of causing LTC nurses to prefer their facilities over other competing facilities. Competition among facilities was associated in the literature with the increasingly severe shortage of qualified LTC nurses (Graverholt et al., 2014; Hall et al., 2013; Karel et al., 2012; Rosland et al., 2013), and making the position attractive was associated with clear communication between the job candidate and the recruiter identified as essential (e.g., Beardwell & Holden, 1997; Tourangeau et al., 2013). Table 4 indicates the codes that were grouped into Theme 3 and the frequency of each code.

Table 4

Theme 3 Code Frequencies

Code	Frequency	% of coded data units included in code
Citing good working conditions	5	11%
Citing facility reputation	3	7%
Citing meaningful work	2	4%
Ensuring wages and benefits are competitive	1	2%
Totals	11	24%

Note. In the Totals column, 24% indicates that 24% of all coded data was related to Theme 3.

Citing good working conditions. Participants indicated that an effective strategy for making a facility attractive to job candidates was to cite good working conditions. Participant 1 stated that potential recruits prefer working conditions in which they would “have a degree of autonomy,” such that this condition should be noted during communications with the candidate when it existed. Participant 3 stated that when writing job descriptions recruiters should “list all opportunities for compressed tours and paid days off” because these conditions were attractive to candidates. Participant 3 also recommended advertising staff diversity: “A diverse culture of men, women, and minorities is our goal. Diversity alone will bring different experiences that appeal across the organization.” The administrative culture was also important to nurses, according to Participant 3: “The less bureaucracy the more attractive the opportunity is for nurses.”

Citing facility reputation. Participants indicated that an effective strategy for making a facility attractive to job candidates was to cite positive aspects of the facility’s reputation. Participant 4 stated a goal of describing the facility’s reputation: “We want

them to get a feel of who we are and what we are about,” such that discussing a facility’s reputation also contributed to ensuring good nurse-position fit. Participant 1 stated, “Having the firm’s recent accomplishments in the community and a list of new successful programs implemented makes it easier to attract new recruits.” Participant 3 stated that a facility’s reputation might be more important to candidates than pay: “The facility’s reputation if it’s good can help to overcome hiring challenges. LTC nurses often rank the quality of work and reputation higher than just a paycheck.”

Citing meaningful work. Participants indicated that an effective strategy for making a facility attractive to job candidates was to cite the meaningful nature of providing LTC. Participant 1 stated, “We write advertisements playing towards the heartstrings, [about] the impacts nurses can make on lives in this setting... Talking about relationships they’ll create with their clients and family members.”

Ensuring wages and benefits are competitive. Participants indicated that an effective strategy for making a facility attractive to job candidates was to ensure that wages and benefits remained competitive. Participant 1 stated, “We conducted a wage analysis looking to see if we are competitive with the local market. We are trying to identify if we can offer any other benefit or perks to new nurses.”

Application to Professional Practice

Findings indicated that LTC HR recruiters could effectively address the challenge of a shortage of qualified nurses by “reaching out” to or initiating communication with qualified candidates, whether these potential recruits showed an interest in seeking new employment. The most effective method for reaching out was via phone by cold-calling

qualified nurses. Qualified job candidates were most effectively identified and “targeted” through referrals from nurses presently employed at the facility. In communications with potential hires, recruiters should advertise positive aspects of the facility’s reputation and working conditions. Indicating to candidates that a facility provided good care and that working conditions involved minimal bureaucracy and maximum autonomy would help make facilities attractive to candidates.

Recruiters could address the challenge of turnover by ensuring good nurse-position fit. They could assess fit through transparency in communications with the candidate. They should remain transparent about working conditions, job requirements, pay, benefits, and opportunities for advancement, and they should seek to learn as much as possible about the candidate’s needs, preferences, and qualifications. To ensure transparency about working conditions, I recommend that potential recruits connect with nurses currently working in the facility. When communication between representatives of the facility and a potential recruit are as candid as possible, it maximizes the probability that the nurse hired to fill a position will be satisfied and effective in that position, and will be unlikely to quit.

Implications for Social Change

High turnover among LTC nurses increases costs for facilities and lowers the overall quality of care. Reducing turnover would be a benefit to the nurses themselves, who would not have to change positions, as well as to facilities and patients. Findings in this study indicated that recruiters could play a large role in reducing turnover by working to optimize nurse-position fit when staffing a vacancy. Recruiters could lower turnover

by ensuring that the candidate was suitable for the position and that the position (with its pay, benefits, duties, and perks) was suitable for the candidate. The necessary transparency was accomplished when the recruiter learned as much as possible about the candidate and when the recruiter ensured that the candidate learned as much as possible about the position and the facility.

Recommendations for Action

The findings in this study may benefit LTC HR recruiters and LTC facilities, LTC patients, and LTC nurses. For the findings to be applied in practice, LTC HR recruiters must be informed of these findings. Specifically, LTC HR recruiters may benefit from being informed of effective strategies associated with ensuring nurse-position fit (e.g., putting candidates into contact with current employees and “researching” candidates’ needs and preferences related to pay, hours, and working conditions) and with initiating contact with candidates (e.g., seeking referrals from current employees and cold-calling them). To inform LTC HR recruiters about these strategies for recruiting nurses, I recommend that findings be disseminated to LTC facility leaders through emailed flyers, professional association mailing lists, and speeches at professional conferences. LTC facility leaders can then acquaint HR personnel with the strategies and ensure that the strategies are used. Strategies may also be disseminated to LTC HR recruiters directly, again through professional association mailing lists and speeches at professional conferences.

Recommendations for Further Research

One delimitation of this study was that all participants were LTC HR recruiters who received appraisals from their organizations for excellence in recruitment practices. This delimitation ensured that consequences of the limitation regarding the authenticity and honesty of participants were possibly minimized; however, future research may be conducted to confirm the present findings by undertaking a quantitative study of LTC HR recruiters where the findings in the present study are used to inform the design of the survey instrument. Quantitative analysis of data from a larger sample than included in the present study will allow the present findings to be verified across a larger geographical and professional context and may confirm generalizability.

The current study was delimited to the geographic region of LTC organizations in Florida whose HR recruiters were actively recruiting LTC RNs. Thus, the research results might not be transferable to other populations or locations. Similarly, strategies disclosed in the findings from this study were closely related to the most salient challenges confronting recruiters of LTC nurses, and these might not be as useful to recruiters in other fields where talent shortages and turnover are not as critical. Future researchers may generalize the findings in this study beyond the LTC nursing field in Florida by replicating the study in other geographic or professional research contexts or conducting quantitative research into recruiting strategies in other locations and fields, as recommended above.

Reflections

When I began this research, I was aware of the talent shortage and turnover affecting the LTC nursing field, and I focused on helping recruiters find ways to expedite recruiting processes to fill positions quickly. I was sympathetic toward LTC HR recruiters working against adverse conditions to find qualified personnel to perform a necessary job, but I focused on the LTC patients who might be experiencing a lower standard of care due to turnover and staffing shortages.

When collecting and analyzing the data for this study, I became increasingly aware that perspectives of nurses needed to be considered if challenges confronting LTC HR recruiters were to be addressed. Turnover occurs primarily when the working conditions, pay, and benefits in a facility do not meet employee needs. Therefore, the problem of turnover may result from insufficient consideration of the needs and preferences of LTC nurses. When conducting this study, I became aware of the needs of the nurses as a matter of paramount importance. If nurses' needs are not met, nurses cannot meet patients' needs. As my empathy turned increasingly toward the nurses, I was grateful that LTC HR recruiters in the present study made efforts to ascertain what nurses wanted and needed to increase the likelihood that recruits would be satisfied in their positions.

Conclusion

The purpose of this qualitative multiple exploratory case study was to explore the perspectives of successful long-term care (LTC) HR recruiters regarding the strategies they used to recruit LTC nurses. The data came from three LTC HR recruiter interviews.

Findings indicated effective strategies for addressing turnover by ensuring nurse-position fit and for addressing the talent shortage by initiating contact with qualified candidates, particularly with candidates identified through referrals from current employees. Perhaps the most important takeaway from this study was that recruitment was most successful when considering nurses' needs and preferences. Nurses are best at meeting patients' needs when their own needs are met.

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Appendix A: Introductory Email

To Whom It May Concern:

Subject line: Invitation to phone interview

Phone interview with [*Company_1,2,3,*] - Position-HR Recruiter

Dear [Participant_1,2,3,]

Thank you for participating in my qualitative research study.

My name is Keith LaPrade and I'm a Doctoral Business Administration student at Walden University. I would like to have a phone discussion in regards to Effective 21st Nurse Recruitment Methods for Long-Term-Care Facilities.

Would you be available for a phone interview [*specific timeframe*]?

Looking forward to hearing from you,

Kind regards,

Keith LaPrade