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# The Academic Nurse Leader's Role in Supporting Novice Nurse Educator Transition: A Grounded Theory Study

## Abstract

Researchers have studied the phenomenon of the novice nurse educator transition to academia, however there is little understood about the academic nurse leader's role in supporting transition. Exactly what is needed by novice educators as they transition to academia has been studied in the form of peer mentorship, but there is a gap in the nursing literature related to the academic nurse leader's role. This study used a qualitative design, specifically grounded theory. Inclusion criteria for participants included master's prepared, novice nurse educators as defined by being in their role less than 5 years and employed in an accredited associate's degree (AD) nursing program or Bachelor of Science (BS) nursing program in New York State (NYS). Purposive sampling and face to face interviews were implemented. The phenomenon of interest was the transition experience of the novice nurse educator. The emergent theory, leading through transition: the academic nurse leader role, includes the categories of changing direction, navigating new territory, and leading novices through transition. The model will guide academic nurse leaders to understand and support the process of transition with the intent to improve the novice's experience. Recommendations to improve novice nurse educator transition to academia include mandated leadership training for academic nurse leaders prior to assuming the role, providing all novice nurse educators with a formalized orientation plan, and assigned mentoring with a seasoned nurse educator peer. Further research is needed to define the significance of the academic nurse leader's role supporting the transition of the novice nurse educator.

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The Academic Nurse Leader's Role in Supporting Novice Nurse Educator Transition:  
A Grounded Theory Study

By

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of the requirements for the degree  
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Supervised by

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St. John Fisher College

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## **Dedication**

I dedicate this dissertation to my incredibly amazing husband George, who is the love of my life and has been my inspiration and support during this journey, and for the last 40 years of marriage. I am so very blessed and honored to call you my husband, and father to our children. Your sacrifices are the reason for the successes in my personal and professional life. To my children, Kevin and Sarah for your unwavering understanding, love, and support. I love you unconditionally and am eternally grateful to both of you. To my sisters, Donna and Judy, who always understood when I had to cut conversations short or couldn't spend time with them. A special thank you to each of my extended family members and special close friends who were always there for me encouraging me to achieve my goal.

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### **Biographical Sketch**

Marianne Markowitz is currently the Vice President/Dean at St. Joseph's College of Nursing in Syracuse, New York. She attended St. Joseph's School of Nursing in Elmira, New York from 1973-1976 and earned a Diploma in Nursing. Mrs. Markowitz was licensed to practice as a Registered Nurse in 1976. Mrs. Markowitz graduated from The State University of New York at Utica Rome in 1978 and earned a Bachelor of Science with a major in nursing. She received a Master of Science with a major in nursing and a certificate in nursing administration from Syracuse University in 1986 and 1995 respectively. Mrs. Markowitz pursued her research in the role of the academic nurse leader in supporting the novice nurse educator transition under the direction of Dr. Theresa Pulos and Dr. Katharine Rumrill-Teece, and received the Ed.D. degree in 2018.

## **Acknowledgments**

My sincere thank you to St. Joseph's Health, whose support and financial assistance helped make this journey possible.



## Abstract

Researchers have studied the phenomenon of the novice nurse educator transition to academia, however there is little understood about the academic nurse leader's role in supporting transition. Exactly what is needed by novice educators as they transition to academia has been studied in the form of peer mentorship, but there is a gap in the nursing literature related to the academic nurse leader's role. This study used a qualitative design, specifically grounded theory. Inclusion criteria for participants included master's prepared, novice nurse educators as defined by being in their role less than 5 years and employed in an accredited associate's degree (AD) nursing program or Bachelor of Science (BS) nursing program in New York State (NYS). Purposive sampling and face to face interviews were implemented. The phenomenon of interest was the transition experience of the novice nurse educator. The emergent theory, *leading through transition: the academic nurse leader role*, includes the categories of changing direction, navigating new territory, and leading novices through transition. The model will guide academic nurse leaders to understand and support the process of transition with the intent to improve the novice's experience.

Recommendations to improve novice nurse educator transition to academia include mandated leadership training for academic nurse leaders prior to assuming the role, providing all novice nurse educators with a formalized orientation plan, and assigned mentoring with a seasoned nurse educator peer. Further research is needed to

define the significance of the academic nurse leader's role supporting the transition of the novice nurse educator.

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## **Chapter 1: Introduction**

The academic nurse leader in a college of nursing has many responsibilities and challenges, one of which is to help to successfully transition a novice faculty for a tripartite role: teaching in the classroom, teaching in the clinical setting, and doing research (Moody, Horton- Deutsch, & Pesut, 2007). Classroom and clinical teaching are expected of most novice nurse educators, but research responsibilities are limited to those nurse faculty teaching at the doctoral level. The obligation of nurse faculty to be competent in the classroom and the clinical setting sets these nurse faculty apart from other professional roles that do not require a clinical obligation (Little & Milliken, 2007). Because of the demands of the nurse faculty role, those nurses who make the transition to academia often suffers from role ambiguity, and increased stress (Anderson, 2009; Cangelosi, Crocker, & Sorrell, 2009).

Teaching in the classroom and the clinical setting is often equated as having two jobs: educator and nurse. The dual obligation of the academic nurse faculty role requires that the faculty member possess the knowledge and skills related to teaching and learning concepts, as well as having clinical expertise as a nurse. The diverse and complex skill set that nurse educators are expected to achieve are described in eight core competencies by the National League for Nursing (NLN) (2013). While these competencies include a range of skills, including use of assessment strategies and functioning as a change agent and leader, the majority relate to the academic arena. The nurse educator is expected to facilitate learner development and socialization as well as participate in curriculum

design and evaluation of program outcomes (NLN, 2013). According to Billings and Halstead (2012), these educator competencies provide a framework for orientation and support for the novice educator. The novice educator must achieve NLN identified competencies as identified, be technologically proficient, respond appropriately to a multitude of student issues, and provide service to their organizations and communities. Often, faculty must perform these competencies without any formal education in teaching or any support in the role transition (Young & Shellenbarger, 2012).

A disconnect between the expectations and realities of the novice nurse educator role transition and these novice nurse educators' actual experience is a common finding in the literature. Duphily (2011) completed a qualitative phenomenological analysis to ascertain novice nurse educators' experiences in a community college associate's degree (AD) nursing program. Results indicate that formal support assures a more successful transition into the academic nurse faculty role. Interview participants stated that their experience and education did not sufficiently prepare them to take on the role of the novice nurse educator.

The transition from an expert practitioner to a novice nurse educator is demanding (Schoening, 2013). The amount of professional formal guidance and support in academia tends to be intermittent, restricted, deficient, and lacks accuracy for the varied situations that the novice nurse educator confronts (Cooley & DeGagne, 2016). In retrospect, novice educators often question the decision to move from the role of an expert in the clinical practice setting into an ill-defined, ambiguous world of academia as a novice (Anderson, 2009; Boyd & Lawley, 2009). Even with formal preparation, nurse educators struggle to assimilate into this new role and often enter the academic world with pre-



formed ideologies, learning styles, cultural norms, and values (Cooley & DeGagne, 2016).

In a recent report from the American Association of Colleges of Nursing (AACN) survey of 821 nursing programs that offer a baccalaureate and/or graduate program, 1,567 faculty vacancies exist (AACN, 2017). Moreover, faculty shortages in nursing schools in the US are resulting in limited student capacity, and are therefore turning away qualified applicants (AACN, 2017). The substantial faculty shortages restrict schools of nursing from enrolling optimum numbers of new students. Factors contributing to the nurse faculty shortage include an aging educator workforce, with the average age of full-time nurse faculty reported to be 52.9, heavy workloads, and low wages (AACN, 2017; Joynt & Kimball, 2008). Multiple other factors such as budgetary constraints, lower salaries as compared to other nurses with a master's degree, and job competition among master's prepared nurses are also contributing to the faculty shortage. These issues create the phenomenon of academic nurse leaders having to hire novice nurse educators with no formal coursework in teaching (Anderson, 2009).

The path to become a nurse educator begins with completing a diploma in nursing, an Associate's Degree (AD) in nursing or a Bachelor of Science (BS) in nursing. Once a degree is completed, a graduate must pass a national licensure examination in their home state to obtain the registered nurse (RN) license credential. There are several pathway options following licensure that a nurse can pursue to achieve a master's degree to teach nursing. Traditional RN to BS, or online opportunities such as accelerated AD to BS programs exist. However, to meet national accreditation standards, nurse faculty

must have a minimum of a master of Science (MS) Degree in nursing, and they must also be clinically proficient (Poindexter, 2013).

The faculty shortage has provided more opportunity for an RN prepared with a master's degree to choose the role of a nurse educator as a career path. Since the 1970s, the academic requirements to become a nurse educator have shifted; mostly due to the demand in health care to prepare expert nurse clinicians with master's degrees, such as a nurse practitioner (NP) or clinical nurse specialist (CNS) (Tanner & Bellack, 2010). Many nurses who are expert clinicians, become faculty with little preparation in how to teach, resulting in a major source of stress during the first few years as a novice educator (Cangelosi et al., 2009; Paul, 2015; Schoening, 2013).

The largest sector of U.S. health care providers are licensed nurses (Snavelly, 2016). Throughout the history of nursing, there are documented cyclical patterns of shortages and surpluses of nurses. The Bureau of Labor Statistics' employment projections identify that the RN workforce needs to grow from 2.7 million in 2014 to 3.2 million in 2024 to meet societal health care needs (AACN, 2017). The imminent RN shortage is linked to decreasing enrollments in schools of nursing.

Without steady enrollments in schools of nursing, it is expected that graduation rates are expected to drop, contributing to the overall shortage of future RNs. By increasing the numbers of faculty, colleges of nursing are more likely to be able to increase the number of students choosing to enter the profession of nursing. It is essential to address both the RN and nurse faculty shortage so that more nursing students can enroll, graduate, and become licensed; thereby positively impacting the nursing shortage (AACN, 2017).

When a novice faculty member is hired, the academic nurse leader is responsible to provide orientation to the faculty role. Included in this orientation is information about the school's mission and culture and other necessary information to support the clinician role transition to academia (Suplee, Gardner, & Jerome-D'Emilia, 2013). The academic nurse leader is thought to have the most impact on a novice faculty's transition due to this leader's role and inherent job duties. It is the academic nurse leader's responsibility to assign workload, complete annual evaluations and help to manage conflict if brought to the administrative level (Welk & Thomas, 2009). If the novice faculty has no formalized orientation or support from either the academic leader and or colleagues, novice educators are more likely to leave academia within the first 5 years of employment (Cranford, 2013; Goodrich, 2014). An administrative leader that recognizes the value that faculty contributes to a program's success in both providing quality education to students and thereby increasing the clinical and academic workforce may be more likely to retain these novice faculty (Bonnell, 2015). However, despite a thorough review of the literature, a gap specific to the topic of the academic nurse leader's role of identifying and implementing consistent leadership strategies to support the successful transition of a novice nurse educator exists (Bellibas, Ozaslan, Gumus, & Gumus, 2016).

### **Statement of the Problem**

The current and predicted scarcity of nurse educators in academia is concerning for the education of future nurses (Cangelosi, 2014). There is a critical need to employ qualified nurse educators to teach in these RN programs thereby increasing enrollments and alleviating the nursing shortage. A hermeneutic phenomenological study of novice nurse faculty found that all 20 participants expressed frustration or disappointment about

the lack of guidance novice nurse faculty received as a new faculty and participants felt “swallowed up by the job” (Cangelosi, 2014). Suplee et al., purport that it is the academic nurse leader’s role to both orient and provide continual support to novice nurse educators (2013). Yet, the academic nurse leader’s role in helping to support the role transition to novice nurse educator has not been sufficiently studied. No formal mechanisms have been identified in the literature to assist academic nurse leaders with methodology as how to provide a successful pathway from nurse clinician to novice nurse educator transition. As such, a study is needed to gain a better understanding of how the academic nurse leader may support the novice nurse educator in this ambiguous role throughout the academic continuum, to alleviate the shortages of nurse faculty and nursing students (Evans, 2012).

### **Theoretical Rationale**

It is essential for the nurse leader to recognize successful transition to the role of novice educator is dependent on establishing clear processes to support healthy transition. Socialization to the role, workload, administrator and peer relationships, salary, and consideration of work-life balance are common themes cited as factors to be considered for successful role transition (Evans, 2013).

Several theories have been proposed in nursing education to understand novice educator transition, but none are sufficient or comprehensive enough to answer the research question. Benner’s (1984) landmark study began the conversations surrounding transition as a nurse. Benner’s theory, based on the dreyfus model of skill acquisition, proposes that all new graduate nurses’ experience phases of role transition beginning as a novice and advancing to the final phase of the expert nurse. Kolb (1984) identified

experiential learning theory as essential for knowledge development of a learner in an unfamiliar setting. Cooley and DeGagne (2016) suggest that Kolb's concepts are applicable to the novice educator role. A theoretical model called nurse education transition (NET) describes the social processes that occur during the role transition from nurse to nurse educator was developed by Schoening, (2013). Meleis (2010) originally applied her theory of transition to the practice of nursing, yet the theory applies equally to any transition, including professional/career changes. None of the theories found in the literature speak specifically to the role responsibilities of the academic nurse leader in supporting the novice educator transition to academia. Although the transition concepts in the various theories help to understand the transition to the role of a nurse educator, none address the phenomenon in question. Therefore, there is a need to further study and develop a theory that speaks to the academic nurse leader's role to support nurse educator transition.

### **Purpose of the Study**

Given the lack of sufficient theories to explain this phenomenon, a grounded theory design guided this study. The aim of this study was to create a model to guide the work of the academic nurse leader to support the novice nurse educator's transition from a clinical practice role to a nurse educator role in academia. The rich qualitative descriptions from the participants were utilized to create the theoretical framework to be used by the academic nurse leader to support transition of the novice nurse educator.

### **Research Question**

The purpose of this grounded theory study was to answer the following research question:

How does the academic nurse leader support the transition of the novice nurse educator to their role?

### **Significance of the Study**

Nurse educators assume positions in academia with a strong desire to have an impact on the education of future nurses (Cranford, 2013; Poindexter, 2013). For purposes of this study, a novice nurse educator in academia is defined as the transition period of the first 3 to 5 years in the academic role. In the landmark research, *From Novice to Expert: Excellence and Power in Clinical Nursing Practice*, Dr. Patricia Benner introduced the concept that expert nurses develop skills and understanding of caring for patients over time (1984). Although she developed the novice to expert theory for beginning critical care nurses, other researchers have applied the model to other nursing roles when describing role transition. Benner (1984) believed that experience is a required to become an expert. Novice nurse educators have experienced the progression from novice to expert as beginning RNs in the clinical setting. This study found that the participants had like experiences as they transitioned from a clinical expert to a novice nurse educator.

Novice nurse educators are expected to have a myriad of teaching skills upon employment. Nevertheless, competence in the role of nurse educator is not achieved immediately. Many novice nurse educators who make the decision to move into academia experience stressful role transitions (Anderson, 2009; Schriener, 2007). Given the preparation needed for a novice faculty member to achieve success in their role, the academic nurse leader who is responsible for hiring them into academia should implement necessary strategies to support these novice nurse educator transitions. The

nursing faculty shortage is producing a circular crisis with more nursing students being turned away from colleges of nursing at the same time the data suggests that more nurses are needed in the health care system (AACN, 2017). Now, more than ever, colleges of nursing need to increase respective numbers of faculty to remedy the existing nursing shortage. The significance of this study is the intention to add to the body of knowledge through the development of a theory which may create strategies to contribute to the RN workforce through increasing the number of novice nurse educators. By developing successful transitioning strategies for recruiting and retaining novice nurse faculty, the nursing student admission, retention, and graduation rates will increase, resulting in the potential to alleviate the current shortage of nurses.

### **Definitions of Terms**

Content specific terminology is used in research and must be clearly understood so the research problem and results are clear, and so that the study can be replicated by others (Flick, 2014). For the purposes of this study, the following terms will ensure the understanding of the major concepts used in the study.

*Registered Nurse (RN)* - An RN is a nurse who has completed at least an associate's degree (AD) with a major in nursing or a Bachelor of Science (BS) with a major in nursing and has successfully passed the RN licensing certification exam by the National Council Licensing Examination (NCLEX).

*Associate's Degree (AD) Nursing Program* - A program of study that offers a student a nursing curriculum when upon completion makes the graduate eligible to sit for the national licensing exam to become an RN.

*Baccalaureate Degree Nursing Program (BS/BSN)* - A program of study that offers a student a nursing curriculum when upon completion makes the graduate eligible to sit for the national licensing exam to become an RN.

*Novice Nurse Educator* - The novice nurse educator can be defined for this study as having less than 5 years of teaching experience in an academic setting. A novice nurse educator is defined as a beginner with no experience in the academic environment in which they are expected to teach.

*Academic Nurse Leader* - The literature does not provide a clear definition of an academic nurse leader. For purposes of this study, the academic nurse leader is defined as the individual nurse leader who is responsible for the governance of the nursing program such as the dean or program chair.

*Transition* - Transition is defined as a passage or movement from one fairly stable state to another fairly stable state, and is a process triggered by a change (Meleis, 2010).

*Accredited College of Nursing* – Professional accreditation is a voluntary, self-regulatory process that recognizes educational nursing programs that have met or exceeded standards and criteria for educational quality. In the U.S., colleges can either be accredited by Accrediting Commission for Education in Nursing (ACEN), or Commission on Collegiate Nursing Education (CCNE). Both organizations are approved by the federal Department of Education.

*Core Competencies for Nurse Educators* – The NLN (2013) developed core competencies for nurse educators to serve as a framework of essential knowledge and skills.



*Advanced Practice Nurse – Nurse Practitioner* – The Advanced Practice Nurse or Nurse Practitioner is an RN who has completed additional education for advanced practice with an extended scope of practice.

### **Chapter Summary**

Chapter 1 introduced the research problem, the purpose of the research, the research question, and the significance of the study, and concluded with definitions of key terms used throughout the study. This chapter provides an overview of the need for further research on the academic nurse leader's role in supporting the novice nurse educator. Given the current and predicted shortages in nursing, academic nurse leaders must implement strategies to successfully transition novice nurse educators into the faculty role. Additionally, rationale was provided for using a grounded theory method.

Chapter 2 will expand on the empirical literature with the focus placed on the academic nurse leader's responsibility in supporting the role transition of the novice educator. A comprehensive description of the proposed methodology of grounded theory will be outlined in Chapter 3. The methodology includes discussion of research context, participants, data collection and analysis, and a summary of the chapter. Chapter 4 explicates the rich descriptions obtained in the interviews from the participants including pertinent supporting quotes. Chapter 4 is organized by the research question and will explain how the findings of the study answer the research question and support the conclusions. Chapter 5 analyzes the findings of the study and their significance in terms of professional practice, leadership, and social justice. Recommendations for change to policy and practice are discussed. Limitations and impact for further research are also presented.

## **Chapter 2: Review of the Literature**

### **Introduction and Purpose**

Currently, the nursing profession is challenged with the impending shortage of nurse faculty. According to the AACN (2017), faculty shortages in nursing schools in the U.S. are limiting student capacity. Some factors contributing to the nurse faculty shortage include an aging educator workforce, heavy workloads, and low wages (Joynt & Kimball, 2008). There is an abundance of literature documenting both the impending nursing and nurse faculty shortages. The AACN reported in 2013 that The Bureau of Labor Statistics' employment projections for the RN workforce needs to grow from 2.71 million in 2014 to 3.2 million in 2024, representing an increase of 439,300 nurses. The aging workforce of the US baby boomer generation will necessitate supplementing the numbers of nurses by 525,000 (AACN, 2013). It is essential to address this nursing shortage so that students can be educated to assume RN roles to contribute simultaneously to a quality health care system and the demand of an aging population who will require medical care (Robeznieks, 2015).

The need for more nurses directly translates to the need for more nurse faculty (Robeznieks, 2015). Without steady enrollment in schools of nursing, graduation rates will decline contributing to the shortage of nurses. Administrators in nursing education perform an essential role in providing necessary strategies to recruit novice nurse educators, to support these novice nurse educators' transitions, and to retain these novice nurse educators (Cangelosi, 2014).

Until the 1970s, nursing education at the master's level provided predominately two curricular tracks: nurse administrator or nurse educator (Schoening, 2013). During that same time, the American Nurses Association (ANA) called for a paradigm shift at the graduate level in nursing to prepare nurses with clinically focused, advanced practice degrees such as NPs, to supplement the need for primary health care providers. The shift resulted in clinically focused academic choices at the graduate level, but also led to fewer nurses prepared with an education emphasis to assume the role of nurse faculty (Barth, 2003). Therefore, a major trend since the 1970s has resulted in schools of nursing acquiring a pool of novice nurse faculty applicants who are prepared differently to teach in the academic setting (Barth, 2003).

### **Novice Nurse Educator Transition**

Colleges of nursing in the U.S. are turning away record numbers of students with the primary reason being the shortage of faculty (Cleary, McBride, McClure, & Reinhard, 2009). Role transition from a clinician in nursing practice to the role of nurse educator in a college or university setting requires an unfamiliar set of skills which must be taught either formally or informally (Booth, Emerson, Hackney, & Souter 2016; Duphily, 2011). Teaching nursing is very different than practicing nursing. Many nurse clinicians become faculty with little preparation in how to teach, which can result in a major source of stress during the first few years as a novice educator (Anderson, 2009; Cangelosi et al., 2009; Duphily, 2011; Gardner, 2014; Paul, 2015; Schoening, 2013). Owens (2017) relates that because of the extensive competencies required to educate nursing students, as well as the importance of professional identity development in successful role transition, further research is needed.

One hermeneutic phenomenological qualitative study by Cooley and DeGagne analyzed novice nurse educators' perceptions about what novice nurse educators believe supports and hinders transition to academia (2016). Findings included that the amount of professional formal guidance in an academic organization tended to be intermittent, restricted and deficient, and lacked accuracy for the varied situations that the novice nurse educator confronted (Cooley & DeGagne, 2016). When describing the novice nurse educator's experiences associated with entering a new community of practice, common words such as identity formation, communication, relationship development, educational preparation for the role, and challenges were revealed. The participants in the study identified that resources and mentors were lacking to help them transition to their new role. Also, alteration in security/stability involving the need for acquiring new knowledge, support for developing skills as novice educator, and the facilitators and barriers that contribute to successful role transition were cited. The presence of a caring and competent mentor was cited by participants as a contributing factor to having an ideal transition from the role of clinician to the role in academia.

Anderson (2008) denotes five phases of the nurse educator transition using metaphors. These five phases are equated as being in the water, which include sitting on the shore, splashing in the shallows, treading water, beginning strokes, and drowning. The metaphorical phrases also depict that a successful transition depends on a good facilitator and were represented by the lifeguard, or perhaps the academic nurse leader. The assumption could be made that the metaphor provides the nurse leader with an understanding of the multifaceted situations that the novice nurse educator experiences. Anderson further asserts that expressing the role transition in a metaphor encourages the

reader to discover the visceral meaning through their own perspectives and experiences (2008).

Evans (2018) aimed to identify what factors might help to increase the nurse faculty population in a descriptive study. A national survey of nurse educators representing each geographic region in the US was sent to 2,106 participants with 940 responses returned. The survey contained demographic and Likert scale questions asking the educator to rate the factors that attracted them to the nurse educator role. Open-ended questions were included in each section, providing an opportunity to identify other factors not listed in the survey. The most common factor identified was the nurse faculty's desire to teach and make a difference in students' lives.

Cangelosi et al., (2009) identifies four themes related to the transition experience of the novice nurse educator transition. The first theme denotes a lack of understanding by the novice educator of organizational expectations and as such possesses a lack of clarity about the role expectations. Therefore, a recommendation is that the nurse administrator provide clear information of the expectations to prevent role ambiguity. Secondly, the study overwhelmingly identifies the importance of communication and support from either peers or administrators as being necessary for the novice nurse educator to make the transition successful. Thirdly, teaching is not a natural by-product of clinical expertise, but requires its own set of skills and requires education and mentoring (Cangelosi et al., 2009). A fourth theme posits a disconnect between the expectations and realities of the novice nurse educator role transition and the actual experience. Duphily (2011) asserts a challenge for the future of nursing education is to nurture and support novice faculty to retain them in their new roles.

The literature on novice nurse educator transition reveals several consistent themes. Although there is an abundance of literature on peer mentoring models that support novice educator transition, there is a gap in the evidence that suggest the impact of the academic nurse leader's support of the novice nurse educator.

A qualitative grounded theory study by Schoening (2013) generated a theory that described the process a novice nurse educator makes from clinician to educator. The nurse educators represented a convenience sample in BS programs in the Midwest. Schoening identified phases the novice nurse educator moves through during transition and developed the Nurse Educator Transition (NET) Model. Although the theory is comprehensive as it relates to the process of transition, Schoening only briefly offers recommendations regarding the need to involve the academic nurse leaders in planning orientation and mentoring with faculty (2013).

### **Academic Nurse Leader**

Barriers to the novice nurse educator transition to academia include a lack of communication and a lack of relationship development which can lead to negative experiences when transitioning (Paul, 2015). A Turkish study interviewed department chairs in higher education to explore these leaders' needs in performing academic leadership and found an emerging theme that was the need for more leadership training, including how to establish good relationships and dialogue with staff (Bellibas et al., 2016). Delgado and Mitchell (2016) also examined leadership qualities valued by nurse faculty. Although the study was not directed at the academic nurse leader role, the parallel can be made that the leadership qualities valued by faculty should be role modeled by the academic nurse leader. For example, communication clarity was noted as

one of the top leadership qualities identified as valued by nurse educators and found in this study to be lacking.

Martin, McCormack, Fitzsimons, and Spirig (2014) originally completed a quantitative study using Kouzes and Posner's (2012) leadership practice inventory to examine the five leadership practice behaviors and found that the concept of shared vision is essential for the successful transformation of practice. The participants in this research study verbalized the need for support and direction as they transitioned to academia.

One study by Murray, Stanley, and Wright (2014) focused on the transition from clinician to academia in nursing and allied health and found that due to the workforce shortage, many colleges and universities have recruited clinical experts into the teaching role to compensate for the shortage. A major theme in this study was identity shift which encompasses four phases that evolve during the first through third year and can take anywhere from 1 to 3 years for the clinical expert to transition to the academic setting. The phases include: feeling new and vulnerable, doing things differently, expecting the unexpected, and evolving into academia (Murray et al., 2014). These findings are comparable to Cooley and DeGagne's (2016) results and are discussed in much of the empirical studies on novice nurse educator transition.

Blass (2011) explored the role of the dean in a qualitative study with 13 nursing school deans in California. The purpose was to understand from the dean's perspectives how their personal characteristics and experiences shaped their role in a complex academic environment. The challenges the academic nurse leader initially experiences as they transition to their role were identified and suggest that they were not mentored to

assume their leadership position. The findings align with previous studies that revealed inadequate preparation for the role (Pressler & Kenner, 2010). The nursing deans acknowledged that they relied on their previous experiences as a nurse and described that meeting the needs of their students was similar to meeting the needs of their patients. These studies may help to understand why the novice nurse educators experience similar role transition, potentially drawing from their previous clinical experiences and skills.

Lane, Esser, Holte, and McCusker (2010) found that according to Herzberg's conceptual model, supervision is one of the factors that influence job satisfaction. The study further indicates some faculty members found their supervisors to be inconsistent, ranging from no supervision at all to supervisors who micromanage. Overall, faculty prefer autonomy in their role, however, they also identified the need for consistent support from their administrators. Like the themes found in the novice educator transition studies, Lane et al. (2010) also suggest administrators should be more forthcoming with new faculty regarding role expectations as well as providing leadership support.

An integrative review by Bouws (2017) found that most of the literature on the role of the nursing dean was dated back to the 1980s and 1990s yet identified that while 27 articles referenced the role of the academic dean, only a few were specific to the role of the nursing academic dean. These findings support the gap in the literature and the phenomenon under study. Bouws (2017) also found that little has been published on the role of the nursing dean despite the impending nurse faculty shortage and recommends, that due to the challenges of the academic nurse leader role, further research on the role is essential.



A hermeneutic phenomenology study by McErlane (2013) was conducted on 12 deans from BS nursing programs. The primary finding was that the role was described by the participants as stressful, yet despite the demands of the role the deans expressed satisfaction. The findings also relayed that the academic deans relied heavily on their spouses and families to provide support. Further research on the topic of the dean's role was recommended.

A qualitative study in the United Kingdom explored the scope and meaning of leadership from the experience of 10 leaders responsible for nursing and other allied health responsibilities (Ross, Mark-Maron & Tye, 2013). Findings discussed the role complexity of the academic nurse leader balancing the responsibilities of the university system and health care practice. The study suggests that because of the lack of literature on the subject, further research is needed.

### **Chapter Summary**

The literature review provides for a deeper understanding of the novice nurse educator experiences and the administrative support needed to successfully help the novice educator transition and acclimate to their role (Anderson, 2009; Cangelosi et al., 2009; Cooley & DeGagne, 2016; Duphily, 2011; Owens, 2017). The literature supports many of the same themes and challenges for the novice nurse educator role transition. Specifically, the novice educator's feelings of lack of support as they transition into the role is frequently cited (Anderson, 2009; Duphily, 2011; Paul, 2015). It is evident in the research the novice nurse educator must adapt to the culture of academia, and yet the expectations are not always clearly delineated (Clark, 2013).

The transition to a novice nurse educator role is often accompanied by unrealistic expectations from more seasoned faculty, nurse administrators, and potentially self-imposed from the novice educator themselves (Anderson, 2009). Metaphors have been used in the literature to describe the transition experience as being in the water and identify five phases the novice nurse educator experiences. They include: sitting on the shore, splashing in the shallows, treading water, beginning strokes, and drowning (Anderson, 2009). The metaphorical phrases indicate that unless the novice faculty has the necessary support, they will remain unsuccessful navigating the waters (Anderson, 2009). The metaphor may provide the nurse leader with an understanding of the multifaceted situations that the novice nurse educator experiences and that without organized support, the novice educator may not transition successfully into their new role.

The predicted nursing faculty shortage strongly suggests colleges of nursing pay attention to the recruitment and retention strategies so that novice nurse educators remain in their new role (Tourangeau, Wong, Saari, & Patterson, 2014). The research studies support the recommendations for nurse administrators to recognize what facilitates novice nurse educator transition.

### **Chapter 3: Research Design Methodology**

#### **General Perspective**

In qualitative research, as in this study, the focus was from the participant's perspective and on the subjective data they chose to share. Grounded theory methodology is fluid and interactive, requiring that the researcher be engaged and use constant comparative methods to analyze the data (Charmaz, 2014). Very little information in the empirical literature exists on the phenomenon of an academic nurse leader's role in supporting novice nurse educator transition. The grounded theory methodology was chosen and utilized to generate a new theory for academic nurse leaders to implement when transitioning a novice nurse faculty. Grounded theory is a systematic process of collecting data and analyzing the collected data concurrently, allowing the researcher to be open to what the participants disclose (Harris, 2015). The grounded theory method included using inductive and deductive modes to identify emerging patterns in the data collected that was sufficient to generate a new theory (Flick, 2014). Additionally, grounded theory required simultaneous and systematic data collection with concurrent analysis that is grounded in practical research, often occurring in the field (Flick, 2014). Concepts and theory emerged through an iterative process of constantly comparing the data until no new concepts or hypotheses emerge from the data (Harris, 2015). Concepts were analyzed and abstracted until a cohesive theory emerged that explained the phenomenon in question (Polit & Beck, 2017). To fully understand the gap that exists in the phenomena under study, the role of the academic nurse leader in

supporting novice educator transition, using a grounded theory design provided the subjective data where the answers existed (De Chesney, 2015).

Grounded theory methodology has three paradigms which include classic, straussian, and constructivist paradigms which have diversified since the founding of grounded theory (Kenny & Fourie, 2015). The constructivist approach is inductive, dynamic, and interpretive. The preferred paradigm for this grounded theory study was the constructivist paradigm because the constructionist approach to theory development is an interpretation from the shared experiences and relationships between the researcher and the participants (Charmaz, 2014). There are three basic tenets that differentiate grounded theory from other approaches and include: (a) theory generation, (b) an emergent theory grounded in empirical research with an emphasis on fieldwork or practical real-world research, and (c) concurrent systematic collection and analysis of data using theoretical sampling and constant comparative analysis (Harris, 2015). Utilizing grounded theory methodology, the emerging theory does not frame the construct of the research, rather the theoretical framework is discovered at the conclusion of the research (Flick, 2014).

The research question was answered using the grounded theory method of simultaneous and systematic data collection and analysis. Birks and Mills posit that an important first step in deciding to use grounded theory is for the researcher to position themselves philosophically (2015). To do so, Marshall and Rossman purport that the researcher must reflect on their own identity along with other key elements such as their perspectives, assumptions, and experiences (2016). Often, because the researcher is situated in the context of the grounded study, Marshall and Rossman contend that it is

difficult to fully bracket the researcher's experiences as a qualitative investigator (2016). Thus, it is important to use memoing throughout the data collection and analysis to mitigate any infusion of personal bias into the study. Stating the research question(s) and how the researcher has experienced them personally and professionally is critical to address positionality (Marshall & Rossman, 2016).

The purpose of this grounded theory study was to answer the following research question:

How does the academic nurse leader support the transition of the novice nurse educator to their role?

### **Research Context**

The setting for this study included all AD and BS nursing programs in NYS that were nationally accredited by their respective professional accrediting body. Nursing programs are eligible for national accreditation by either the Accreditation Commission for Nursing Education (ACEN) or by the Commission on Collegiate Nursing Accreditation (CCNE). Each of these accrediting bodies use similar standards to evaluate if nursing programs are meeting basic requirements to prepare nursing students to achieve licensure as RNs. Both ACEN and CCNE are voluntary processes and use peer-review intended to enhance continuous quality improvement in nursing programs. The names of the nursing programs were obtained from the NYS Office of the Professions website.

### **Research Participants**

A total of 12 novice nurse educators who met the inclusion criteria were participants in this grounded theory study. Approval from the St. John Fisher Institutional Review Board (Appendix A) was obtained prior to conducting interviews. Convenience

sampling was done to engage novice nurse educators from the nursing programs in NYS. Each nursing program in NYS is represented by an academic nurse leader referred to as nursing chairperson, director, or dean. Meetings are held biannually in the capital district of NYS in Albany and are attended by the academic nurse leader or a representative. The AD academic nurse leader is a member of the NYS Council of Associate Degree Nursing (CADN), a voluntary, not-for-profit organization. The BS academic nurse leader is a member of the Deans and Directors of Baccalaureate and Higher Education Council. Both councils are governed by bylaws and meet to discuss any issues facing nursing higher education both statewide and nationally.

To initiate the request for participation of the novice nurse educator, a letter of introduction was emailed to presidents of the CADN and Deans and Directors respective councils. The presidents were asked to contact the academic nurse leader at all AD and BS nursing programs in NYS requesting that these academic nurse leaders provide the researcher's contact information to potential participants who met the inclusion criteria. The purpose of the initial email contact was to introduce the study, explain the intent of the research, assure understanding that participation in the research was voluntary, and inform the participants that the data collected would remain confidential. Participants were contacted, and face-to-face interviews were arranged. A detailed informed consent was provided to each participant prior to the actual interview (Appendix B).

There is no one right answer as to how many participants are enough for a grounded theory study, although Polit and Beck (2017) suggest that the size of the sample is determined by the theoretical saturation, not by predetermining an actual number of participants. However, interviews continued until saturation was reached and until a

series of well-developed categories emerged. Theoretical saturation occurs when gathering more data about categories that have emerged reveal no new insights about the emerging grounded theory (Charmaz, 2014). To maximize the opportunity to obtain data that addressed the research question, the study aimed for a minimum of 5 to 25 novice nurse educators and used the following inclusion criteria for the novice nurse educator:

1. Were currently teaching in an AD or BS accredited college of nursing,
2. Had been in the nurse educator role for less than 5 years,
3. Were academically prepared with a minimum of a master's degree in nursing and,
4. Were willing participants.

Understanding the time commitment of interviews, a \$5.00 electronic gift card was provided to participants in the research study.

### **Data Collection**

In qualitative studies, data collection is performed using various methods such as document reviews, interviews, or observation (Creswell, 2014). Grounded theorists collect data and analyze it simultaneously using an iterative process (Charmaz, 2014). Qualitative interviews are thought to be one of the most common ways of producing knowledge in the human and social science disciplines (Denzin & Lincoln, 2018). A common form of interview is the person-to-person encounter in which one person elicits information from the other to obtain the story behind the participants' experiences and to interpret the meaning of the described phenomenon (Brinkman & Kvale, 2015). This grounded theory study collected data using in-depth, open ended, semi-structured, face-to-face interviews. Audio tape recording was done using a digital voice recorder to

concentrate on the interview questions and to capture the perfect recall of the participant's words (Brinkman & Kvale, 2015). A backup recorder was available, and each audio recorder was tested prior to beginning the interviews. A predesigned series of questions guided the interviews, yet the emerging nature of using a grounded theory approach required flexibility in the interviews (Appendix C). A professional transcription service was used to transcribe the audio taped conversations into text. The emergent nature of the process of interviewing required adaptability to the individual participant during the interviews. Remaining theoretically sensitive to the data obtained during the interviews allowed for the categories and themes to emerge. Although the participants gave consent for subsequent interviews, the data obtained during the interviews was saturated.

The academic nurse leader forwarded a letter of request for participation in this study to novice nurse educators in their respective programs (Appendix D). No data was collected from the investigator's workplace. Interviews were conducted off site, away from the participant's workplace to allow for privacy and to facilitate gathering more accurate and objective data (Creswell, 2014). If weather became an obstacle for conducting face-to-face interviews, using Skype or use the Face-Time app was an option. The semi-structured interview questions allowed for the conversation to evolve and provide the opportunity for the investigator to probe the participants for additional comments or questions. Being able to restate the participant's points or return to earlier comments validated understanding, and therefore accuracy for the development of the theoretical sample that unfolds (Brinkman & Kvale, 2015).



Interview protocol demands preparation, because interviews typically will last for one hour or more (Polit & Beck, 2017). The questions were not directly read from a document, thus making eye contact with the interviewee. Making eye contact is important to document any non-verbal behavior in response to the questions. As such, prior to the actual interviews of the selected participants, the interview questions were pre-tested in a pilot study with novice nurse educators from the investigator's AD program to determine flaws or limitations. The pilot test demonstrated that the interview questions were measuring what was intended and to assure the findings reflected the purpose. Moreover, the pilot test allowed for practice, and revisions to the research question as necessary. The participants in the study could choose not to answer any question and could withdraw from the study at any time without penalty. Anonymity was maintained by removing any identifying information such as names, schools, locations, and date of interviews.

One of the most critical skills during data collection is to listen intently and not interrupt the participants as they responded to questions (Polit & Beck, 2017). It is paramount that the researcher not lead the participants by offering advice or opinions or by providing counsel as the interview is in process (Polit & Beck, 2017). The process of data collection and analysis began by engaging with the data as it was collected in the field, and thoughts and observations were documented, also known as field-notes (Polit & Beck, 2017). Field notes are an important piece of grounded theory methodology and are a means of gathering data (Birks & Mills, 2015). Regardless of the strategy for data collection, field-notes should be, and were made immediately after conducting interviews to document details of the interaction with the participant (Birks & Mills, 2015). Field-

notes included documenting non-verbal behaviors, such as gestures, which could not be captured during transcription of the audio-recorded interviews (Birks & Mills, 2015).

The grounded theorist does not use themes and structures, rather the researcher analyzes actions and processes as part of data collection and analysis (Charmaz, 2014).

Fundamental to grounded theory are memos, which are informal analytic notes that the researcher completes following coding and analysis of each interview (Polit & Beck, 2017). Memos encourage the researcher to reflect on and describe patterns in the data and preserve ideas that may later prove valuable to help construct theoretical categories (Charmaz, 2014). Memos were completed during this study to record thoughts and feelings as they related to the phenomenon under study as well as to maintain the audit trail. Engaging with the data using memos provided this researcher with the ability to abstract the concrete data from the interviews and move toward analysis and the development of a theoretical framework. During memoing, this researcher organized the memos by dates and used short descriptive titles to capture the thoughts and ideas. For example, one of the first memos identified was labeled lack of guidance. The lack of guidance memo generated the codes and themes related to lack of structured onboarding and feeling lost in transition. The potential to yield volumes of data quickly and have the means to immediately follow up with the participants to clarify, makes interviewing beneficial (Marshall & Rossman, 2016). In preparation for the interviews, reflexivity was used by the interviewer by keeping a journal to record thoughtful reflection about the experiences during the interviews. This exercise helped to shape the interpretations of the data collected (Polit & Beck, 2017).

In qualitative research, validation is a process, a systematic approach to ensure that the study has rigor (Creswell, 2014). Controversies exist in qualitative studies when describing what indicators to use to identify the quality of a study (Polit & Beck, 2017). The most often used framework to determine the trustworthiness of the quality of a study is done using the criteria established by Lincoln and Guba (1985): (a) credibility - value and believability; (b) dependability – stability of the data over time and analogous to reliability in quantitative studies; (c) confirmability – neutrality and accuracy; (d) transferability – to a similar context or situation; and (e) authenticity – show a range of different realities and convey the feeling tone of lives as they are lived. Maintaining an audit trail throughout the research process assures that the study is credible by that provides a thorough description of the research methods and procedures. Member checking is a technique used in qualitative inquiry to establish the credibility of qualitative data collected (Polit & Beck, 2017). Member checking was offered to participants to review and comment on the transcribed data to assure the correct transcription of the words. Despite the potential contribution of member checking to assure credibility, no participants requested to engage in the activity during this study. The participants may have felt they already had closure following the interview.

### **Procedures for Data Analysis**

The purpose of data analysis was to organize, give structure to, and produce meaning from the data collected (Polit & Beck, 2017). The words from those interviewed provided the data for analysis. Challenges to data analysis included not only making sense of the immensity of the narrative transcripts, but also to assure that the data was presented in a concise way, capturing the richness and value of the data. Insights

into the data required this researcher connect the data together to make the invisible more obvious through iterative analysis (Polit & Beck, 2017). Data analysis using the grounded theory approach eventually led to the construction of a beginning theory or theoretical explanation for the phenomenon of interest (Polit & Beck, 2017). Becoming aware of the assumptions throughout the iterative process of collecting the data enriched the analysis of the data (Charmaz, 2014).

The iterative nature of grounded theory has the potential to request participants provide more information as the research progresses (Charmaz, 2014). Since the data was saturated, it was not necessary to request further information from the 12 participants or engage other participants. Constant comparative analysis, an inductive process, was implemented to develop and refine relevant categories so that further comparisons could be done to identify commonalities and build a theory (Charmaz, 2014). Immediately after completing the first interview this researcher began analyzing the data. Comparing the participant's words after the interviews, and writing memos promoted the development of the initial codes. For example, the majority of the participants described their onboarding experience to the academic role as unstructured, and that they felt lost in transition. These same words resonated throughout the remaining interviews. Abductive reasoning, the logic that begins with taking a close look at the data collected through constant comparative analysis, helped to prove or disprove the hypotheses which then led to the theoretical integration (Birks & Mills, 2015). The iterative analysis of the data occurred following each interview by reviewing the participant's words and the memos that were written following each interview. Once this researcher was able to identify the connections between and within the categories, the conceptual analysis became clearer.

The first step in grounded theory analysis is initial or open coding (Saldana, 2016). Coding helps to identify important words, or groups of words, and then describe them (Saldana, 2016). Initial coding assists the researcher to move from tangible measures and descriptions, keeping in mind what the theoretical meanings of the data and codes might be, and then begin to unify the ideas analytically (Charmaz, 2014). Sifting through the data to collapse or reduce the initial codes resulted in choosing the codes that had relevance to the phenomenon being studied (Harris, 2015). The next phase in coding is referred to as focused coding, which occurs as the initial codes take analytic form (Charmaz, 2014). Focused coding helped to identify relationships between the codes and merged them under broader categories (Harris, 2015). Descriptions of the analytical process can vary in grounded theory, yet the key principles of moving from initial codes to more focused codes and lastly developing categories helped to establish the development of a theoretical framework (Harris, 2015). Sorting through the memos written during the initial data collection and initial coding process helped to identify larger categories and themes. Grouping the codes in a visual format assisted in establishing the building blocks for the emerging theory.

When the categories, themes, dimensions and properties were identified and defined, the storyline became more apparent and the core category emerged. The final phase in the analytical process was to establish a complete explanatory framework for the study and identify substantive categories that explained the phenomenon under study as can be seen in Figure 3.1. Memos were used during the data analysis and were sorted to develop the emerging theory.

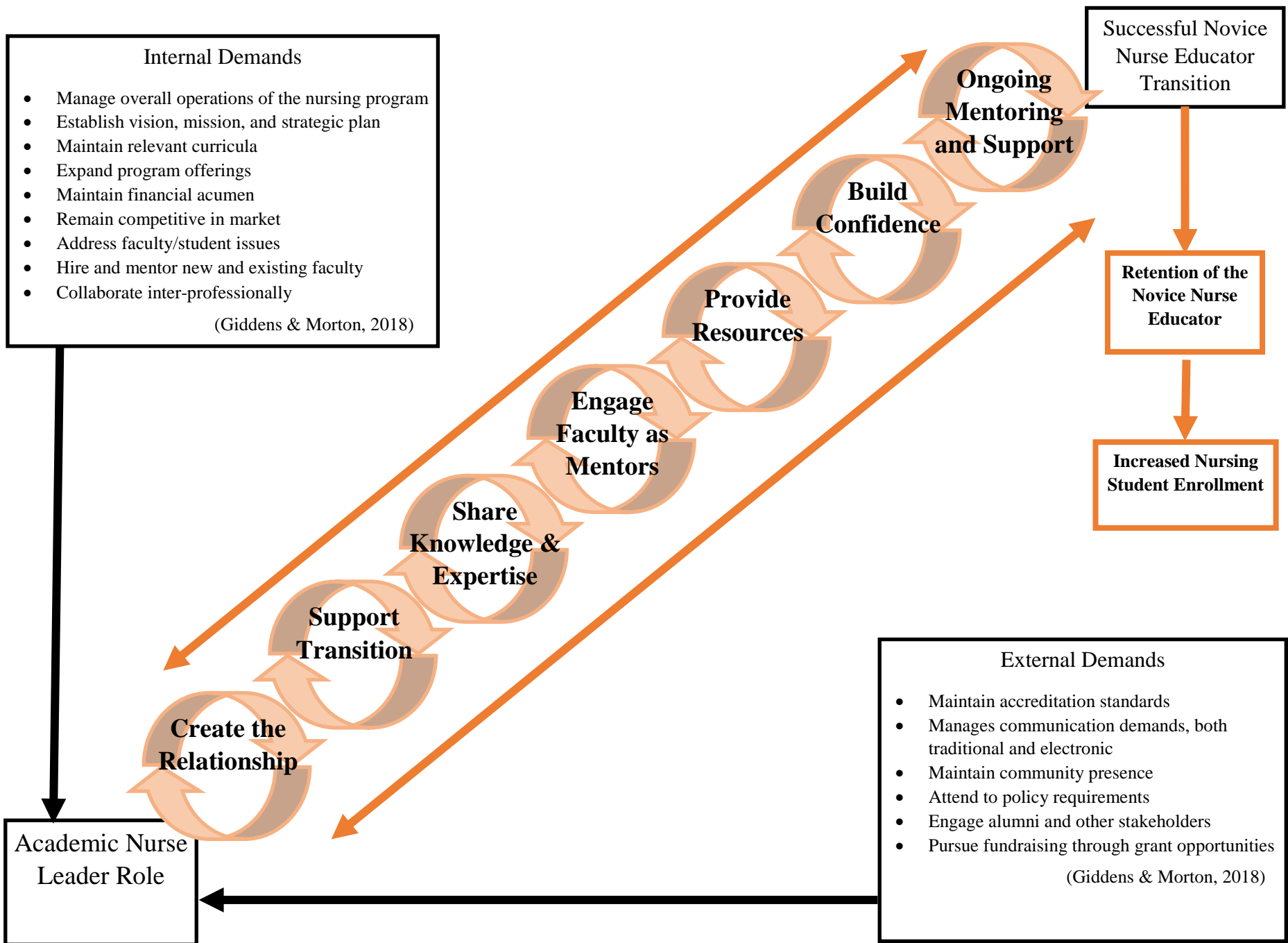


Figure 3.1. Conceptual Model of Leading Through Transition: The Academic Nurse Leader Role

## **Summary**

Chapter 3 provided an overview of the qualitative methodological blueprint for studying the phenomenon in question with the goal of developing a new theory using grounded theory methodology. The purpose of grounded theory is not to test an existing theory but to develop theory through an iterative, inductive, and interactive process (Brinkman & Kvale, 2015). This qualitative grounded theory research study provides an increased understanding of the role of the academic nurse leader in supporting the novice nurse educator to their new role and adds to the nursing education body of knowledge.

Chapter 4 will report the results of the data collection. The analysis of the collected data through face-to-face interviews and an exhaustive coding approach provided a theory unique to novice nurse education. Chapter 5 provides discussion, findings and implications for further study.

## **Chapter 4: Results**

### **Introduction**

The purpose of this grounded theory study is to create a model to guide the work of the academic nurse leader to support the novice nurse educator's transition from a clinical practice role to a nurse educator role in academia. Specifically, this research identified these novice nurse educator's experiences with their academic nurse leader during the onboarding process as a nurse faculty. The participant's stories depict their struggles transitioning to academia and without nurse faculty to teach, the nursing profession will be unable to enroll nursing students. The recent nursing literature documents the growing concerns of the predicted nursing and nurse faculty shortages on the future of health care.

This chapter presents the findings of the study utilizing qualitative data collection. Twelve one-on-one interviews with novice nurse educators who met the inclusion criteria were conducted. Charmaz (2014) asserts that 12 interviews are adequate to discern themes among a like group. The inclusion criteria included employment at an accredited AD nursing program in a community college or hospital-based setting, or a BS nursing program in a college or university setting in NYS. The participants represented most geographic areas of NYS (Appendix E).

### **Data Analysis and Findings**

In this qualitative study, the participants shared similar stories related to the academic leader's role in their transition from a clinical practice to the novice nurse



educator position. A combined process of employing the NVivo software program and manual coding was used to determine and define the categories, the themes, and the dimensions and properties for this study. Coding is described by Charmaz (2014) as the link between the data collection and the development of the emerging theory that explains the data. Initial and focused coding were used to capture the participants' words and to begin to unify ideas analytically (Harris, 2015). The characteristics of each category were further captured in dimensions and properties.

Grounded theory methodology was used to develop a conceptual theory that examines the role of the academic nurse leader in leading the transition of a novice nurse educator. Charmaz (2014) asserts that while the development of a core category in grounded theory was recommended by early theorists like Glaser (1978), and Strauss and Corbin (1990), it is suggested to take a broader approach to achieving a substantive theory. Charmaz (2014) further conveys that when developing a grounded theory from the interviews, data obtained through the iterative process reinforces the theoretical plausibility of the analysis. The iterative process involves constantly comparing categories with data, and categories with categories. The final phase in the analytical process was to establish a substantive theory (Figure 3.1).

**Core category identification.** The participating novice nurse educators in this study spoke at length about their transition process into academia and the experiences with their respective academic nurse leader during this evolution. The descriptive and explanatory ideas are summarized in Table 4.1. Throughout the discussion of the findings, the category is identified in bold letters, the categories are identified using subtitle emphasis and italics, and the themes are identified using subtitles. The

participants words are identified by using their assigned person and number (P#), and the page where the comments can be found in the transcript. The emerging theory of leading through transition: the academic nurse leader role answers the following research question:

How does the academic nurse leader support the transition of the novice nurse educator into the novice educator role?

Chapter 4 is organized further to support the core category, leading through transition: the academic nurse leader role with three categories, seven themes, and eight dimensions and properties that emerged from the research question. The first category is identified as *changing direction*, which incorporates the themes of onboarding or being thrown overboard, regression to novice, and bewildered. The dimensions and properties include: unstructured orientation, hire them and let them be, and not knowing. The second category is *navigating new territory*, which incorporates the themes of *lost in transition* and *autonomy versus doubt*. The dimensions and properties of this category include: desire to make an impact, fake it until you make it, and comfort zone. The third category is leading novices through transition which incorporates the themes of presence versus absence of the leader and wears so many hats. The dimensions and properties include looking for answers from peers and desire to make a difference. Table 4.1 illustrates a summary of the categories, themes, dimensions and properties.

Table 4.1

*Summary of Categories and Themes: Leading Through Transition: The Academic Nurse Leader Role*

Category	Themes	Dimensions and Properties
Changing Direction	Onboarding or being thrown overboard?	Unstructured orientation
	Regression to novice	Hire them and let them be
	Bewildered	Not knowing
Navigating New Territory	Lost in transition	Desire to make an impact
	Autonomy vs. Doubt	Fake it until you make it
		Comfort zone
Leading Novices Through Transition	Presence vs. Absence of the leader	Looking for answers from peers
	Wears so many hats	Desire to make a difference

**Category 1:** changing direction in which three themes emerged:

(a) onboarding or being thrown overboard, (b) regression to novice, and (c) bewildered.

Onboarding or being thrown overboard, was the first theme that surfaced in the category Changing Direction. The novice nurse educators interviewed overwhelmingly articulated that the goal of embracing their new faculty role was paramount. However, to do so, each believed support from their academic nurse leader was crucial. These participants were new to academia but not new to the nursing profession. All the participants, prior to their role in academia, were practicing for several years as a nurse, and three were NPs. These novice nurse educators were considered skilled in their RN roles and now must change direction and learn new skills to adapt to their new role in

academia. For example, P4 said related to her onboarding: “It was initially a meet and greet, hi this is my role [academic nurse leader], this is your role [novice nurse educator], I always have an open door if you have any needs” (p. 2). P5 described that her initial interaction with her academic nurse leader was: “I was handed to that preceptor who was teaching me what it was like to transition to become a nurse educator as opposed to a nurse” (p. 2). When asking P6 about her onboarding she replied: “I think we should end this” [laughs], [needed to be reminded of the confidentiality of the interview], and said, “I literally got an email from the clinical placement person who said, send me your resume and here is the paperwork, and well wishes to you” (p. 7). When asked directly about her communication with the academic nurse leader during onboarding, P6 responded: “there were email conversations regarding, thank you, looking forward to it” (p. 4). She also relayed that the academic leader said, “I’m going to leave you in the very capable hands of this person who has been here for over 30 years, and she’s going to help get you to where you need to be” (p. 4).

The novice nurse educators’ responses to the interview questions for this study affirmed the importance of establishing a relationship with their academic nurse leader, especially during the onboarding process. The participants spoke about no structured orientation plan or onboarding, feeling as if they were thrown overboard and as P12 shared: “most of them [novice nurse educators] have this drowning experience” (p. 12). The theme surfaced throughout the interviews in multidimensional ways. Nevertheless, most of the participants described no clear path to guide them was provided during the orientation process or during the transition into the novice nurse educator role. For example, P12 said, “I was doing things, for example, that I didn't have to do because I

didn't know that there were support staff that did certain things and I didn't even know what to ask" (p. 2).

Individual descriptions of onboarding varied, yet all but two participants suggested that a strategic orientation for novice nurse faculty was not an established or formal practice in the institutions represented. For example, P4 stated: "I think a little more guidance and help with the things that I didn't know which I think could have probably come from my dean as well. I think it definitely would have been a better experience" (p. 2). Another participant said: "It was a very hands-off situation. She [the nurse academic leader] is supposed to be this person that you are guided by and that you can ask questions to and gain information from that you need to be able to become a nurse educator" (P5, p. 2).

The most obvious statement supporting the need to provide the novice nurse educator with a specific, detailed, orientation plan was stated by P11 when she expressed: "having a more formal orientation process, just to learn those things that I've learned along the way, I think it would be helpful to learn them at the beginning" (p. 5). Another example from P12 said: "So, it was a lot of things like 'why didn't you [the novice nurse educator] tell the students about this?' I responded, I didn't know I was supposed to. This was just the first year" (p. 8). Additionally, P12 also expressed the desire to be oriented to her new role when she asked her leader: "can I come in August and sit down and have someone go over the syllabus, how the course outline is, how to set up the course" (p. 4).

The novice nurse educators for this study expressed that they had significantly different experiences where they were previously employed when being inducted into

their roles as nurses in hospitals or other professional settings. For example, P12 said: “orientation to the educator role was significantly different than being oriented to my nursing role in the hospital because when you [novice educator] come from a hospital setting everything is clear. The roles are clear. The leadership is clear” (p. 8). P4 shared: “I see as something in just a few years in academia, it is not as strong as it was in a hospital leadership kind of setting” (p. 2). One novice educator included in her words, that the lack of orientation to her role impacted the students. She relayed, “it’s an injustice to the students if I’m not giving them [the students] what they [the students] need” (P6, p. 6). It became evident throughout the interviews that the participants had to take ownership to find their own roadmap for the academic transition. For example, P6 said, “it wasn’t long before I realized that I’m going to have to figure this out on my own” (p. 4). She continued to say:

I went to the person [academic nurse leader] several times and wasn't really getting any support that I felt like I should be getting. I don't mean babysitting, by all means, I can do without cuddling. I just want to know the process, just tell me so I can move on. (p. 8)

Regression to novice. The second theme that emerged was that all participants had clinical expertise as an RN prior to becoming novice nurse educators. As the participants in this study transitioned to their new academic roles, each had an unclear path. Many of these participants felt the loss of competence in various aspects of learning to assume their new academic role. For example; P1 shared, “It’s just that, oh my God I can’t do this, I was like, oh my God, what do I do? I literally had no idea” (p. 3). P3 said, “I have no clue what any of you people are talking about” (p. 4). P4 shared,

“In a sense you don't know what you don't know” (p. 3). Another participant shared: “I'm new to academia, but I am not a new nurse. This is awful” (P12, p. 5).

The unstructured orientation process during onboarding contributed to the feelings of regression and uncertainty in their role by the participants. For example, expectations such as advising and evaluating students, knowing what to do with a challenging student issue, being assigned to college committees, writing test questions, and simply understanding the new language of academia resulted in many participants feeling a sense of uncertainty which then they likened to how each felt as a new nurse. Some examples include P1 saying: “my academic nurse leader provided answers when I didn't know what to do with a student who missed a clinical day” (p.3). P2 shared: “I have a student who had a drinking problem, I didn't know what to do with that essentially” (p. 5). Related to writing test questions P2 shared an interaction with his academic nurse leader, “she went through some of the things about writing tests and I said, what's the big deal, can't you just write that” (p. 11). P12 shared that she wasn't aware about posting grades in the portal in the college's course management system until this participant received a phone call from a secretary asking for them. P12 responded by saying:

I have my laptop up, my grades are in front of me for the classes I taught, I don't understand what you are asking; the secretary responded saying the grades have to go to the portal, didn't she [academic nurse leader] tell you that? (p. 4)

Throughout the interviews, the novice nurse educators believed that feeling like a novice again may have had an impact on both their successful transition and the desire to remain in their newly acquired academic role. When asked about their experiences,

several participants used metaphors to describe their transition, and expressed similarities to the feelings of *Regression to novice*. For example, P1 said: “I mean, I would say it was trial by fire, I probably would have left if I had someone [academic nurse leader] who is less supportive and less encouraging” (p. 7). P12 said: “If you just hire them and let them be, and just hope that they're [novice nurse educator] okay, most of them have this drowning experience” (p. 12).

The participants used a variety of versions of the words; not knowing what they didn't know, supporting the feeling of bewilderment. For example, P2 restated the words of his academic leader saying, “for the first year, you'll sit there with like a deer at headlights” and shared: “I have no clue what any of you are talking about” (p. 13). P5 related; “I found myself sometimes just stopping and being like, okay, now what? Where do I go from here? What's my next thing? I'm not really sure” (p. 6). The feelings of bewilderment are best described when the participants stated they were often unsure about their role. For example, P1 said, “There were countless things that I didn't even know to begin with” (p. 3). Furthermore, she said “I don't know if they really tell you what you need to do when you get into the role of an educator” (p. 7). P4 shared that she was “constantly learning and uncovering more things about education” (p. 1). The participants in this study had differing experiences in the academic setting than they had in their previous hospital or clinical environments. The examples from the novice nurse educators support their feelings of confusion or bewilderment as they transitioned to their new role expectations in academia.

**Category 2:** the second category is Navigating New Territory, which includes the themes of lost in transition and autonomy vs. doubt.



Although the novice nurse educators expressed that each were confident in their own clinical skills, the new academic role as educator was a foreign entity. The participants shared that they often wondered what to do and wandered trying to find answers. For example, P1 said: “having a syllabus handed to me and said, you have to teach this stuff. I don’t know if they really tell you what you need to do when you get into the role of an educator” (p. 5). Further P1 said: “the students come to me with these things and it’s hard to navigate” (p. 6). P4 shared the following: “I used textbooks and Google, [laughs] things like that to try to see what is out there or resources to help me with difficult students” (p. 4). She also expressed that as a novice nurse educator, “you fake it until you make it” (p. 6). P12 said: “I had this uneasy feeling because even I knew that I was going into new territory. I didn't know what that landscape was like” (p. 2).

There was no evidence gathered from the participants during the interviews that identified any one consistent theme that led to a seamless navigation to academia. Variables such as leader behaviors, college policies, leader responsibilities, and having a strategic orientation plan all contributed in some way to the participant’s transition to their new role. However, each of the participants spoke with passion about their desire to make an impact on the profession of nursing. This altruistic characteristic was one of the reasons they remained in their role. For example, P4 said: “the most rewarding part of my job is how many people I have been able to make an impact on realizing their dream to become an RN (p. 8). P6 shared the following: “ultimately, I love this [teaching] and I want to do this because I want to see the students be successful. That's my ultimate goal. I just want to” (p. 5). P9 said: “basically, if we make a lasting impact in one student and they carry it with them and they touch all those patients, it doesn’t get any better than

that, I don't think" (p. 6). When P10 described what is most rewarding about her role she responded by saying: "the hugs, and when you go to graduation and see how the students have grown and love you, and you love them and you're absolutely ecstatic to hear about their first jobs" (p. 9). Each of these examples support the novice nurse educators desire to make an impact while navigating new territory.

The next theme, autonomy vs. doubt became apparent as the participants spoke specifically about the transition from their previous role as a nurse to their new role in academia. Each participant entered academia after spending several years practicing autonomously as an RN or NP. Nine participants worked previously as staff nurses in an acute care hospital setting on a medical/surgical floor, in a critical care environment, or obstetrics. The three remaining participants were NPs having worked in either acute care hospitals or primary care offices. These novice nurse educators relayed that practicing as a nurse in a clinical setting was their individual comfort zone. For example, P2 said: "I was hired on the liver transplant unit as a Nurse Practitioner" (p. 3). P3 shared, "I was working as a staff educator [with licensed nurses] in downstate NY as a visiting nurse" (p. 3). One participant shared the following: "clinical of course is my comfort zone that I love, but I also know I want to grow as an educator and I have done that. I like creating learning" (P5, p. 9).

Having the desire to make an impact by educating future nurses was dimensionalized in the participant's words. For example, P2 shared: "one of my co-workers in the hospital suggested I work as an adjunct faculty to make some extra money, I said oh, okay. I tried it and I fell in love with it" (p. 3). Participants related that they pursued higher education to be able to take on the teaching role. P5 said: "you spend 7

years between the bachelor's and the master's degrees and being able to create and guide the students learning, I really like that aspect of it" (p. 9). P8's interest in education came when she was introduced to her future academic nurse leader while taking a class from her. She relayed that she "saw folks get excited about nursing again and it made me feel how much I miss what I really love 20 some years ago [as a new nurse]. It really, really impacted me a great deal" (p. 1).

The participant's described that despite feeling comfortable teaching students in the clinical setting, they were unaware of the many new skills that novice nurse educators needed to know to assume their new role in academia. One response that echoed feelings of doubt was evident when P12 said:

Just because I had been a nurse for so long it didn't mean that I would know how to teach in a classroom and I think there is an erroneous assumption; that because you're a clinical expert - that makes you an expert in the classroom (p. 2)

These novice nurse educators had a strong desire to make an impact and influence the profession of nursing. The portrayals by the novice nurse educator describing an unstructured orientation plan, coupled with being hired and left on their own, and not knowing what to do support the first two categories and themes that are identified in this study.

**Category 3:** the third category is leading novices through transition which incorporates the themes of presence vs. absence of the leader and wears so many hats.

The novice nurse educators in this research study expressed both positive and negative interactions between them and their respective academic nurse leader. From a positive lens, novice nurse educators described their leader as being transparent using

words to describe the transparency as having an open-door policy, provided them with resources, and were available and accessible. These interactions, stated by these participants, were believed to positively impact their transition to academia. These novice nurse educators said that their individual nurse leader's ability to be present for them as learners when they had a question or needed feedback about performance indicated to them [the novice nurse educator] that the leader was present versus absent for them. For example, P1 said she experienced a "very open-door policy so a lot of times, I'll just stop by and ask something or just talk about how students did on an exam or something like that. She's [academic nurse leader] very available" (p. 4). P2 stated: "she [the academic nurse leader] always checked in with me from the very beginning. Anything I need, her office door's always open" (p. 5). Lastly, P8 shared: "my leader was open, transparent with expectations, approachable. I don't know what the right word is to say, but expecting the best out of everyone, but with the recognition that everyone's best is different" (p. 6). Based on these responses, few of the novice nurse educators interviewed believed that their leader provided them with the necessary resources, guidance, and support to launch their new role. P2 also said, "I feel like I really lucked out. This is the first job (and truthfully, I'm 55 years old) that I ever wanted to get up and go to work" (p. 13). He further declared when the academic nurse leader walks in the room he thinks to himself: "oh my God, thank God, the boss is here" (p. 6). P3 said, "I would be hard pressed to find somebody else who's been more supportive of my role as an educator" (p. 3). Another example that exemplified the academic nurse leader's role was when P2 shared: "We are her (the academic nurse leader's) priority. I should say the

students are her priority but to that, we become her priority. She [the academic nurse leader] makes you feel special, she makes you feel wanted” (p. 12).

Several of the participants talked about their perceptions of the academic nurse leader’s competing responsibilities. For example, P1 said:

I think there's probably a lot of things she does [the academic nurse leader] that I don't know about. I don't know if you ever seen like the Bourne movies where there's all this stuff going on and you can't quite understand. I feel like that's the academic nurse leader. She has to deal with all that administrative mess. (p. 5)

P2 shared: “Oh my God, she *wears so many hats*” (p. 11). P10 said, “There was so much and there was only so much that she [academic nurse leader] could do. I don't want her to sound like a bad person. She was overloaded” (p. 6). These rich descriptions from the participants in this study describe that the role of the academic nurse leader is complex.

The negative perceptions of the leader portrayed in comments from the participants were much more frequent than the positive and supported that the leader was absent during their transition to the academic setting. For example, P4 shared:

Sometimes leaders can forget how valuable they [leaders] are to their subordinate or to people that work underneath them because they [leaders] may take for granted their level of achievement or their experiences or their professional networks. Although, not everybody wants to strive to be a dean. We all want to professionally grow. (p. 9)

P6 said: “when I tried to ask a question to her [academic nurse leader] she said, okay, just send me an agenda and we’ll talk about it. That was like the nail in the coffin

for me, I was disgusted” (p. 9). P7 stated, “I think a leader should also promote teamwork, and give more constructive feedback as opposed to destructive. We want to build up our peers or our colleagues, we don’t want to knock them down” (p. 8). And P8 shared: “how can you [novice nurse educator] create enough value in reaching your career goals that gives the organization enough value so that they [nurse leaders] want to support you to reach their career goals” (p. 7). P10 had only been in the novice nurse educator role for less than one year. She had the following to say about her academic nurse leader: “I feel that she should be more encompassing of the needs of a newer person” (p. 6). P11 commented the following, “I was employed for two weeks in my role and I hadn’t met my nursing chairperson [academic nurse leader] yet” (p. 3). One of the most powerful responses came from P12 who said: “she had an authoritative style of leadership that was abusive, and she should not have been in the role as long as she was, but people turned their heads because she was getting the job done” (p. 7). Furthermore, P12 said:

I feel that there's this disconnect between the administration and the faculty.

Moreover, this was explained to you, and then making me feel like I was stupid, and I said, you know something? I don't think that I'm asking anything that isn't normal (p. 8). I think that you [nurse leader] should be more invested in how my transition is going (p. 12)

All the participants who expressed the absence of the leader also indicated often reaching out to nursing faculty peers to learn what they [these novice nurse educators] did not know. The participants spoke about being assigned to a peer mentor or self-selecting someone on faculty or others to help guide their transition. For example, P1 shared,

“there is another longstanding faculty member, and she’s been available to me as a resource” (p. 8). She also acknowledged a faculty who started one semester before she did and said, “we support each other sometimes” (P1, p. 8).

P4 shared:

I went to fellow faculty members that I worked with who have experience and who – as you are working and getting to know an organization you can kind of get it - just for who’s a smart cookie and who’s respected amongst the team. I was starting to notice those observations fairly early in starting here and found some informal leaders among the faculty and I would ask them for assistance (p. 4)

P12 said, “but I’m not a quitter, and eventually with time I found my own resources” (p. 2). The surplus of the participants shared experiences that they perceived as negative, support the absence of the leader during the novice nurse educator transition.

A common theme expressed by all participants was the feeling of being excited to teach and the desire to make a difference by teaching and interacting with students. For example, P1 stated: “I like obviously interacting with the students like one-on-one if they’re [the students] coming in for help. I just really like that piece” (p. 5). P9 shared the following regarding the best part about her role as a novice nurse educator:

The students and the work environment, because it’s the best of both worlds, you get to be a nurse and you get to work with students. The opportunity to improve to make the world better is that much greater. Basically, if we [nurse faculty] will make a lasting impact on one student, and they [the student] carry it with them and they [the students] touch all of those patients, it doesn’t get any better than that, I don’t think (p. 6)

P12 said, “what I love about my role is that I have the opportunity to impact the next generation of nursing by imparting my knowledge and expertise” (p. 6). However, she articulated when referring to getting her master’s degree in nursing that, “even if they take nursing education courses or education courses, it is still not enough to prepare you for walking into that novice nurse educator experience (P12, p. 6).

### **Summary of Results**

Chapter 4 discussed the findings of this grounded theory research study by exploring novice nurse educator experiences when transitioning into an academic setting with the emphasis of the academic nurse leader’s role during this pivotal shift from the nurse clinician to novice nurse educator. Twelve interviews were conducted, transcribed, and coded revealing one core concept: leading through transition: the academic nurse leader role which was further analyzed into categories and themes identified as structure, processes, and relationships that were not evident, or were not perceived by the novice nurse educator as supportive during their transition to the role. Leadership, like a grounded theory study is not linear, but rather an interactive approach. For example, P12 relayed during the interview:

I don’t understand why leadership has not figured this out someone come in and shadow. Before you really agree to this or now that we know you are interested we are going to have you sit in with the faculty member for 2 months or a month and shadow that person, so that they get an idea of how classrooms dynamics are (p. 6). Then you wonder why people are leaving academia to go back to clinical practice (p. 2)



The novice nurse faculty reflected on their first experience as an educator and despite some of the struggles, all remain actively engaged in their academic role. For example, P9 related: “when you [the novice nurse educator] are new, that's when you need to know you're not alone. To tell me this is going to be difficult, don't throw in the towel, come see me” (p. 6). P12 shared the following: “my chairperson [academic nurse leader] told me that you know more than they do. You've been NP forever, you worked in all these roles, you'll be fine” (p. 2).

The transition of the expert clinical nurse to the role of novice nurse educator is not a new phenomenon, but there is a significant gap in the literature that examines the role of the academic nurse leader in supporting the transition. The concept of trust was mentioned by one participant when she said: “the fact that you aren't providing these things to me [information during orientation], just make me not trust who I'm working for” (P12, p. 8). Some of the participants in the study referred to their belief that their experience as a nurse, coupled with a master's degree would provide the skill and confidence to be successful in an academic role. One participant who was pursuing her doctorate to meet the minimal requirement in her college to teach, related that when she asked her academic nurse leader for some leeway with deadlines, the academic nurse leader said: “no, that's just life, there is no such thing as a work-life balance. You just have to figure it out” (p. 8). Another participant related her experience by saying:

Had it gone in a way that it was in my dream, the way I thought it would be, this is what we do, this is why we do it, this is how, and all these things, explaining the ins and outs so I have some idea, but the way it has gone, I know how to go in,

prepare a lecture for my group. I know how to teach the lab. I know how to do all of that stuff (P6, p. 5).

Instead of the experiences being described as a smooth transition, most of the participants experienced false beliefs amidst changing direction and navigating new territory, both contributing to the conceptual model of leading through transition: the academic nurse leader role.

Chapter 5 will explore the findings, implications and recommendations from this study.

## **Chapter 5: Discussion**

### **Introduction**

The purpose of this study is to create a model to guide the work of the academic nurse leader to support the novice nurse educator's transition from a clinical practice role to a nurse educator role in academia. This conceptual model, leading through transition: the academic nurse leader role (Figure 3.1) answers the research question: How does the academic nurse leader support the transition of the novice nurse educator to their role? The model is based on both the findings derived from the words of the participants during their respective academic transition, and the categories that emerged based on the analysis of the data. Understanding the significance of the academic nurse leader role in supporting the transition of the novice nurse educator will contribute to nursing education's body of knowledge and will inform academic nurse leaders of what novice nurse educators believe they need to promote successful transition. The results from this study have implications for the academic nurse leader and for future research in nursing education.

There is very little contemporary empirical literature that specifically examines the roles and responsibilities of the academic nurse leader as they relate to the phenomenon under study. Most of the research on academic deans in nursing occurred in the 1980s and 1990s when the higher education landscape and the health care environment was very different. Now, the role requires that the academic nurse leader be able to navigate both internal and external demands with the goal of achieving a

successful nursing program. The recent literature that highlights and predicts an impending nurse faculty shortage has brought increased attention to the academic nurse leader role. Multiple vacancies for the academic nurse leader role have been attributed to them being unprepared for their role and the demands they face (Bouws, 2017). The success in the role of the academic nurse leader is paramount to advance the nursing profession.

Seeking to understand how the academic nurse leader supports novice nurse educator transition, a qualitative grounded theory study was completed to answer the research question. The words of the novice nurse educators in this study signify their viewpoints and experiences and their words strongly suggest they need support and guidance from their academic nurse leader to be successful in the novice nurse educator role. The novice nurse educators identified that they had little to no support or guidance as they progressed through their transition to academia. Therefore, the model will encourage the academic nurse leader to implement the concepts identified and design a formal, structured induction plan that will contribute to the novice nurse educator's success during transition to academia.

This chapter discusses the major features of the model and summarizes the research that contributes to its creation. Moreover, this chapter discusses the implications for professional nursing education, policy change, executive leadership, and social justice to give meaning to the findings and to connect the points of analysis. The chapter concludes with identifying limitations to this study and provides recommendations for further research.

### **Substantiated Findings**

The emerging model is a qualitative inquiry into the phenomenon of interest brings to light a conceptual model that represents a substantive theory named: leading through transition: the academic nurse leader role (Figure 3.1). This chapter connects the data gathered in this study to the theoretical framework that uncovered the model, revealing the major categories and themes. The categories embedded within the model are (a) changing direction, (b) navigating new territory, and (c) leading novices through transition. These categories are further expanded into themes which include: (a) Onboarding or being thrown overboard; (b) Regression to novice; (c) Bewildered; (d) Lost in transition; (e) Autonomy vs. doubt; (f) Presence vs. absence of the leader; and (g) Wears so many hats. The study's core category, categories and themes support the need for an operational model to assure the academic nurse leader best understands and employs strategies to support the novice nurse educator's transition.

### **Implications of Findings**

The first category, changing direction establishes the context that novice nurse educators most often enter the world of academia after working as a nurse in the clinical setting and have chosen a new career trajectory. The participants in this study verbalize feeling excited to start this new academic position, but some found that changing professional direction to the academic setting was not as one participant said: "the way I dreamed it would be" (P6, p. 5). These participants' previous experiences in a hospital setting included the benefit of a very structured orientation to their RN clinical role. The participants shared during the interviews that because of their past nursing positions they expected the academic nurse leader to be their primary resource throughout their transition period, like their nurse manager was for them in the clinical setting. Instead,

the participants found the opposite to be true. The academic nurse leader hired the novice educators and offered no guidance or support. The unique procedural induction provided to the participants in this study, when in previous nursing positions, warrants a similar process to bridge the gap between the worlds of practice and the worlds of academia.

Given the predicted shortage of nurses and nurse educators, it is recommended for the future of health care that the academic nurse leader implement strategies defined in this model to transition novice nurse educators. As the participants spoke about their onboarding, it was evident in their words, vocal tone, and inflections that they did not feel they had created a relationship with their leader or received the support they needed to change direction or to navigate new territory, the second theme in this study. When the participants were asked “can you talk about your novice nurse educator position in the college of nursing as it relates to the onboarding or hiring process?” the majority of the respondents used words like “it was a very hands-off situation; I literally got an email, and I felt a little lost” (P5, p. 2; P6, p. 7). Much of the evidence gathered from the participants in this study suggest that novice nurse educators had no formal structure or process during transition, and thus supports the need for a more formal induction as typified in the model. Like the study completed by Evans, (2013), aspects of the formal process for transition such as socialization to the role, workload concerns, administrator and peer relationships, salary, and consideration of work-life balance must be considered for successful role transition. Moreover, the need for more leadership training, including how to establish good relationships and dialogue with staff is cited as necessary for successful novice nurse educator transition to academia (Bellibas et al., 2016).

### **Implications for the Profession**

The results of this study leading to the creation of the conceptual model of leading through transition: the academic nurse leader role should inform those aspiring to become academic nurse leaders to understand the significance and the demands of the role. Mentioned previously, the scope of the leader's responsibilities has changed and now include both internal and external demands. These demands require the leader to be agile and be able to lead in complex environments. The aging of the academic nurse leader is close to reaching its pinnacle, and nursing education will be faced with having to replace seasoned leaders with those potentially less experienced. The research completed in the 1990s indicates many reasons why academic nurse leaders leave their role within a span of 5 to 7 years, and suggest it is most likely related to being unprepared for the role (Quell, 2005).

The participants in this study confirm that the academic nurse leader's role is multifaceted by saying that the leader wears so many hats. Although it is important for nursing educators to understand the depth of responsibilities of the academic nurse leader's role, the academic nurse leader must be able to juggle the demands to meet the needs of the novice nurse educator. The following internal and external demands required of the academic nurse leader role should not be considered inclusive and are not listed in order of priority. These include: (a) hire and mentor new and existing faculty, (b) manage overall operations of the nursing program, (c) maintain financial acumen, (d) expand program offerings, (e) remain competitive in the market, (f) maintain relevant curricula, (g) recruit new faculty, (h) collaborate inter-professionally, and (i) establish the vision, mission and strategic plan (Giddens & Morton, 2018).

Academic nurse leaders must navigate both the demands of a rapidly changing health care delivery system and the challenges faced by higher education leaders. The external demands of the academic nurse leader include: (a) maintain accreditation standards, (b) respond to social media concerns, (c) maintain community presence, (d) attend to policy requirements, (e) respond to alumni and other stakeholders, and (f) pursue fundraising through grant opportunities (Giddens & Morton, 2018). Central to the success of any nursing program is the nursing faculty, therefore a culture of shared governance should be present to accomplish the internal and external demands.

Novice nurse educators in this study overwhelmingly voiced they felt lost or had no idea what their peers were talking about when they spoke in academic terms. The academic nurse leader must acknowledge that the novice nurse educators, while skilled clinically, has much to learn to develop the cognitive skills needed to become an educator. While clinical experience is beneficial to help achieve transition, the dual role of clinician and teacher requires more. Learning how to develop a curriculum, understanding how to write test questions that will prepare students to achieve success on their RN licensing exams, and dealing with accreditation expectations are only a few areas that the novice nurse educator cognitive skills that must be developed.

Several of the respondents spoke to the workload as being more than they expected, sharing that they imagined the academic role less demanding than the practice setting. The novice nurse educators shared that having a work-life balance was one reason they chose to enter the world of academia. Helping to ease the process of transition may promote more time for the novice educators to adjust to the demands of the educator role.



## **Implications for Policy Change**

Despite the internal and external challenges, the academic nurse leader must commit to leading change and innovation in the nursing education environment. Since nursing practice is influenced by policy and the participants in this study transitioned to academia from the clinical setting, they should be familiar with the processes involved in reshaping policy. Moreover, the AACN mandated that policy competencies are required in BS and higher degree curricula (2011). However, since the novice nurse educators in this study are unfamiliar with the academic environment they will need guidance related to policy change from the academic nurse leader as they transition. Higher education settings have a multitude of policies to refer to when new employees need guidance on anything from personal to student issues.

Based on the results of this study, it is recommended that policy change occur to require a peer mentoring model for novice nurse educators as part of their onboarding. There is a plethora of examples of mentoring models in the literature to refer to when designing specific content that fit the college's culture and mission. Ultimately the goal should be to develop the novice nurse educator professionally and personally to build confidence and competence in the new role. Mentoring is further discussed in the recommendation section of Chapter 5.

## **Implications for Executive Leadership**

The participants in this study assert that the leader was mostly absent during transition. Few participants relayed positive experiences, but the positive experiences complement that the model described in this study is effective to support novice nurse educator transition. These positive statements indicate that the academic nurse leader

created a relationship, helped to socialize them to the new environment, was available to share their expertise based on novice needs, assigned other faculty as resources, and provided continued mentorship and support to build confidence during their onboarding.

There is extensive empirical data that defines leadership, but the one collective definition about leadership is that it involves creating relationships with subordinates which is supported in the conceptual model. Kouzes and Posner (2012) call for leaders to aspire to embrace five practices to become exemplary leaders. They include: (a) model the way, (b) inspire a shared vision, (c) challenge the process, (d) enable others to act, and (e) encourage the heart. In addition, Kouzes and Posner (2012) recommend that leaders strengthen their subordinates by helping them to develop competence. The model: leading through transition, the academic nurse leader role validates that academic nurse leaders should follow the advice of the research done by Kouzes and Posner (2012) by creating relationships with the novice nurse educator to support transition to the academic role.

### **Implications for Social Justice**

Nurses understand the health care system in the U.S. and know firsthand the inadequacies presented to many people. Some research asserts that RNs are integral to alleviating the health inequities in the population (Thurman & Pfitzinger-Lippe, 2017). Leaders in nursing education must understand the importance of the concept of social justice and expect that nurse educators teach this concept as an integral part of the nursing curriculum. Teaching social justice concepts in nursing practice should include interventions that focus on correcting the inequities, thus contributing to the achievement of social justice in health care. The passage of the Affordable Care Act has resulted in

major changes to the availability of health care and therefore, helping students understand their important role as agents of social change is critical. The American Nurses Association (ANA) professional code of conduct, which guides the practice of nursing, has included social justice advocacy as one of five core values that epitomize the caring professional nurse. The code describes the significance of the nurse's role in shaping health care policy and underscores the role of leadership, advocacy, and collective action for social justice to address determinants of health (ANA, 2015). In this era of major health care reform, it is reasonable to expect that social justice awareness should be on the mind of the professional nurse (Lathrop, 2013). The importance of social justice and advocacy are said to be "fundamental to the discipline of nursing" (American Association of Colleges of Nursing, 2008, p.4).

Faculty should be mentored by the academic nurse leader and other nurse faculty to explore ways in which discussions surrounding the concepts of social justice can occur. For example, during clinical experiences students quickly find themselves in a highly complex health care environment where the need to advocate for social justice on behalf of the patient is essential. Providing the opportunity for deliberating and understanding the importance of social justice as integral to nursing practice. Since one of the unique privileges of nursing is being able to serve others who are often in a vulnerable place in life, the academic nurse leader should provide guidance about the need for novice nurse educators to include concepts of social justice in their teaching practice.

## **Recommendations**

The data gathered from this research study indicate there is a need for a more formal and organized orientation plan for onboarding novice nurse educators. Recommendations include providing all novice nurse educators with a copy of the NLN's (2012) book on the *Scope of Practice for Academic Nurse Educators*, as a highly recommended text to read during initial onboarding. Being prepared for the expectations of the novice nurse educator role may help to retain them. As illustrated in this study, being able to retain the novice nurse educator will contribute to the projected nurse and nurse faculty shortage.

There was no opportunity in this study for the participants to reveal information related to their formal educational preparation. The novice nurse educators all met the inclusion criteria of the study therefore were minimally prepared at the master's level. However, this research has identified that having an advanced degree may not prepare the novice nurse educator for the new role in academia. A recommendation would include requiring novice nurse educators to either have taken appropriate coursework in their graduate program or to agree to participate in attaining coursework relevant to the teaching role.

Because of the absence of the academic nurse leader, the novice nurse educators sought peers or used search engine technology to find the answers they were seeking. As suggested by the model in this study, peer faculty should participate as formal mentors for the novice nurse educators. All faculty interested in assuming the mentor role should participate in professional development education related to becoming a mentor and then work collaboratively with the academic nurse leader to develop and implement an organized process. Moreover, the mentoring should have an extended timeline that

correlates with Benner's (1984) research on novice to expert. Concurrently, the leader should consider providing incentives to those faculty mentors by monetary reimbursement budgeted for faculty development. Other suggested incentives such as providing the nurse faculty compensation time, or a decreased workload should be offered.

Since most of the participants described the absence of the leader, it is recommended that all academic nurse leaders have leadership training prior to assuming their role. Leadership skills could be taught through professional development offerings. The AACN provides for a year-long leadership program for new and aspiring deans (2017). Additionally, the Robert Wood Johnson Foundation offers a three-year executive nurse fellow program. Both resources may necessitate funding, however the investment would provide useful strategies to help the academic nurse leader to support the novice nurse educator transition. Another recommendation is to mandate participation in a formal mentoring program for academic nurse leaders. The mentoring program should be offered through the national professional accrediting bodies, ACEN and CCNE and be required during each accreditation cycle. Requiring a formal mentorship program for the academic nurse leader will enhance their understanding of the benefits of mentoring and apply the concepts to novice nurse faculty transition.

The academic nurse leader should secure dollars in their college budget for faculty development. For example, sending faculty to conferences to learn and network with others in similar roles may assist faculty with the transition process. Academic nurse leaders should familiarize themselves with any resources available at little to no cost to help guide the novice nurse educator during transition. Community groups of

nursing leaders often host guest lecturers at local meetings that would provide a networking opportunity for novice nurse educators.

Several participants in this study suggest that a shadowing experience prior to hiring a nurse faculty be implemented. The novice to expert model emphasizes that a higher level of performance in the role is dependent on practical experience (Benner, 1984). Allowing novice nurse faculty to have practical experience with a seasoned nurse educator prior to committing to the novice nurse educator role could benefit the transition experience. Another recommendation is for colleges of nursing to offer internal programs that provide campus wide guidance and support for all new faculty to enhance long term career success and job satisfaction.

### **Recommendations for Further Research**

The results of this study validate the need for more specific studies that examine the role of the academic nurse leader supporting transition of the novice nurse educator. Perhaps a study of academic nurse leaders nationwide should be accomplished to identify strategies being used that contribute to successful novice nurse educator transition. Moreover, the results of a national study may provide the academic nurse leader other strategies to recruit and retain these nurse novice nurse educators.

Additional recommendations include a retrospective study of novice nurse educators who have left the academic environment to discern reasons and potentially reveal more in-depth information as to the why they left their new role. The information obtained would identify other areas of concern so that the academic nurse leader could best support novice educator transition. Further research that examines leadership styles of academic nurse leaders is recommended. Consideration should be given to choosing

an assessment tool other than a tool that asks the leader to self-identify leadership behaviors. The literature cites that self-reported leadership behaviors may not accurately measure the academic nurse leader's true leadership skills (Bouws, 2017; Giddens, 2018).

This study included novice nurse educator representation from private secular and non-secular colleges of nursing, large community colleges, and private liberal arts colleges and universities. The representation of all program types did not differentiate as it relates to the leadership support from the academic nurse leader during transition. A larger sample of participants from all program types could identify differences that can be used for further study of those leadership behaviors.

### **Limitations**

As with any qualitative study, the findings are not generalizable outside of this group (Lincoln & Guba, 1985). Other limitations include topics not addressed in this study that may have impacted the novice nurse educator transition such as: academic preparation for the role, gender, race, salary considerations, and age of the participants.

### **Conclusion**

The predicted circular crisis of the nursing shortage is well documented and indicates the urgency to establish processes and strategies that recruit, support, and retain novice nurse educators so they can prepare nurses for the future. The literature identifies as the American population continues to age, the need for nursing care will expand. A recent survey completed of 662 national nursing programs by AACN identified a nurse faculty vacancy rate of 7.1 percent (AACN, 2017). Further data from a national sample of colleges of nursing revealed there were 64,067 qualified applicants denied admission to undergraduate and graduate nursing programs (AACN, 2017). There are currently

three million nurses in the nation, however it is projected that by 2022 an additional one-million nurses will be needed to supplement the shortage (AACN, 2017). Failure to address the problem identified in this research study will result in colleges and universities continuing to turn away qualified applicants to nursing.

The literature cites an abundance of studies on the novice nurse educator transition to academia. However, there is a significant lack of research that specifically address the role of the academic nurse leader on the novice nurse educator's successful transition to the academic role. Major scholars identify the transition experience from the clinician role to educator role as stressful and needing more formalized processes, yet no studies clearly articulate the impact the academic nurse leader has on successful novice nurse educator transition.

A grounded theory methodology is used to present the data from 12 novice nurse faculty participants who taught in either an AD or BS nursing program in NYS. The use of grounded theory in this study is applied to gather the data in response to the phenomenon under study. Rich descriptions to the interview questions did yield the data that was necessary to develop categories and themes which eventually led to developing the substantive model depicted in Figure 3.1, leading through transition: the academic nurse leader role.

The participants in this study clearly articulate their frustrations with the lack of support and guidance from the academic nurse leader, yet their desire to teach and make an impact on the next generation of nurses outweigh the obstacles they face during transition. The findings in this study give insight to the lack of a formalized process by the academic nurse leader that occurs during onboarding of the novice nurse educator.



Many examples were relayed by the novice nurse educators during interviews as they shared their interactions with their academic nurse leaders. However, they all admit needing guidance from the academic nurse leader was critical to successfully navigate the new territory of academia. Despite the frustrations, all the novice nurse educators interviewed remain in their new role and gave no indication that they planned to leave teaching.

Academic nurse leaders must recognize that their support of the novice nurse educator will positively impact not only the novice faculty, but the future preparation of nurses. As identified in this study, and evident in the substantive model presented, these academic nurse leaders must support the transition of both novice and expert nurse faculty members to achieve the vision, mission, and goals of their respective nursing program, institution, and professional legacy. The novice nurse educator's success in transitioning to their role is critical to meet the current and future needs of the nursing workforce.

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**Appendix A**  
**IRB Approval Letter**

April 25, 2018

File No: 3865-041918-03

Marianne Markowitz  
St. John Fisher College

Dear Ms. Markowitz:

Thank you for submitting your research proposal to the Institutional Review Board.

I am pleased to inform you that the Board has approved your Expedited Review project, "The Role of the Academic Nurse Leader in Supporting the Transition of the Novice Education: A Grounded Theory Study."

Following federal guidelines, research related records should be maintained in a secure area for three years following the completion of the project at which time they may be destroyed.

Should you have any questions about this process or your responsibilities, please contact me at [irb@sjfc.edu](mailto:irb@sjfc.edu).

Sincerely,



Eileen Lynd-Balta, Ph.D.  
Chair, Institutional Review Board

ELB: jdr

# Appendix B

## Informed Consent Form

Appendix E  
St. John Fisher College  
INFORMED CONSENT FORM  
Appendix E



**Title of study:** The Academic Nurse Leader's Role in Supporting Novice Nurse Educator Transition: A Grounded Theory Study.

**Name(s) of researcher(s):** Marianne Markowitz

**Faculty Supervisor:** Dr. Theresa Pulos - Phone for further information: 585 203-4349

**Purpose of study:** Given the lack of sufficient theories to explain this phenomenon, the aim of the study is to specifically gain insight into the real-life experiences of novice nurse educators through garnering descriptions of the transition process as well as recounting of the interactions with the academic nurse leader. These rich qualitative descriptions will be utilized to create a theoretical framework. This theoretical framework will contribute to the development of a model for successful transition of the novice nurse educator.

**Place of study:** Coffee shops as a meeting destination near nursing colleges throughout New York State or Skype or FaceTime at locations determined by the participants

**Length of participation:** Semi-structured interviews will last approximately one hour. This researcher may contact you following this interview and its transcription so you may review and comment on the notes made to assure I have accurately captured your words and understood their meanings.

**Method(s) of data collection:** semi structured face to face, Skype or FaceTime interviews, audio taped only.

**Risks and benefits:** The expected risks and benefits of participation in this study are explained below. Minimal risks are to be expected. However, should the interviews surface any uncomfortable feelings you have the right to discontinue participation at any-time. Moreover, there is contact information at the end of this form should you experience any emotional or physical discomfort.

**Method for protecting confidentiality/privacy of subjects:** Data will be de-identified by using either numbers or alternative names. The colleges will not be identified other than general geographic locations such as western NYS, central NYS, capital region in NYS, downstate in NYS.

Your information may be shared with appropriate governmental authorities ONLY if you or someone else is in danger, or if we are required to do so by law.

**Method for protecting confidentiality/privacy of data collected:** Data will be locked in a password protected computer with an external hard drive at the researcher's home and will be disposed of after three years.

**Your rights:** As a research participant, you have the right to:

1. Have the purpose of the study, and the expected risks and benefits fully explained to you before you choose to participate.
2. Withdraw from participation at any time without penalty.
3. Refuse to answer a particular question without penalty.
4. Be informed of the results of the study.

I have read the above, received a copy of this form, and I agree to participate in the above-named study.



## **Appendix C**

### **One-on-One Interview Format**

#### **One-on-One Interview Format**

Prior to the start of the interview, the principal investigator will communicate to the participants:

“The purpose of this research study is to identify in what ways the academic nurse leader supports the novice nurse educator to promote their successful growth and transition to their academic role. The interview will be recorded, however if you are uncomfortable with recording the interview, please let me know and the interview will not be recorded, and notes will be taken. This is a voluntary process and you do not have to answer any questions you do not want to. Participation is anonymous, and your name will never appear in any documentation linking you to this study. Also, if at any time you would like to stop the interview please tell me and I will stop the interview.”

Below is a proposed sample list of questions for semi-structured interviews. During the interview the researcher may ask additional questions for clarification purposes. The interview questioning should begin with introductory questions, followed by opening questions, main questions, probes, and finally the closing questions (Polit & Beck, 2017).

#### **Introduction Questions for the novice nurse educator:**

1. Can you tell me something outside of work that you enjoy doing?
  - How often do you get to \_\_\_\_\_?
  - Where do you \_\_\_\_\_?

#### **Opening Questions:**

1. I would like to start by hearing more about your novice educator role?
  - How long have you been in the novice nurse educator role \_\_\_\_\_?
2. What is the most important thing you want me to know about what you do as a novice nurse educator?
  - Can you tell me more about \_\_\_\_\_?

**Main Questions and Probes:**

1. Can you talk about your novice nurse educator position in the college of nursing as it relates to the onboarding or hiring process?
2. Tell me what you perceive is the academic nurse leader's role in helping you to transition as a new faculty?
  - Can you speak to any specific supports by the academic nurse leader as you transitioned to the new faculty role?
3. What academic coursework did you take in your master's degree that has helped you in your new faculty role?
  - What made you choose to take the coursework?
4. What are the most difficult parts of your job?

**Closing Question:**

1. Is there anything else you want to tell me about or any other points you would like me to know about how the academic nurse leader helped you to transition to your role?

## Appendix D

### Letter to Participants

Greetings,

My name is Marianne Markowitz and I am a doctoral student at St. John Fisher College in Rochester, New York conducting a qualitative research study to complete my dissertation. My study, *The Academic Nurse Leader's Role in Supporting Novice Nurse Educator Transition: A Grounded Theory Study*, is intended to specifically gain insight into the real-life experiences of novice nurse educators through garnering descriptions of their transition process as well as recounting the interactions with their academic nurse leader. I invite you to participate in this study. I would like to conduct the study with novice nurse faculty who have been in their role for less than five years. Face-to-face, Skype or FaceTime interviews with audio recording will be used and conducted off site from your college setting at a mutually agreeable time. The interview should last approximately one hour, and a \$5.00 electronic gift card will be provided to participants as a thank you for taking the time to participate in this important research. Additionally, a redacted copy of Chapter 4 (the research questions, data analysis and findings, and a summary of the results) will be given to participants. All information will remain confidential and there will be no identifying variables, as data obtained will be assigned random codes using either numbers or pseudonyms. All data will be stored on a lap top computer with an external hard drive that is password protected and will be disposed of in three years following the completion of the dissertation. Institutional Review Board approval has been obtained through St. John Fisher College.

If you are a current novice nurse educator and would be interested in participating, please email me your contact information so I may schedule a time to connect with you. If you are not interested, could you please pass this email to someone you know who might meet the criteria. If you have questions about participating, please feel free to contact me. Thank you for considering participation in this study and I look forward to hearing from you.

Best Regards,

Marianne Markowitz, MS, RN, CNE

[mm01670@sjfc.edu](mailto:mm01670@sjfc.edu) or [marsm0928@aol.com](mailto:marsm0928@aol.com), (315)-256-7120

# Appendix E

## Geographic Map of New York State

