EXPLORATION OF ONBOARDING FOR THE DIRECTOR OF NURSING PROGRAM POSITION
AT ILLINOIS COMMUNITY COLLEGES

by

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ABSTRACT

This study explores the onboarding practices for the director of nursing program position at Illinois community colleges, which have become hubs for educating and training health care professionals in Illinois and throughout the nation. Previous research has confirmed that onboarding is a proven and effective means of introducing new employees to their roles and improves retention. It is important to ensure that those hired as directors of nursing, not only are the most qualified candidates, but fully understand the scope and responsibilities of this unique position as they assume the role. Onboarding is an important step in this process. Directors of nursing provide overall direction, management, and compliance efforts for these programs. It is concerning that director of nursing program vacancies are increasing, as the nursing shortage experienced throughout the country affects all areas of nursing. These vacancies are due to retirements, as well as turnover from the lack of role clarity resulting in job dissatisfaction.

Results of this study indicate that formal onboarding programs are not available for newly hired directors of nursing. Illinois is fortunate to have a group that informally supports these individuals. It was common for the new directors of nursing programs who participated in this study to engage in informal mentoring; this was done by administrators at higher levels in the organization. Yet, these mentors did not fully understand the complexity of the role. Much of this understanding occurred gradually and, in some cases, incidentally rather than intentionally.
Thus, a formal structured onboarding program that includes formal mentoring, must be developed for new directors of nursing programs. Feldman’s seminal research on organizational socialization provides a sound and well-regarded framework for a formal, intentional, and systematic onboarding program. Finally, the research indicated that succession planning is needed to ensure a cadre of qualified individuals is available to take on these critical roles.

Many terms are used to identify the director of nursing program position: academic chair, coordinator, program leader, program administrator, assistant dean, dean of nursing, and director of nursing. This paper uses the term director of nursing programs, which encompasses the other titles.

KEY WORDS: Nursing programs, onboarding, nursing program leadership
DEDICATION

I dedicate this dissertation to my parents for setting the example that curiosity and questioning develops a person.

To my nursing colleagues who provided compassion and encouragement when I needed it most, and to my husband and son who have endured years of supporting me as I pursued my dream.
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Finally, to my husband and son, who had an absentee wife and mother when deadlines were approaching.

They say it takes a village to raise a child, and I know it takes a community to encourage others and provide hope.
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INTRODUCTION

This study explores the onboarding practices for the director of nursing program position at Illinois community colleges. This applies to both directors considered full-time administrators as well as those serving as nursing faculty who are charged with oversight of the nursing program. The onboarding process focuses on how newly hired directors of nursing are acclimated to their positions, as well as to the community college and their departments.

BACKGROUND AND CONTEXT OF THE ISSUE

Since their inception, community colleges have become hubs for educating and training health care professionals throughout the nation, as well as in Illinois. Nursing is one of the oldest and most common health care programs offered by community colleges. It is also one of the most expensive programs offered by community colleges due to limited class sizes required by accrediting bodies, specialized equipment needed for instruction, and organizing and monitoring required clinical experiences for students.

Directors of nursing provide overall direction, management, and compliance efforts for these programs. The director of nursing may also be referred to as the nursing administrator, dean, assistant dean, or faculty chairperson. “The position lacks consensus on where it falls in higher education institution’s hierarchy, which leads to recruitment and retention concerns”
(Mintz-Binder, 2014, p. 44). Often, the stability of the nursing program relies on the permanency and effectiveness of the director of nursing at the community college.

Organizations are looking to move employees to their peak performance. Effectively welcoming new employees into an organization is a proven performance and retention strategy. This must be done from the day a new job is posted and must continue as a new hire becomes socialized into the organization. In the 1970s, companies would orient new employees via a checklist of items, and the process lasted only one to two days. Today’s onboarding process should be structured to orient and integrate a new employee into an organization’s culture (Vernon, 2012). This process takes approximately 90 days. Yet, nationally, 50% of employees do not stay one year (Sheffield, 2016). The rehiring process is costly and time-consuming and often leads to periods of time when positions are left uncovered or filled with interim or temporary staff. This study seeks to understand how onboarding practices affect the retention of directors of nursing programs at community colleges in Illinois.

**STATEMENT OF THE PROBLEM**

The Bureau of Labor Statistics (2018b) has projected a 15% growth of nursing positions by the year 2026. This is mainly due to an aging workforce with the number of retiring nurses leaving the profession at a greater rate than can be replaced. It has been reported that 37% of new nurses think of leaving the profession after one year due to job dissatisfaction. It is imperative for organizations to identify ways to improve job satisfaction: “Employee turnover can cost an employer up to 150% of that person’s salary” (Vernon, 2012, p. 32).

Interestingly, director of nursing program vacancies are also increasing, as the nursing shortage affects all areas of nursing. State-approved and accredited programs must identify a
new director of nursing when the position is vacated. This short time frame prompts programs to appoint an interim director as a search is undertaken to fill the position. It can take an additional 2 to 5 months or longer to replace a program director (Mintz-Binder, 2014). The purpose of this study is to identify onboarding procedures for director of nursing programs and to determine if they are effective in increasing retention.

There are many different ways to onboard employees, as well as different understandings as to what is involved in onboarding. Experts in the field describe onboarding as “the process of acquiring, accommodating, assimilating and accelerating new team members into the organizational culture” (Bradt & Vonnegut, 2016, p. 1). To ensure employee satisfaction, it is important to get the employee off to a good start. Industry Insights (“The 5 C’s of New Hire Onboarding,” 2014) explains that there are five C’s that support sound onboarding practice: compliance of policies and procedures, clarification of roles, culture familiarization, connection to a mentor, and checking back with the new employee at regular intervals. It is important to learn if community colleges are using sound onboarding practices for directors of nursing programs.

The role of the director of nursing programs is specified by both the Illinois Nurse Practice Act, as well as the nursing program accrediting body. Illinois community college nursing programs are approved by the Illinois Board of Nursing under the rules in the Nurse Practice Act. It is the Nurse Practice Act that outlines the educational requirements of the director of nursing programs as well as the role of the director regarding the administration of the approved nursing program.

The Accreditation Commission for Education in Nursing defines the nurse administrator as the nurse with responsibility and authority for administrative and instructional
activities of a nursing education unit and nursing program(s) within the governing organization (e.g., dean, chairperson, director, etc.). The ACEN does not consider the nurse administrator a faculty member, regardless of the teaching responsibilities or classification by the governing organization. (ACEN, 2018, p. 8)

Since the role of the director is so important to the nursing program, it is important to onboard the director so that the role is continually and effectively filled. The Board of Nursing (BON) and accrediting bodies want the director of nursing in place at all times to ensure compliance and quality of the program. If a director of nursing leaves the position, the nursing program must identify an interim director until one can be hired. This reinforces the need to ensure that directors of nursing programs are retained, and effective onboarding practices are one way to ensure longer tenure in the position.

PURPOSE OF THE RESEARCH

The purpose of this study is to explore onboarding practices for incoming directors of nursing educational programs at community colleges in Illinois. Previous research has confirmed that onboarding is a proven and effective means of introducing new employees to their roles and it improves retention. It is of utmost importance to ensure that those hired as directors of nursing programs not only are the most qualified candidates but fully understand the scope and responsibilities of this unique position as they assume the role. Onboarding is an important step in this process.

RESEARCH QUESTIONS

The guiding questions of this study are:

1. What type of onboarding programs and experiences are commonly used when new directors of nursing enter the institution?
2. How is the onboarding process implemented?

3. How and in what ways is the onboarding program evaluated for effectiveness?

REVIEW OF THE LITERATURE

The literature review for this research provides a contextual lens of complementary research, theories, and practices that assist in situating the study and analyzing the findings. The purpose of this study is to explore onboarding practices for incoming directors of nursing educational programs at community colleges in Illinois.

An eclectic collection of theories and related research was reviewed to provide further perspective for this study. Because this research is situated within community colleges, a historical review of these higher education institutions will be discussed. The concept of organizational socialization and its relationship to onboarding provides the primary framework related to how new employees are oriented to a position or organization. The three stages associated with organizational socialization provide the basis for determining which stages were used when new directors of nursing were hired at community colleges. Organizational structure is reviewed next. Structure defines where the director of nursing position reports within the community college and whether this is an important attribute as to how they are on-boarded. Finally, mentoring and its connection to succession planning are reviewed to determine if mentoring relationships are critical to the success of new directors of nursing programs and if mentoring leads to more effective succession planning that ensures these positions are filled promptly, as is stipulated within their accreditation standards.
History of Community Colleges

Community colleges are known for their access and equality for educating the public. It is through the community college that people can pursue their educational dreams. In the 1960s, community colleges flourished as a result of the number of post-World War II era baby boomers. Veterans returning from the war were able to use the GI Bill to obtain education. The community college has met the needs of the community by offering vocational, transfer degrees and certificates as well as remedial education. Through open access, the community college is the welcoming agency to many nontraditional learners today (Rao, 2004). Community colleges are also known for educating a diverse workforce and providing needed talent to the local community.

Directly related to this study, community colleges serve a critical need within the health care industry and specifically within nursing education. According to the American Association of Community Colleges (AACC, 2011), approximately 60% of registered nurses and licensed practical nurses are educated at community colleges (p. 2). It is within this context that the importance of the director of nursing position is situated. This position oversees the nursing program and ensures that it complies with all required accreditation standards.

Organizational Socialization and Onboarding

The conceptual theory that provides the primary structure for this study is organizational socialization. This conceptual theory provides a framework as to how employees are most effectively oriented and onboarded to a new position. Schein completed the seminal research on this theory in the 1960s (Schein, 1958; Van Maanen & Schein, n.d.). Feldman then
elaborated on this theory in 1976 as he identified three stages of the introductory period
employees experience, which include anticipatory, encounter and change, and acquisition.

It is important to determine if new directors of nursing programs experience these three
stages as they begin in their roles. If not, job satisfaction could suffer, confusion and frustration
could occur, and the result could be attrition, which could put nursing programs in jeopardy as
the role of the direct of nursing is germane to these programs.

Organizational Structure

According to Minterzberg (1972), “Organizational structure is the framework of the
relations on jobs, systems, operating process, people, and groups in their efforts to achieve the
goals” (as quoted in Ahmady, Mehrpour, and Nikooravesh, p. 456). In addition, organizational
structure is a set of methods that divides tasks to determine who performs what duties and
who coordinates those duties and provides a reporting mechanism through the structure
(Ahmady et al., 2016). This study identifies where the director of nursing programs is located on
the community college’s organizational structure and whether that reporting structure
determines how and, perhaps more importantly, who is responsible for onboarding a new
director of nursing programs.

Mentoring and Succession Planning

Mentoring is a role that supports a person’s growth and development over a period of
time; a mentor imparts knowledge and wisdom to the mentee to assist with the personal
growth of the person (Reh, 2018). According to Merriam-Webster on-line dictionary, a mentor
is “a trusted counselor or guide” (Mentor, 2018, n.p.). Often, mentors provide sage advice to
their mentees. This type of insight is of particular importance to an employee undertaking a new role. Mentors often provide information that may not be available in a manual or job description. Mentoring can occur via a formalized process, in which a new employee is assigned to a mentor who is expected to serve as this trusted counselor. Mentoring can also occur organically, when a seasoned employee, without being assigned or expected to, serves in that role. Mentoring is a well-researched topic, and if or how it is deployed as a means of welcoming a new director of nursing is of interest in this study.

Mentoring and succession planning are related. Succession planning is preselecting or identifying individuals to assume leadership roles (Gray, 2014; Griffith, 2012; Vogelsang, 2014). Specifically, the process of succession planning is to identify, recruit, develop, and coach potential leaders (Gray, 2014; Vogelsang, 2014). Like mentoring, this process can be either formal or informal. Interestingly, leadership training is considered a formal process, while mentorship and succession planning are often more informal processes (Vogelsang, 2014). Yet, mentorship and succession planning are considered critical in building an effective organization.

Both mentoring and succession planning are needed to ensure a pipeline of effective directors of nursing programs due to a variety of factors, which include the lack of qualified educators, an aging workforce, and a daunting workload (Vogelsang, 2014). Yet, if these processes occur organically and are not formally adopted and systematized within an organization, mentoring and success planning may be not occurring. This may leave a community college without a viable plan to mentor a new director of nursing programs and to ultimately replace that individual if there is turnover in the position.
**METHODOLOGY**

This overview of the research methodology highlights the design of the study and why it is applicable to the purpose of this research, which is to identify how new directors of nursing programs are onboarded to their roles in Illinois community colleges. The study seeks to understand best practices that contribute to role acclimation via onboarding processes. This section provides insights as to (a) the qualitative inquiry and case study methodology, (b) data collection methods, (c) sampling and participant selection criteria, and (d) techniques that were used to analyze the data.

Research Design

This qualitative research study used a case study method, which allowed the researcher to serve as the primary instrument of data collection and analysis and to use an inductive investigative strategy (Merriam & Tisdell, 2016). The interpretive paradigm also speaks to how the research is understood or received by the reader. Merriam and Tisdell (2016) explained that the intent of qualitative research is to seek patterns or generalizations that help to explain a phenomenon. These patterns and themes arising from the findings are thus individually and uniquely interpreted by the reader.

A case study is an investigative method of exploring a bounded phenomenon by examining in depth, and in a holistic manner, one or more particular instances of the phenomenon (Merriam & Tisdell, 2016). The purpose of this model is to identify the onboarding phenomenon of directors of nursing programs, which can address a gap in research. Case studies are particularly useful for learning more about little-known situations or phenomena (Yin, 2003). Merriam and Tisdell (2016) believe the delimiting or bounded nature of case study
research creates the case. Thus, a bounded case study requires that a framework of the situation or system is well-defined and outlined. Johnson and Christensen (2004) clearly stated that “you must determine what the case is and what it is not” (p. 406). Creswell (2007) simply claimed that case studies are bounded because the researcher is choosing what is to be studied. Thus, case study methodology was used in this study to describe onboarding experiences available for newly hired directors of nursing programs or chairpersons in Illinois community colleges. The data identify the current onboarding process and what the participants felt was most helpful in acclimating them to this role.

A qualitative case study involves the researcher utilizing interviews, surveys, documents, and observation in order to ascertain what types of onboarding processes are available to newly hired directors of nursing programs in Illinois community colleges. In addition, the role of the research is germane in qualitative studies, as the researcher serves as an instrument in the study in both gathering and interpreting the data.

Data Collection

Data collected for this study included a survey, interviews, field notes, and mining of documents that complement the purpose of the study, which is to explore onboarding practices for incoming directors of nursing educational programs at community colleges in Illinois. Interviews are the most common form of data collection in qualitative studies (Merriam & Tisdell, 2016). Merriam and Tisdell (2016) elaborated further that interviews may be “the only source of data” (p. 106) for qualitative researchers. The survey was important in determining whether the participants met the qualifications for the study. The interviews were the primary method of data collection.
Purposeful sampling is used in qualitative research to gather a rich understanding of study (Creswell, 1998). This case study adhered to a criterion-based sampling of directors of nursing in community colleges who are new to their positions, defined as being in their positions for three years or less. Merriam and Tisdell (2016) explained that criterion-based selection guides the gathering of information and data when using the case study.

Data mining of relevant documents was used to review where the director of nursing reported within the organizational structure, what the job description identified as key responsibilities, and what type of orientation or onboarding was conducted. Lastly, field notes were written to describe the researcher’s feelings and insights during the interviews, the setting, and other observations, such as behaviors and nuances (Merriam & Tisdell, 2016.) These details provided the researcher with details that could be used later to visualize and memorialize the interview. This aids in recall and assists in providing rich details that can be used during the analysis process. As is common in qualitative research, surveys, interviews, field notes, and document collection are used to give meaning, understanding, and insights that pertain to the research (Merriam & Tisdell, 2016).

Sampling, Site Selection, and Participants

A survey was sent via email to the deans and directors of Illinois community colleges group. This published list is widely available to health care educators in Illinois community colleges. The online survey asked the respondents to indicate how long they have served in their positions as directors of nursing programs. The first respondents who met the criteria of being (a) a director of a nursing program in an Illinois community college, and (b) in their position for three years or less were asked to participate in a face-to-face interview.
Semistructured interviews were conducted with the qualified participants of the study. The semistructured format allowed for follow-up questions to gain a deeper understanding of the participants’ responses. In addition to semistructured interviews, field notes were taken immediately after the interviews concluded. It was important to accomplish this upon completion of the interview to ensure adequate recall of behaviors, feelings, and the setting.

Documents pertinent to the study were also collected. These documents included job descriptions, organizational charts, and onboarding documents. These documents aided in the triangulation of data.

Data Analysis

In qualitative research, data collection and data analysis occur simultaneously (Merriam & Tisdell, 2016). Data analysis is ongoing in qualitative research, as it begins during data collection and continues until saturation occurs (Merriam & Tisdell, 2016). The ultimate goal is to make sense out of the data that are collected. In this case study, data analysis was accomplished via data managing, coding and theming, establishing patterns, and interpreting and organizing the data collected. The interviews were recorded and then transcribed.

Theming the data by identifying key words, concepts, or phrases and storing data in a safe and workable manner are important as data analysis begins. Theming and coding are used so that the researcher can identify patterns in the data, which supports the overall analysis of the data collected. Merriam and Tisdell (2016) stated, “Analysis becomes more intensive as the study progresses and once all the data are in” (p. 195). The ultimate goal of organizing and interpreting the data is to make sense of what is being studied to be certain that the findings
have meaning and are understood by others. Clear and well-articulated results, supported by
evidence, ensure that the study was credible, trustworthy, and useful.

The results of this study provide insight into onboarding practices for newly hired
directors of educational nursing programs at community colleges in Illinois. The results can be
applied to community colleges nationwide and to any other position that is germane to a
community college or other institution that seeks to effectively onboard new employees in an
effort to increase their effectiveness on the job and mitigate turnover.

Limitations of the Study

Limitations can compromise or weaken a case study, yet in the spirit of transparency
and authenticity it is important to acknowledge that they may occur and, perhaps more
importantly, to mitigate the possibility that they can occur. Case studies are bounded by time
and place, which causes limitations that can weaken the study or skew data (Creswell, 1998). A
researcher must be aware of this possibility and understand what the limitations may be. In this
study, limitations include but are not limited to the following:

1. **Researcher bias.** The researcher in this study is a director of nursing at a large
   suburban community college in Illinois. As such, the possibility of researcher bias is
   acknowledged. Steps were taken to mitigate bias, which included triangulation of
data and a clear, transparent research design. The scope of the case study was small,
with only three participants, so the study is limited to the findings from these
subjects.

2. **Limited recollection by respondents.** The study focused on the recollection of study
   participants in their onboarding experiences. This limitation is acknowledged and
   was addressed by limiting the pool of participants to those who served in the
director of nursing position for three years or less.

3. **Small case study.** The study focused on the experiences of three directors of nursing
   at Illinois community colleges of varying sizes, as defined by student FTE. Although
   this limitation is acknowledged, understanding their onboarding experiences, what
was helpful and what was lacking, will provide insights for similar situations. The ultimate goal is to identify onboarding experiences that mitigated turnover and enhanced job satisfaction.

CHAPTER SUMMARY

The case study methodology used in this study casts a wide lens on a complex phenomenon that focused on how newly hired directors of nursing education programs at community colleges in Illinois were oriented or onboarded to their positions and to the organization. Semistructured interviews provided the opportunity for study participants to describe their experiences and reflect on the effectiveness of the onboarding process. In addition to semistructured interviews, fieldwork included reviewing documents and developing field notes. The resulting data were coded and analyzed in an effort to discern patterns and themes. The objective of this study is to present compelling conclusions that can be used to help community colleges better understand how to effectively onboard newly appointed directors of nursing.

ORGANIZATION OF THE DISSERTATION

Chapter 1 provides a brief review of the issue, highlights the purpose of the research, and lists the driving questions of the study. Brief overviews of the study design and related literature are also included. The significance of the study is in the findings, which will provide insights on how best to onboard newly hired directors of nursing programs at Illinois community colleges. These findings can be useful in other contexts, such as with other positions or at other institutions.

A review of the literature is presented in Chapter 2. The historical context of the study focuses on the purpose of community colleges and specifically their value in educating today’s
nurses. The unique responsibilities of this position are also reviewed in terms of ensuring required accreditation status. In addition, the three stages of organizational socialization are discussed as the primary framework that defines effective onboarding practices. The concepts of organizational structure, mentoring, and succession planning provide further context as to where the director of nursing program position lies within the fabric of the community college and how mentoring and succession planning provide a means of organically orienting the new director and ensuring a viable talent pipeline for the future.

Chapter 3 provides a detailed description of the research methodology, which is a qualitative case study grounded in the interpretative paradigm. Details of the design are described, including case selection, data collection pilot, and informed consent of the participants. A detailed description of the researcher as an instrument provides a clear view of this important facet to qualitative research. The chapter also discusses the importance of trustworthiness, reliability, validity, and rigor.

The data collection process is discussed in Chapter 4. This includes a summary of the data gathered in the study. Several data sources are used, which include semistructured interviews, documents, and field notes. Data are summarized via tables and charts, which allowed key themes to emerge. The chapter includes a discussion of how data analysis is accomplished using the themes gathered from the theories and concepts reviewed in the literature. These include the three phases of organizational socialization as an effective onboarding framework, organizational structure that depicts where the director of nursing position is situated and who is responsible for onboarding that individual, and
mentoring/succession planning that ensures a smooth transition for the new director of nursing and a viable talent pipeline as director of nursing positions become available.

Chapter 5 includes the presentation and analysis of the data. Rich, thick data gathered from multiple sources are presented and analyzed. The analysis of the perspectives and information provided by the study participants is the basis of the research findings, conclusions, and implications for future study.
CHAPTER 2: LITERATURE REVIEW

INTRODUCTION

This purpose of this study is to explore the onboarding practices for the director of nursing program position at Illinois community colleges. The review of literature was conducted using CINAHL and other library databases. Theories, terms, and concepts searched include onboarding, mentoring, coaching, nursing shortage, administrator of nursing programs, transition into practice, and retention.

The review process identified a gap in the literature to support the onboarding of directors of nursing, and specifically how that onboarding was conducted and if it was effective. This leaves a gap in knowledge and practice as to how to assist these employees in assimilating into their roles within the community college environment.

Because this research is situated within community colleges, a historical review of these higher education institutions will be discussed, along with their role in educating nurses. The concept of organizational socialization and its relationship to onboarding provides the primary framework related to how new employees are oriented to a position or organization. The three stages associated with organizational socialization provide the basis for determining which stages were used when new directors of nursing programs were hired at community colleges. Organizational structure is reviewed next. Structure defines where the director of nursing position reports within the community college and, perhaps more importantly, who is
responsible for onboarding that individual. Finally, mentoring and its connection to succession planning are reviewed to determine if mentoring relationships are critical to the success of new directors of nursing programs and if mentoring leads to more effective succession planning that ensures these positions are filled promptly, as is stipulated within their accreditation standards.

COMMUNITY COLLEGES AND NURSING EDUCATION

Community colleges were designed to provide quality education at an affordable cost. These colleges are an important option in postsecondary education. They grew quickly due to their proximity and accessibility within their local communities. Through their mission statements, community colleges are considered open door institutions, which welcome even the poorly prepared student to obtain the “American Dream” of education to increase their ability to earn a sustainable income (Cohen & Brawer, 2008; Prusser & Levin, 2009). The goals of community colleges are multifaceted. They include providing remedial education for underprepared students, assisting students in obtaining high school equivalency designations, offering certificates and degrees for employability, providing course credits that transfer to a four-year university, or offering classes for personal enrichment (Haachlander, Sikora, Horn, & Carroll, 2003).

It is through the community college that people can pursue their educational dreams. In the 1960s, community colleges flourished as a result of the number of post-World War II era baby boomers. Veterans returning from the war were able to use the GI Bill to obtain higher education. Tinto (2014) stated that it is through support and not opportunity that the education system can be redefined. Interestingly, community colleges are known for providing added
support services that help ensure student success and completion (Katsinas et al., 2015; Rao, 2004).

Community colleges are known for educating a diverse workforce. Many of these students are the first in their families to attend postsecondary institutions. As such, the added support provided by community colleges guides these students through their programs of study so they can complete a degree, attend a four-year institution, or enter the workforce to begin a viable career.

For many students, realizing the American Dream is accomplished by obtaining credentials that lead to employment. Career and technical education that provides that opportunity is a key component to the community college mission (Cohen & Brawer, 2008). Nursing programs at community colleges provide students the opportunity to earn not only a credential with labor market value, but one that leads to a promising career.

A study by the U.S. Bureau of Labor Statistics (2018a) demonstrated the earnings and unemployment rates related to educational levels. Figure 1 summarizes this study. In essence, the higher the degree attainment, the higher the earnings and, conversely, the lower the unemployment rate.
However, the field of nursing is unique in that there are many ways to enter the profession. New nurses take the same licensing exam whether they have obtained education through a post-high school diploma, associate degree, baccalaureate degree, or master-level program. Nurses are employed and subsequently compensated after passing licensure exams through the state board of nursing. Therefore, initially nurses are compensated at the same level after graduation.

According to the American Association of Community Colleges (AACC, 2011), approximately 60% of registered nurses and licensed practical nurses are educated at community colleges (p. 2). Mintz-Binder (2014) confirmed that associate degree in nursing programs provide 60% of the nursing workforce. Interestingly, in a 2013 Health Resources and Services Administration (HRSA) study on nursing trends, 55% of registered nurses (RNs) had a
baccalaureate degree, but many of these nurses obtained their first nursing degree in a community college via the Associate of Science in Nursing (ASN) degree.

The American Nurses Association (ANA), even in times of acute nursing shortages, has maintained the stance that nurses working in hospitals should have a Bachelor of Science in Nursing (BSN) degree. This stance, written in the Brown Report in 1948, suggested that nurses should be educated in colleges and universities rather than through diploma programs administered by hospitals (Haase, 1990). This stance of having nurses educated in universities is still echoed today (Smith, 2017). With World War II in full force and the realization that the nation faced a nursing shortage, five nursing organizations came together and formed the Nursing Council on National Defense to represent the nursing industry. In 1965, when the Vietnam War was raging, the National League of Nursing (NLN) took an alternative stance supporting community college-based programs. The W. K. Kellogg Foundation provided financial support from 1965 to 1968 to prepare nurses to become faculty and teach in community colleges. By 1985, the debate continued and the NLN supported the ANA statement to have the BSN as the entry-level qualification for professional nursing. Due to economics related to the cost of a BSN, the BSN qualification for entry into the nursing profession has not gained sufficient traction because of the economics related to the cost of earning a BSN as compared to an ASN (Haase, 1990). Thus, community colleges educate more basic entry-level nursing students than do four-year colleges. Also, community colleges serve many nontraditional students in obtaining nursing education. Thus, educating nurses through the community colleges has increased diversity in the nursing profession. Figure 2 represents the
NLN’s biannual survey of 2014 depicting the percentage of minority students enrolled in basic RN programs by race and ethnicity (NLN, 2014).

Figure 2. Minority Student Enrollment in Nursing Programs.

In 2010, a joint statement supporting academic progression was issued by five leading organizations: the American Association of Community Colleges (AACC), Association of Community College Trustees (ACCT), American Association of Colleges of Nursing (AACN), National League of Nursing (NLN) and National Organization for Associate Degree in Nursing
Academic progression is defined as providing nurses with the next educational opportunity. There are many examples of academic progression, such as a registered nurse progressing from an Associate’s Degree in Nursing (ADN) to a Bachelor of Science in Nursing (BSN), or a BSN continuing on to a Master of Science in Nursing (MSN). The goal of the joint statement was “to educate a diverse nursing workforce to advance the nation’s health” (AACN, 2018, para. 2). This supported the ANA statement and Institute of Medicine (IOM) report to increase the number of bachelor-prepared nurses at the hospital bedside (OADN, 2012). The purpose of this statement was to support the intent that nurses should ultimately obtain a BSN, but academic progression allowed associate degree programs in nursing to continue to educate new registered nurses, thus preparing them to tackle current health care society needs. The Institute of Medicine (2010) report stated that nurses should work in their highest capacity, while recommending that 80% of bedside registered nurses should have their BSN by 2020.

NURSING SHORTAGE

Nursing shortages are impacting the profession, as well as the education of future nurses. The Bureau of Labor Statistics (2018b) has projected a 15% growth of nursing positions by the year 2026. This is mainly due to an aging workforce, with the number of retiring nurses leaving the profession at a greater rate than can be replaced. A nursing degree is required to teach in higher education nursing programs. Thus, the nursing shortage is impacting the supply of nursing faculty. Currently, there is a national shortage of nursing faculty, who are averaging 62.5 years of age (AACN, 2017).
According to AACN's report on 2015-2016 Salaries of Instructional and Administrative Nursing Faculty, the average ages of doctorally prepared nurse faculty holding the ranks of professor, associate professor, and assistant professor were 62.2, 57.6, and 51.1 years, respectively. For master’s degree-prepared nurse faculty, the average ages for professors, associate professors, and assistant professors were 57.8, 56.6, and 50.9 years, respectively. (AACN, 2017)

Likewise, according to the National League of Nursing (2015), most full-time nurse educators fall into the age group of 46 and older (Figure 3). This increase in age will lead to a wave of retirements. The concern is who will lead nursing programs with the aging of nurse educators and administrators (NLN, 2015).

![Age of Full-Time Nurse Educators by Rank, 2015](image)

*Faculty Census Survey 2015*

*(National League of Nursing, 2015)*

*Figure 3. Age of Full-Time Nurse Educators by Rank.*
Nursing faculty are frequently tapped for the director of nursing program position. Therefore, it is becoming increasingly difficult to recruit directors of nursing, and it is important to investigate how these trends can be improved (Mintz-Binder & Fitzpatrick, 2009).

It has been reported that 37% of new nurses think of leaving the profession after one year due to job dissatisfaction, which is exacerbating the problem. It is imperative for organizations to identify ways to improve job satisfaction. “Employee turnover can cost an employer up to 150% of that person’s salary” (Vernon, 2012, p. 32). Director of nursing program vacancies are increasing as the nursing shortage affects all areas of nursing. State-approved and accredited programs have a limited time to identify a new director when the position is vacated. This short time frame prompts programs to appoint an interim director as a search is undertaken to fill the position. It can take an additional 2 to 5 months or longer to replace a program director (Mintz-Binder, 2014). Mintz-Binder (2014) surveyed 242 academic administrators in associate degree-granting programs. Of the respondents, 68% were in the role less than 5 years and 16% were in the role less than 1 year. This reflects the high turnover rate (Emory, Lee, Miller, Kippenbrock, & Rosen, 2017).

The National League of Nursing survey conducted in 2014-2015 reported that only 7.2% of academic nursing directors were younger than 45 years of age (NLN, 2015). The Robert Wood Johnson Foundation (2007) projected that more than 50% of senior nursing faculty would retire by 2016. There are no data to support how many directors did retire, but the number of directors of nursing 46 years old or greater is 92% of those identified in the role, with 39% over the age of 60. In 2006, nearly 63% of full-time faculty members at the nation’s nursing schools were between the ages of 45 and 60. Another 9% were over age 61. Adams
(2007) identified the staggering disparity between supply and demand for directors of nursing to prepare nurses in the 21st century. Fang and Kesten (2017) supported previous literature that has identified the growing concern of nursing faculty and administrator retirements and their impact on nursing education. If past patterns continue, most of these individuals will retire in their early 60s, leaving nursing education at risk. The pressing questions remain: Who will teach the 340,000 additional nurses needed by 2020? Where will institutions find directors of nursing programs who are qualified for this position?

The director of nursing program position is one of the most important roles in higher education and in nursing education. A critical shortage of these directors is on the rise. The director of nursing programs has a complex role, with responsibilities of “clinical placement legalities, patient care issues, clinical and laboratory budgetary issues, state board and accreditation requirements and a critical faculty shortage” (Glasgow, Weinstock, Bachman, Suplee, & Dreher, 2009, p. 205). This role requires the director of nursing to have knowledge of budgets, politics, policies, accreditation requirements, curriculum, pedagogy, leadership, and management. With societal directives to increase the number of registered nurses, this increases the demand for more nurse educators and directors of nursing programs to lead program expansions. According to Adams (2007), “Today’s nursing program directors must demonstrate skills such as consensus building, risk taking and interactive empowerment” (p. 309). The lack of consensus regarding the director of nursing programs has added confusion regarding this role. The titles used for this role can be dean, assistant dean, associate dean, director, or, if the administrator has a shared faculty role, program coordinator, academic chair, or department chair (Mintz-Binder, 2014).
Yet, the Illinois Department of Financial and Professional Regulation (IDFPR) revealed that there is a 33% turnover in directors of associate degree nursing programs annually (raw data from IDFPR). This aligns with the Accreditation Commission for Education in Nursing (ACEN, 2017) constituent report, which stated that nursing administrator turnover was 34.57% for associate degree programs in 2017.

The reasons for this turnover are articulated by Mintz-Binder (2014), who identified that directors of nursing programs struggle with role clarity, role conflicts, insufficient social support, and work family conflicts. Lack of support within the college sets the director of nursing programs up for frustration: “If this position and the college environment are not seen as positive, worthy of respect, and recognized by higher administration, then the longevity of directors will not be achieved, and recruitment will remain problematic” (Mintz-Binder, 2014, p. 48).

Nursing is a deductive reasoning process focused on patient care. Problem solving is at the heart of the deductive reasoning process. According to Taylor (2000) problem solving is the “generation of possible solutions to an issue of concern” (p. 843). The ability to generate questions and devise solutions is difficult when there is insufficient time to reflect and tackle the issues experienced by the nursing program. Christensen (2004) stated that directors or nursing must use the nursing process common in nursing practice, as well as critical thinking when deciding actions and interventions to lead nursing programs. However, research by Adams (2007) indicated that 63% of nursing faculty would not consider moving into an administrative role. Salary and additional education were not recognized as deterrents for pursuing an academic leadership role (Adams, 2007). The two areas that do affect faculty
wanting to pursue administrative responsibilities are workload and conflict leading to role strain. However, factors that do impact a new director of nursing programs are institutional demands like expected work hours, additional meetings, or attendance at evening events.

Support for new directors of nursing programs at the community colleges through onboarding, mentorship, and coaching is essential to keep this role from constant turnover, which leaves the nursing program without a leader when a vacancy occurs. Nursing leaders need to form coalitions to support new members as they assume this complex role. The director of nursing programs is the key person to engage faculty and students; it is this role and the person who takes it on that ensures nursing programs at community colleges are of the highest caliber. Understanding the onboarding process would be beneficial in determining if effective practices would provide a realistic view of the responsibilities and expectations required of this position. This would, in turn, mitigate turnover and increase job satisfaction.

COMMUNITY COLLEGE LEADERSHIP CRISIS

AACC (2016) identified six core competencies for community college leaders, which is a road map to understand the complexity of a role. These six competencies are organizational strategies, resource management, communication, collaboration, community college advocacy, and professionalism. Through the identification of these competencies, the AACC white paper gives a well-rounded picture of the knowledge and skills that leaders in community colleges must have to meet the goals of institutions they serve. Each college leader has an individualized approach to leadership. Key behaviors make leaders who they are. Through the heterogeneous make-up of the nursing program faculty, these different leadership styles support the program though collaboration, which keeps the nursing program viable to meet the community needs.
Areas identified by Glasgow et al. (2009) support what is needed to develop nursing program leadership. These areas are clear communication with transparency, providing recognition for encouragement, and support of accomplishments. They also include encouraging joint decision making, maintaining confidentiality, and being fair and humble (Glasgow et al., 2009). The director of nursing programs needs to identify and provide internal faculty with leadership skills to assist them in becoming the next directors of the nursing program. It does not matter the type of leadership style, but one type may be more promising in facilitating upward movement in an organization. Kouzes and Posner (2010) identified these key positive characteristics of a leader. Some of the characteristics or behaviors are being trustworthy, ethical, honest, credible, and inspiring, and having a vision (Hickman, 2016).

Adams (2007) and other researchers (Brusich, 1990; Buckwalter, 2001; Rider, 1989) recognized that, for many nurses, moving into an academic leadership role was an unplanned career move and therefore leadership preparation was lacking. Most of directors of nursing programs learned the role through informal discussions with other deans or administrators as well as on-the-job training (Nardi, 1996; Nix, 1989; Rider, 1989, all as cited in Adams, 2007).

Having progressive leadership experience as a director of nursing programs could spark the interest to pursue other academic leadership roles. Administrative roles like being part of the faculty, participating in governance roles, or being a department chair or associate dean can provide invaluable experiences for dealing with real-world issues related to students, personnel, curriculum, accreditation, and clinical teaching. These areas of progressive leadership help build the foundation for instilling confidence and understanding how to conduct business (Mundt, 2017). Directors of nursing programs must have a vision that reflects
their beliefs. A new nursing academic leader must carefully design a path that balances experiences with mentors and coaches (Mundt, 2017). The director of nursing programs must have a vision that affirms the college’s mission statement and strategic plan.

Mundt (2017) provided personal lessons learned from experience as a dean. This sage advice includes the following:

1. Decide what type of leader you will be.
2. Avoid acting in crisis mode; manage time on appropriate issues.
4. Do not have an open-door policy so that time can be spent on management issues.
5. Have balanced communication that promotes fairness and transparency.
6. Respect others’ decisions.
7. Be comfortable about creating discomfort.

A director of nursing programs needs to work with faculty and community groups to maintain the program’s reputation. The leader must be able to identify health care trends and changes in student demographics to effectively support the nursing program. The director of nursing programs needs to have a vision and be able to influence others. These directors must have a personal purpose, which offers a compass in times of conflict. Understanding the purpose as a director ensures that students have opportunities to explore the nursing career. An understanding of self and personal strengths and weaknesses provides the opportunity to collaborate with others who have different abilities. Directors must be able to state their values and have humility and gratitude. Humility opens the mind to one’s limitations and need to learn. Showing genuine gratitude recognizes the contributions of others (Christensen, 2004).
This unique position is critical to the success of a nursing program in community colleges. It is a multifaceted position that requires a deep knowledge of nursing practices, as well as accreditation standards and leadership competency. Support for this position begins with effective onboarding so that directors of nursing programs will have an immediate and positive impact on the nursing program, the nursing profession, and the community.

ORGANIZATIONAL SOCIALIZATION AND ONBOARDING

The seminal research on effective employee orientation and onboarding was completed by Feldman in 1976. This research is commonly referred to as organizational socialization. Beginning a new role can be exciting, as well as daunting. The concept of organizational socialization acknowledges that assisting newly hired or promoted individuals to better understand their role and the new organization is critical in ensuring job satisfaction and success. The underlying goal is to provide specifics regarding the role in the organization. In essence, this is a process in which the individual “learns the ropes.” Learning the ropes is the process through which knowledge, skills, attitudes, and behaviors are required to adapt to a new role (Trowler & Knight, 1999; Wanberg, 2012). The individual comes to understand the values, abilities, and expectations of the role and as a member of the organization (Chao, O’Leary-Kelly, Wolf, Klein, & Gardner, 1994). Thus, the purpose of socialization is to assist the new employee in assimilating to a new role within the organization. Trowler and Knight (1999) stated that a person who does not assimilate will fail.

Socialization can be a formal or informal process. Understanding the culture of the organization is essential for assimilation. Four reasons for effective organizational socialization are as follows:
1. Turnover occurs with unsuccessful socialization, which is costly to the organization.

2. Socialization has effects on employees' attitudes and behaviors.

3. Socialization is the way to transmit and maintain the organization's culture.

4. Socialization allows the new employee to learn the social norms and politics of the organization (Korte, 2007).

Organizational culture is an important aspect to organizational socialization.

Organizational culture is defined as “the connective tissue that binds together the organization, including shared values and practices, behavioral norms, and most important, the organization’s orientation towards performance” (McKinsey & Company, 2001, p. 34). It consists of behaviors, attitudes, values, and practices of organizational members (Blanchard, 2007). Building a strong cultural foundation is important, as it is the culture that binds all the working parts of the organization together to bring about successful change. Without a strong culture that supports change, progression forward is difficult. The director of nursing programs needs to understand the organization’s culture to effectively lead the program. This understanding includes accepting expected values and behaviors, engaging faculty with defining goals, creating awareness with results, communicating to provide transparency of decision, and building motivation by providing feedback and praise and acknowledge when things do not go as planned. If the director of nursing programs understands the organization’s culture, it is easier to become comfortable in the role and have role clarity.

There are two processes revealed in literature related to organizational socialization. The first is understanding the stages the new employee passes through to become a leader in the organization. Second, it is important to ascertain what is learned through the socialization
process. These are content areas or dimensions addressed during the socialization process (Feldman, 1976, 1981).

Socialization is a process that assists the newcomer in adjusting to change, which is frequently associated with a new position. This multidimensional process incorporates developing satisfying relationships, understanding the politics of the organization, recognizing the goals and outcomes, and, interestingly, understanding unspoken rules (Wanberg, 2012). These, in turn, are influenced by an individual’s belief system. Schein (1971) recognized that if individual beliefs are aligned with the organization’s beliefs, assimilation to the organizational norms is easier, because there will be less conflict and fewer discrepancies between who the individual currently is and the person he or she will become in the organization.

Lapointe, Bandenbergh, and Boudrias (2014) identified that trust in leaders may have the greatest impact on newcomer adjustment and a psychological bond with the organization. Also, having role clarity allows the individual to mediate between organizational socialization tactics and self-performance. Newcomers gain understanding of their role in the organization through role clarity (job description) and organizational tactics (formalized orientation). Role clarity is also influenced by supervisor support. It is important to have trust with supervisors and coworkers, which leads to organizational commitment. Trust builds positive relationships and contributes to individual and organizational effectiveness. McAllister (1995) identified two forms of trust: cognition-based and affect-based. Cognition-based trust focuses on integrity, competence, honesty, reliability, and dependability. Affect-based trust is a bond between individuals and is relationship-based. This is empathy, affiliation, and rapport of shared regard for others. It is essential that directors of nursing programs acknowledge the importance of
these attributes: “Organizational socialization can impact employee satisfaction, commitment, retention and performance” (Wanberg, 2012, p. 18). How the newcomer adjusts to the new organization and role is part internal motivation and external support from the organization. It is essential for newcomers to become adjusted to their new role and become members of the organization.

The contingency model of organizational socialization is well documented in the literature. It includes three phases of socialization, which are described as anticipatory, before the newcomer joins the organization; encounter, which reflects the first experiences in the organization; and stabilization, change, and acquisition, when the newcomer becomes an insider, fully integrated into the role (Ashcroft & Black, 1996; Ashforth & Saks, 1996; Feldman, 1976; Lee, 2017; Wanberg, 2012).

Several models that were developed to help illustrate the concept of organizational socialization and the steps related to the process appeared in the literature. Three iterations of these are summarized below.

As the seminal research on the topic, Feldman’s (1976) contingency model includes a three-phased process that culminates with promising outcomes, including mutual influence, general satisfaction, internal work motivation, and job involvement. This is illustrated in Figure 4.
A similar model (see Figure 5), developed by Ellis, Bauer, and Erdogan (2015), builds on Feldman’s work by including organizational efforts that are germane to the organizational socialization process. These include tactics, recruitment, orientation, and organizational insiders who assist with mentoring.
More recently, Lee (2017) added to the concept of organizational socialization by explaining key behaviors and outcomes that occur within each of the three stages of the contingency model. Figure 6, developed by Lee in 2017, provides a succinct summary of her depiction.
Regardless of the model used, the three stages of organizational socialization remain constant. Phase one, referred to as the *anticipatory phase*, includes the concepts of developing realism and congruence. Realism reflects the accuracy of what it will be like to work in the organization. Congruence refers to the organization’s resources and the alignment with the individual’s skills and needs (Feldman, 1976).

The second stage of organizational socialization is labeled *encounter or accommodation and role management*. Accommodation is when the individual sees the organization as it is. During this phase, the individual develops role clarity, is a considered full work partner, feels as if he or she is part of the group, and has identified progress in the organization. Role management, related to role clarity, is the ability to resolve conflicts, both in the individual’s life and in the work setting (Feldman, 1976). In this phase, the newcomer learns from interpersonal
sources—supervisors, coworkers, and mentors. The newcomer also builds networks within the area and within the organization and seeks out information from a variety of areas to meet his or her needs (Wanberg, 2012).

The final stage of organizational socialization involves change and acquisition of outcomes. During this stage, the individual feels job satisfaction, mutual influence over how work is carried out, internal motivation, and involvement in the job at an organizational level. Success in socialization is evident when the newcomer has high job performance and a positive attitude, and there is low turnover in the role.

Organizational socialization also includes five proven practices to engage new employees: orientation programs, training programs, socialization tactics, job characteristics, and socialization agents to obtain the identified outcomes (Saks & Gruman, as cited in Wanberg, 2012). Any one, or a combination, of these practices, should help one recognize that the three phases are essential elements to effectively engage new employees.

The conceptual model of socialization assists with identifying practices to achieve the outcomes of job performance, job satisfaction, organizational commitment, turnover, and intentions to remain employed in the organization (Bauer, Bodner, Erdogan, Truxillo, & Tucker, 2007; Wanberg, 2012). It is through relationship building and learning that newcomer socialization is successful. This starts in the anticipatory stage and continues through the change and acquisition stage. Ideally, the supervisor and coworkers provide guidance for the newcomer and ensure that this important process is planned, supported, and completed (Korte, 2007).
ORGANIZATIONAL STRUCTURE

Organizational structure is defined as the framework for jobs, systems, operating process, people, and groups—all focused on achieving common goals (Monavarian, Asgari, & Ashna, 2007, as cited in Ahmady et al., 2016; Sullivan, 2009). Thus, organizational structure is a set of methods dividing the tasks to determine who performs what duties and who coordinates them. This study focuses on the role of the director of nursing programs in community colleges, so it is important to review organizational structure and its importance to this position.

Schein (1971, 1988) identified three dimensions to organizational structure: hierarchy, functional, and inclusion. Hierarchy illustrates the relative ranks within organizational units on a chart that depicts positions and their relationships to superiors, peers, and subordinates. In the case of the director of nursing programs, the organizational chart helps define who this individual reports to. Typically, this individual is responsible for onboarding the new director of nursing. The hierarchy includes peers who can assist with the assimilation process, as well as subordinates who report to the director of nursing. It is important that the new employee understands these relationships.

The functional dimension for a director of nursing programs depicts operational aspects of the role. These can include the types of nursing programs offered, accreditation requirements, clinical experiences, curriculum development, and the like. Often, functional dimensions are included in how departments are titled and within job descriptions.

The inclusion dimension is the most unique of the three. It refers to the proximity (close or far) of each person in organization to its central core. Formally, the inclusion dimension can be seen on an organizational chart in terms of where positions are in relationship to the central
core or purpose of the organization. Informally, the inclusion dimension includes how welcomed the individual feels in the organization, in essence, whether the individual feels valued as an employee.

The proper combination of mentioned dimensions shows formal structure as manifested in an organizational chart. The reality is that there are many organizational forms, and they cannot be easily explained by an organizational chart (Foruhi, 2004, as cited in Ahmady et al., 2016; Chen, 2017; Guranova & Mechtcheriakova, 2015). Thus, it is important for a newly hired director of nursing programs to become acclimated to the formal organizational chart as part of the onboarding process. It is perhaps more important that the director understands the context of the role and its importance to the community college.

**SUCCESION PLANNING AND MENTORING**

Succession planning is a systematic process of identifying the right people to assume leadership roles within an organization (Helms, 2006). The goal of succession planning is to have the right person ready to take on the challenge of the director of nursing programs when the time is right. Minnick, Norman, Donaghey, Fisher, and McKirgan (2010) reported that 62% of schools had no succession plan. This is of particular interest in this study because of the global nursing shortage, which was discussed previously. The shortage is driven by the expanded roles for nurses as well as impending retirements, particularly of baby boomers, or those born between 1946 and 1964. Succession planning is critical to sustaining organizational leadership. The shortage for nursing in academia is both in nursing program administration and having educationally qualified faculty. Thus, a formalized plan must be developed for effective succession planning (Griffith, 2012).
Christensen (2004) stated that transitioning into positions related to academic administration and leadership is frequently stumbled upon rather than planned. This has left those who move into positions as directors of nursing programs unprepared for the role. Sherrod (2006) agreed and recommended that succession planning be an integral part of a nursing program’s strategic plan. It is essential that nursing programs have candid conversations about impending requirements for faculty and administration alike. This would allow time for succession planning and the development of new educators and leaders. It is also essential to identify individuals that demonstrate leadership potential in the planning process. The identified individuals should be given professional development to become knowledgeable of needed requirements and characteristics to provide administrative support for the nursing program.

Gray (2014) provided steps for creating a succession plan, which should be integrated into a nursing program strategic plan:

1. Identify key roles.
2. List job competencies.
3. Assess current faculty who may be ready to assume the role now or with professional development.
4. Identify internal talent first and external talent second.
5. Provide progressive leadership opportunities to develop a strong candidate.

It is not advisable to take a wait-and-see approach. When this approach is taken, nursing programs are at risk of not having a director, which is an accreditation requirement.

One of the most common forms of succession planning occurs via informal mentorship. Mentoring helps new employees socialize into the culture of an organization, adjusting to the
mindset of how things work within an organization. Mentoring not only helps new employees navigate new terrain, but also helps them get up to speed on what is expected of them in the organization’s culture (Bradt, 2012, p. 323). Bally (2007) explained that mentorship is a beneficial relationship that supports the maturation of less experienced individuals.

Mentoring ensures that sage expertise from experienced employees will not be lost once they retire or leave the organization. A mentor can act as a sounding board to answer questions and offer guidance on career options that a new employee might not have considered otherwise. Mentors are also able to provide insight gained through their own experience as leaders, the unwritten rules relating to expectations of leaders, and generally accepted norms, values, and best practices within the community college. Interestingly, as more seasoned employees in an organization mentor new employees, they become aware of the skills and strengths of these individuals. Thus, mentoring can assist an organization in developing formal succession plans.

CHAPTER SUMMARY

The newcomers in today’s organizations can be the leaders of tomorrow. The literature has affirmed that the relationship between the organization and the employee increases job satisfaction and productivity and that this relationship begins with effective onboarding. The purpose of onboarding is to provide prolonged support for the new employee. This prolonged support reduces uncertainty and anxiety, helps provide a sense of the environment, and provides knowledge so the newcomer can become effective in the new role. Best practices in onboarding lead to organizational socialization for a new director of nursing programs. These onboarding practices lead to job clarity, productivity, self-confidence, autonomy, and retention.
Retention is of particular concern for the director of nursing programs position; the research has confirmed that turnover is high. The problem is exacerbated as nursing education reaches a critical crossroad. The well-documented shortage of nurses is of paramount concern and places more focus on the need to educate and train tomorrow’s nurses. The role of the director of nursing programs is key in the educational process and is required by accrediting agencies.

However, onboarding or orientation for directors of nursing programs is not specifically addressed in the literature, leaving a gap in knowledge. This study attempts to bridge that gap by exploring onboarding practices for directors of nursing programs at Illinois community colleges. This knowledge is applicable to community colleges across the nation who are seeking ways to help these individuals assimilate as they begin new and important roles in nursing education.
CHAPTER 3: METHODOLOGY

INTRODUCTION

This purpose of this study is to explore the onboarding practices for the director of nursing program position at Illinois community colleges. This chapter presents the design and criteria guiding the study and highlights why it is applicable to its purpose. The study sought to understand best practices that contribute to role acclimation via onboarding processes. The qualitative paradigm, using a case study methodology, was deemed most appropriate to explore this research purpose. This chapter provides insights as to (a) the qualitative inquiry and case study methodology, (b) data collection methods, (c) sampling and participant selection criteria, and (d) techniques used to analyze the data. In addition, the researcher as an instrument will be reviewed as will the limitations of the study.

RESEARCH DESIGN

This qualitative research study uses a case study method, which allows the researcher to serve as the primary instrument of data collection and analysis and to use an inductive investigative strategy (Merriam & Tisdell, 2016). Qualitative research offers a naturalistic approach as to how newly hired directors of nursing programs at community colleges in Illinois are onboarded. Creswell (2007) explained that there is no manipulation of variables in a naturalistic approach; rather, perceptions are gathered from participants in a holistic manner.
The resulting rich, descriptive data from the study provided insights that are useful to newly hired directors of nursing programs at community colleges.

The interpretive paradigm adheres to the belief that reality is constructed not only by the subjective perceptions of the participants of the study, but also by the researcher as an instrument of the study (Johnson & Christiansen, 2004). In qualitative studies, researchers collect data through interviewing participants, examining documents, and observing behavior. They also interpret what they hear, see, and understand. Creswell (2007) provided clarity to this concept when he stated, “The researcher’s interpretations cannot be separated from their own background, history, context, and prior understanding” (p. 38). Thus, data are mediated through the researcher, who is seen as a human instrument in the study (Denzin & Lincoln, 2005).

The interpretive paradigm also speaks to how the research is understood or received by the reader. Merriam (2009) explained that the intent of qualitative research is to seek patterns or generalizations that help to explain a particular phenomenon. These patterns and themes arising from the findings are thus individually and uniquely interpreted by the reader.

CASE STUDY

A case study is an investigative method of exploring a bounded phenomenon by examining in depth, and in a holistic manner, one or more particular instances of the phenomenon (Merriam, 1998). Case studies are particularly useful for learning more about little-known situations or phenomena. Yin (2003) presented at least four applications for a case study model: (a) to explain complex causal links in real-life phenomena, (b) to describe the real-
life context in which a phenomenon has occurred, (c) to simply describe the phenomenon, and 
(d) to explore those situations in which the phenomenon studied has no clear set of outcomes.

Merriam and Tisdell (2016) believe the delimiting or bounded nature of case study 
research creates the case. Thus, a bounded case study requires that a framework of the 
situation or system is well defined and outlined. Johnson and Christensen (2004) clearly stated 
that “you must determine what the case is and what it is not” (p. 406). Creswell (2014) simply 
claimed that case studies are bounded because the researcher is choosing what is to be 
studied. Thus, case study methodology was used in this study to describe onboarding 
experiences available for newly hired directors of nursing programs in Illinois community 
colleges. The data identified the current onboarding process and what the participants felt was 
most helpful in acclimating them to this role.

According to Yin (1994), “A case study is an empirical inquiry that investigates a 
contemporary phenomenon within its real-life context, especially when the boundaries 
between phenomenon and context are not clearly evident” (p. 13). Case studies are also 
considered within a bounded system, as the number of individuals who could be interviewed is 
limited (Merriam, 1998). A qualitative case study involves the researcher using interviews, 
surveys, documents, and observation to ascertain what types of onboarding processes are 
available to newly hired directors of nursing programs in Illinois community colleges.

This particular case study is intrinsic for the researcher, meaning that there is a genuine 
interest in the case, and the researcher’s intent is to gain a better understanding from the study 
(Stake, 1995). As a nursing director, the researcher has a personal connection to the study. 
Upon entering this role, no onboarding process was used. Yet, it is imperative that systematic
onboarding be used to acclimate and assimilate newly hired directors of nursing, as this role is unique and important in the community college. Placing similar individuals at the core of the research makes the study culturally grounded.

**DATA COLLECTION**

To understand the question being studied, the following methods were used:
(a) demographic survey, (b) semistructured interviews, (c) field notes, and (d) data mining of onboarding documents. Multiple sources of data ensure the rigor and validity of the study.

The researcher used these varied data collection methods to draw rich, thick conclusions. These methods are instrumental in promoting strategies for validity and reliability of the research question (Merriam & Tisdell, 2016).

Westat (2002) identified surveys as a closed-ended, question-and-response tool that allows the researcher to identify specific attributes of participants. In this study, participants were asked through a survey to provide demographic information including gender, highest academic credential, age, ethnicity, current job title, length of time in their position, and the size of their nursing program. The selection criteria centered on two attributes: that they were in the position of director of nursing programs at their community college, and that they had been in that role for less than three years.

The second data collection method was in-person semistructured interviews with three directors of nursing programs who have been in the position for three years or less. The questions asked during the interviews are located in Appendix C. Qualitative research interviews are used to gather facts that elicit emotion. The interviewer uses active listening and probing to develop a rapport and gain in-depth understanding of the interviewee’s perspective.
of the topic being investigated (Merriam & Tisdell, 2016; Rosetto, 2014). The advantage to in-person interviewing is that face-to-face contact with the interviewee allows the interviewer to gather both affective and cognitive responses to the questions (Westat, 2002).

The third data collection technique in this study was field notes. After the interview was completed, the interviewer reflected on observations from the interview process. Some of these observations included where the interview took place, where the interviewer and participant were situated in the room, whether there were any distractions or interruptions during the interview process, and any other reflections on the interview process (Westat, 2002).

The fourth data collection technique was reviewing onboarding documents and other items that were used to acclimate the new director of nursing. Documents used in the onboarding process provided added data, as referred to by the participant. These documents enhanced the understanding of the onboarding process, timeframes, required activities, and other events. Merriam and Tisdell (2016) stated that all types of documents can help the researcher better understand and discover insight into the problem.

Sampling and Site Selection

The researcher must decide, who, what, where, and how to investigate the proposed study based on its purpose and the problem being addressed: “Purposeful sampling is based on the assumption that the investigator wants to discover, understand, and gain insight and therefore must select a sample from which the most can be learned” (Merriam & Tisdell, 2016, p. 96). Purposeful sampling is used because a specific type of participant, a director of nursing
programs, was studied in a specific area, Illinois, at a specific type of learning institution, a community college.

Miles and Huberman (1994) identified sampling strategies that can be evaluated by six attributes:

1. The sampling strategy should be relevant to the conceptual framework and the research questions.
2. The sample should be likely to generate rich information on the type of phenomena which need to be studied.
3. The sample should enhance the “generalizability” of the findings.
4. The sample should produce believable descriptions/explanations.
5. The sample should be strategically ethical.
6. The sample plan should be feasible.

The sampling strategies in this research support these attributes. There are 48 Illinois community colleges, located in 39 community college districts. Two of the districts consist of multi-campus colleges, while 37 are single campuses. Participant selection came from three newly hired directors of nursing at one of the 37 single campuses. Single campus community colleges have similar nursing programs, which offers more consistency in terms of how the programs are structured and managed.

Participants

An online survey was sent to the members of the Illinois Community College Deans and Directors Organization via email. The list of these individuals exists in the public domain. The survey asked how long the director of nursing programs had served in that role. In addition,
demographic information such as gender, age, educational attainment, and previous positions was gathered.

The intent of the survey and related responses is to provide randomness to the selection process. Only those respondents who have been directors of nursing programs for less than three years were eligible for the study. This helps to ensure that the participants have a more current recall of onboarding activities they had completed. The first three respondents who met the criteria were asked to participate in the study. This randomized the sample, which helps prevent bias. Often time-shared knowledge leads to improved practices; thus, investigating how different nursing programs onboard new directors of nursing enhanced the onboarding process, which increases job satisfaction and retention.

Instrumentation and Data Collection

Merriam and Tisdell (2016) stated that the qualitative paradigm focuses on words and reflections, whereas data in the quantitative paradigm focus on numbers. Qualitative research thus is centered on word-centered data collection. These words are gathered via interviews, observation, and document review (Creswell, 2008). In addition to the online survey, the researcher used semistructured interviews, field notes, and documents to draw rich, thick conclusions. These methods are instrumental in promoting strategies for validity and reliability of the research question (Merriam & Tisdell, 2016).

Survey

The survey, which is included in Appendix A, was used to obtain demographic and other information from participants to contextualize the study. It also provided the means for
validating qualifications and experiences of the study participants. The survey was administered using SurveyMonkey.com. This web-based tool is commonly used for online surveys as it includes support for survey design and dissemination. SurveyMonkey is widely known as a leading provider of online survey solutions.

**Semistructured Interviews**

A key data collection method was in-person semistructured interviews with the three directors of nursing programs who have been in the position for less than three years, as identified in the survey. Qualitative research interviews are used to gather facts that elicit emotion. The interviewer uses active listening and probing to develop a rapport and gain in-depth understanding of the interviewee’s perspective of the topic being investigated (Merriam & Tisdell, 2016; Rossetto, 2014). The advantage to an in-person interview is the face-to-face contact with the interviewee, which allows the researcher to gather both affective and cognitive responses to the questions (Westat, 2002).

Using semistructured questions allowed the researcher to probe, clarify, and gather additional details to better understand participant responses, perspectives, and comments. This aids in understanding and gathering rich data. The interview questions were sent to the participants via email two weeks prior to the scheduled interview. This allowed adequate time for the participants to prepare, reflect, and gather their thoughts before the interview.

**Field Notes**

The third data collection technique in this study was field notes. Immediately after the interview was completed, the researcher reflected on observations from the interview process.
Some of these observations included where the interview took place, where the interviewer and participant were situated in the room, any distractions or interruptions during the interview process, and any other reflections on the interview process (Phillipi & Lauderdale, 2018).

Field notes are particularly important to qualitative research because the researcher is the primary instrument in the data collection process. Because the researcher is an active participant, rather than a passive observer, the researcher must be vigilant not to interject his or her own perspectives and ideas. Field notes were completed immediately after each interview, so the information was fresh and the researcher did not need to rely on memory at a later time.

**Documents**

The fourth data collection technique was reviewing onboarding documents. The documents used in the onboarding process provided added data referred to by the participant. These documents provided a deeper understanding of the onboarding process, timeframes, required activities, and other events. Merriam and Tisdell (2016) stated that all types of documents can help the researcher better understand and discover insight into the problem.

In addition to onboarding documents, job descriptions and organizational charts provided additional context to the director of nursing position as it was reflected in the community college. The source of these documents varied. Some were gathered from the participants, while others were obtained through the community college’s website or upon request.
DATA COLLECTION PILOT

To mitigate any problems or issues with the research protocol and to adequately prepare for the semistructured interviews, the researcher conducted a pilot of the data collection methods as part of the study. The contact protocol designed for the study was used. The primary objective of the pilot was to ascertain if the questions were relevant and elicited the type of responses germane to the study. The pilot also allowed the researcher to practice interviewing techniques and to determine if the length of the interviews coincided with the planned timeframe. None of the data collected from the pilot was used in the study as it was subsequently destroyed.

DATA ANALYSIS

Creswell (2012) identified six steps for data analysis: (1) preparing and organizing the data for analysis, (2) reading through all data, (3) coding the data for exploration and using the codes to glean understanding and form themes, (4) representing the findings narratively or visually, (5) interpreting data and reflecting on literature findings, and (6) validating the data for accuracy.

Data analysis is a simultaneous process and occurs with the first interview (Creswell, 2012; Merriam & Tisdell, 2016). Data must be reviewed after each interaction to further clarify information from another interviewee. If the data are analyzed at the end, questions can arise with no way to obtain the answers. Interpreting data simultaneously can assist with probing questions to further understand the research problem. A deeper understanding of the investigated problem occurs each time the data are read. The analysis of data is an inductive process in which the researcher looks for trends. Large amounts of data are identified, and
organization of the data allows the researcher to go back and verify information at a later date (Creswell, 2012).

Merriam and Tisdell (2016) discussed the three phases of data management: (a) data preparation, which includes preparing the data for analysis through transcribing and formatting the transcription; (b) data identification, which includes coding the segments of the interviews, field notes, and external documents; and (c) data management. These methods were used in the study.

After the interview, the tapes were transcribed for analysis. The transcript captured not only the provided answers but also pauses, laughter, or even the phone ringing (Creswell, 2012). The transcript was sent to the respondent to clarify comments and check for accuracy. Data analysis was done by hand, as was analysis of field notes and external documents. This analysis could have been computerized, but performing this task manually allowed for better understanding of the data by the researcher. A constant comparative method generates substantial findings (Merriam & Tisdell, 2016). Thus, the coding of words and themes from each interview was stored separately. Data were then classified into categories and subcategories, and a master list was developed, which combined common themes. The purpose of the study and the research questions were kept in the forefront as the data were analyzed to ensure they were addressed.

**TRUSTWORTHINESS OF THE STUDY**

Trustworthiness is an important aspect of all research, with the ultimate goal being to contribute results to the field of study that are believable and trustworthy (Merriam & Tisdell, 2016). Qualitative research must be conducted in such a way that it strengthens the credibility
of the findings should they be judged using the criteria developed for and relevant to the qualitative paradigm. Lincoln and Guba (1985) explained that qualitative inquiry is often judged by credibility, transferability, dependability, and confirmability.

In this study, credibility was evident via member checks, in that study participants were asked to review their transcribed interviews. Transferability was achieved by providing the rich, thick data so that readers can determine if the findings are relevant to their situations or settings. Dependability affirms that findings are consistent and can be replicated through the documented research design and rationale for the methods used. Finally, confirmability exists to the extent that the findings reflect participant responses rather than researcher bias. This happens via an indisputable audit trail.

Strategies focused on trustworthiness are threaded throughout the research process. Credibility and validation occurred via the rigorous semistructured interviews of the directors of nursing programs, which provided rich, thick data. The participants were asked to check their transcripts for accuracy. Reflective field notes and other documents added data sources. Thus, the data were triangulated via these varied data sources. Transferability is evident within the descriptive data, which allows readers to determine if onboarding techniques that were used are applicable to their positions and institutions. The research process provides a transparent audit trail that explains the process of gathering data, selecting participants, and analyzing the data, which is grounded in the review of the literature. A detailed review of the limitations of the study and researcher as an instrument provides further evidence of transparency.
LIMITATIONS

Limitations can compromise or weaken a case study, yet, in the spirit of transparency and authenticity, it is important to acknowledge that they may occur and, perhaps more importantly, mitigate the possibility that they can occur. Case studies are bounded by time and place, which causes limitations that can weaken the study or skew data (Creswell, 1998). A researcher must be aware of this possibility and understand what the limitations may be. In this study, limitations include but are not limited to the following.

Researcher Bias

The researcher in this study is a director of nursing at a large suburban community college in Illinois. As such, the possibility of researcher bias is acknowledged. Steps were taken to mitigate bias, which included triangulation of data and a clear, transparent research design. The scope of the case study was small, with only three participants, so the study is limited to the findings from these subjects.

Limited Recollection by Respondents

The study focused on the recollection of study participants of their onboarding experiences. This limitation is acknowledged and was addressed by limiting the pool of participants to those who served in the director of nursing position for three years or less. Throughout this research process, relevant reflections and thoughts were captured and reviewed. In addition, all steps were carefully documented, which created an audit trail.
Small Case Study

The study focused on the experiences of three directors of nursing at Illinois community colleges of varying sizes, as defined by student FTE. Although this limitation is acknowledged, understanding their onboarding experiences, what was helpful and what was lacking, will provide insights for similar situations. The ultimate goal is to identify onboarding experiences that mitigated turnover and enhanced job satisfaction.

RESEARCHER AS AN INSTRUMENT

Unlike quantitative research in which researchers deliberately separate themselves from the research process, qualitative researchers acknowledge their role within the study. Creswell (2004) explained that it is important to understand the concept that the researcher is an instrument in qualitative studies. Therefore, it is important to provide the background of the researcher, which includes a 40-year career in nursing and nursing education.

After earning a diploma in nursing from Evanston Hospital School of Nursing in 1980, the researcher went on to earn a Bachelor of Science in Nursing degree from Elmhurst College and a Master of Science in Nursing degree from DePaul University. The researcher served as a clinical nurse specialist for 20 years before assuming roles in nursing education, which included supervising and evaluating clinical experiences.

The researcher worked as an adjunct nursing faculty member for nine years at William Rainey Harper College, a community college located in the northwest suburbs of Chicago, in Illinois, and then transitioned to a full-time nursing faculty member. When the director of nursing position became available at the college, the researcher was asked to assume the role and has been serving as the director of nursing programs for the past six years.
CHAPTER SUMMARY

This qualitative study using case study methodology explored the onboarding practices for newly hired directors of nursing programs at community colleges in Illinois. Purposeful sampling ensured varying sizes of community colleges in Illinois. The participants were identified via a published list of directors of nursing, which is widely distributed in Illinois. Data collection included participant interviews of newly hired directors of nursing programs at community colleges. Documents and field notes added to the rich, thick data. The data collected from these multiple sources were then analyzed using coding, theming, and categorization. Strategies were deployed that ensured credibility, transferability, dependability, and confirmability. Limitations as well as role of the researcher as an instrument in the study were explained. Finally, a systematic and consistent approach was used in the research design, data collection, and analysis, which ensures trustworthiness, rigor, and transparency.
CHAPTER 4: RESULTS AND FINDINGS

INTRODUCTION

Qualitative research studies often use a case study method, which allows the researcher to serve as the primary instrument of data collection and analysis and to use an inductive investigative strategy (Merriam & Tisdell, 2016). The research thus provides insight into the research question from the perspective of the interviewee. The researcher explores the insights of the interviewee by using questioning, documents, and field notes to provide insight into the questions.

The purpose of this study is to explore the onboarding practices for the director of nursing program position at Illinois community colleges. Guided questioning was used to identify the transition of a nurse to the director of a program and how onboarding was done at these schools. Finally, a suggested onboarding process for future directors is offered as a result of the research findings.

RESEARCH QUESTIONS

This study addressed the following research questions:

1. What type of onboarding programs and experiences are commonly used when new directors of nursing enter the institution?

2. How was the onboarding process implemented?

3. How and in what ways is the onboarding program evaluated for effectiveness?
PARTICIPANT CONTACT PROTOCOL

The study participants were selected from members of the Illinois Community College Deans and Directors group. These participants were identified from an online survey via SurveyMonkey.com sent to deans and directors. The three participants were chosen based on the following criteria:

1. The participant was currently the director of the nursing program at the community college.
2. The participant was in that role for three years or less.
3. The participant’s role could be considered either an administrator position or faculty member who serves as the director of nursing programs.

An email list was obtained from the Illinois Deans and Directors group. This list contained 35 emails of current members in the group. For consistency and credibility, the survey was sent to all 35 individuals on the list; the first three members who met the criteria and agreed to be interviewed were asked to participate in the study. Thus, the first three respondents who met the requirement of being in the position of director of nursing programs for less than three years were contacted and asked to participate in the study.

Once the first three nursing directors responded to the survey and agreed to the interview, a date was secured for a face-to-face interview. Participants provided demographic data via the online survey, which verified their role as director of nursing for three years or less. The consent form, which can be found in Appendix B, was emailed to the participants two weeks prior to the scheduled interview; the consent forms were signed as the interview began. The form ensured that the participants were aware of and agreed to the parameters of the study.
To maintain confidentiality, special designations were used throughout the analysis for the respondents and related documentation. Table 1 displays these designations.

Table 1: *Participant Designations*

<table>
<thead>
<tr>
<th>Carnegie Classification Size</th>
<th>Location/Type</th>
<th>Participant Descriptor</th>
<th>Document Descriptor</th>
<th>Field Note Descriptor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small</td>
<td>Rural</td>
<td>S</td>
<td>SD</td>
<td>SFN</td>
</tr>
<tr>
<td>Medium</td>
<td>Rural</td>
<td>M</td>
<td>MD</td>
<td>MFN</td>
</tr>
<tr>
<td>Large</td>
<td>Suburban</td>
<td>L</td>
<td>LD</td>
<td>LFN</td>
</tr>
</tbody>
</table>

The timeline for the interviews was as follows:

- M: June 12, 2018
- L: June 15, 2018
- S: June 28, 2018

**BACKGROUND OF DIRECTORS OF NURSING IN ILLINOIS COMMUNITY COLLEGES**

The two questions on the pre-interview online survey that identified appropriate candidates for the interview were:

1. What is your current position? — to confirm the person was the director of the community college nursing program.

2. How long have you been in the position? — to verify that the participant was in that position less than 3 years.

The three-year time threshold was used so that interviewees were relatively new to their role and could thus recall their onboarding experience. Other questions pertaining to
gender, age, school, ethnicity, education, and size of the nursing program were asked in the online survey.

Background of the Participants

Participant demographics were obtained from the online survey. These included gender, age bracket, ethnicity, education, title, role, and time in position. Table 2 summarizes the information gathered from the participants via the survey.

Table 2: Participant Demographic Data

<table>
<thead>
<tr>
<th>INSTITUTION</th>
<th>GENDER</th>
<th>AGE</th>
<th>ETHNICITY</th>
<th>EDUCATION</th>
<th>TITLE</th>
<th>ROLE</th>
<th>TIME IN POSITION</th>
<th>SIZE OF PROGRAM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small</td>
<td>Female</td>
<td>Under 40</td>
<td>White non-Hispanic</td>
<td>Doctorate</td>
<td>Administrative Chair – Health Sciences</td>
<td>Faculty/Administrator</td>
<td>1 yr 10 mos</td>
<td>Approx. 80 students</td>
</tr>
<tr>
<td>Medium</td>
<td>Female</td>
<td>Under 40</td>
<td>White non-Hispanic</td>
<td>MSN</td>
<td>Director of Nursing</td>
<td>Faculty/Administrator</td>
<td>2 yrs 10 mos</td>
<td>Approx. 80 students</td>
</tr>
<tr>
<td>Large</td>
<td>Female</td>
<td>50-54</td>
<td>White non-Hispanic</td>
<td>MSN</td>
<td>Director of Nursing</td>
<td>FT Administrator</td>
<td>10 mos</td>
<td>200+ students</td>
</tr>
</tbody>
</table>

Participants were from various areas in Illinois. This allowed for the exploration of similarities and differences that occur throughout Illinois in obtaining data regarding onboarding practices. All institutions are in Illinois. The large college is in suburban Chicago, the medium college is in northern Illinois, and the small college is in the western part of the state along the Mississippi River. Interestingly, the three participants represented one of three differently sized community colleges, as defined by the Carnegie Size and Setting Classification System (Carnegie Classification of Institutions of Higher Education, 2017). This system places
community colleges in one of three size categories based on non-duplicated full-time student equивalency (FTE) fall term enrollment. The three size classifications are: (a) small institutions defined as having 1,999 FTE or less, (b) medium institutions defined as those having between 2,000 and 4,999 FTE, and (c) large institutions defined as those having at least 5,000 annual FTE. This size distinction was helpful to determine if there was a difference in the type of onboarding that was conducted in relation to the size of the institution. Thus, one participant was from a large institution, one from a medium-sized community college, and one from a community college classified as small.

OTHER SOURCES OF DATA

Triangulation of data is important to strengthen the trustworthiness and validity of the study. Through interpreting various documents and correlating that information with the interview questions, patterns can be identified to support or discount findings. Documents collected were used to support findings. Field notes provided direct observations that were recorded after the interviews. The field notes provided insight and reflections of the participants’ college campus and office. They allowed the interviewer to provide a summary of the environment; whether the participant appeared comfortable in the interview setting via non-verbal body language, silence, laughter, and the like; and other observations during the interview process. Immediately after the interview, the researcher recorded these observations in detail. Table 3 presents the documents received upon request and the field notes taken.
The literature regarding onboarding and socialization to a job role revealed that this process is largely dependent on understanding the role and expectations; a basic document that accomplishes this is the job description. Without a job description, it is difficult for the program director to understand the responsibilities of the role. This confusion can lead to job dissatisfaction and ultimately cause turnover in a role that is already identified as a high-turnover position. Participant S did not have a job description for the position as the director of nursing. Although Participant S had served previously as a faculty member in the program, that role is very different and did not encompass the administrative expectations. An organizational chart provides context as to where the role fits within the institution. Table 4 identifies the reporting structure for the director of nursing obtained from the organizational chart and the responses from the interviews. Again, an organizational chart for Participant S was not available. Interestingly, the field notes taken after the interview with Participant S indicate body language that demonstrated a casual comfort level and a sense of confidence when answering questions. During the interview, there were periods of laughter when the participant described her role.
Table 4: Data Obtained from Interview and/or Organizational Chart

<table>
<thead>
<tr>
<th>Interviewee</th>
<th>Report To</th>
<th>Additional Program Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>S</td>
<td>Vice President</td>
<td>None</td>
</tr>
<tr>
<td>M</td>
<td>Associate Vice President</td>
<td>None</td>
</tr>
<tr>
<td>L</td>
<td>Dean</td>
<td>Department Chair and Program Coordinator</td>
</tr>
</tbody>
</table>

None of the participants in the study were given any onboarding materials. This validates the information provided in the interviews, in which all participants indicated that there was no formal onboarding process when they assumed the role of director of nursing programs.

The participant from the large college (L) was provided two support faculty who both receive up to nine hours of release time from teaching to assist with program responsibilities. One is considered the program coordinator; that person assists with curriculum. The second individual is the department chair; that person arranges student clinical placements and handles student problems. Thus, L focuses on overseeing the program, completing state paperwork, dealing with accreditation, obtaining new clinical sites, and overseeing faculty evaluations. L also provides input into the budget. Interestingly, L held both the program coordinator and department chair positions prior to becoming the director of the nursing program. Understanding those roles provided a solid foundation to take on the new job responsibilities. Interestingly, the field notes taken after the interview with Participant L indicate tense body language, fidgeting, and apprehension when answering questions.
FRAMEWORK FOR ANALYZING DATA

This section provides information on how the data were managed, analyzed, and coded. Marshall and Rossman (1999) described this step as bringing meaning, order, and structure to collected data that can often be messy, time-consuming, and fascinating. In essence, data need to be managed to bring order to the pieces of information obtained. Common practices in data management were used, which include transcribing recorded interviews, member checking, and gathering documents for useful and retrievable use (Coons, 2012).

Themes Used to Analyze Data

The theoretical model used to analyze the data was the contingency model of organizational socialization by Feldman, which included three components: anticipatory socialization before the newcomer joins the organization; encounter or first experiences in the organization; and change and acquisition, when the newcomer becomes an insider, fully integrated into the role. These components were then correlated to the literature relating to director of nursing turnover.

Anticipatory Phase

The initial phase of the model is anticipatory phase, when the new director of nursing is transitioning into the new role. In this phase, a job description often provides role clarity. When the participants were asked if their current job description reflected their duties, the following data were provided:

- L  Yes  (job description given)
- M  Yes  (job description given)
- S  No   (job description did not exist)
Participant S stated further, “I asked for a job description because my formal role at the college is full-time faculty member. What I do that goes along with the director of nursing, my official title is Administrative Chair of Health Sciences.”

Transitioning into a new role is also a hallmark of the anticipatory phase. When these participants were asked about how they obtained the role of nursing director, they offered the following statements, as provided in Table 5.

Table 5: *How the Nursing Director Role Was Obtained*

<table>
<thead>
<tr>
<th>Participant</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“I began as full-time faculty here 10 years ago, then program coordinator, then department chair, and then I was interim for one semester before I took the director role full-time.”</td>
</tr>
<tr>
<td>M</td>
<td>“Another faculty member was filling in as interim director for 2 years. So, it was a tough position to fill. Do you think I can do this role?”</td>
</tr>
<tr>
<td>S</td>
<td>“I was approached by the college’s leadership to not only come back to the college but take over leadership of the nursing program; this was after I resigned in December 2015 from a faculty position.”</td>
</tr>
</tbody>
</table>

These statements affirm that there are varying ways of transitioning into the role of nursing director. The one constant was that the participants all had previous experience at their colleges in the nursing program.

Encounter Phase

This second phase in Feldman’s Contingency Model of Socialization includes onboarding and assisting the director to assimilate to the culture of the college. Participants were asked how their roles are defined in the institution. The information presented in Table 6 was given.
Table 6: How Role Is Defined in the Institution

<table>
<thead>
<tr>
<th>PARTICIPANT</th>
<th>RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“... full-time administrator.”</td>
</tr>
<tr>
<td>M</td>
<td>“... my job description says I have to teach 6-12 credit hours each academic year. But this hasn’t always happened. ... There’s just not enough classes ... faculty going to cover those.”</td>
</tr>
<tr>
<td>S</td>
<td>“... hybrid position so 9 hours of release (time) and 6 hours for faculty duty.”</td>
</tr>
</tbody>
</table>

Thus, institution size appears to influence how the role is defined. The participant from the large community college is clearly a full-time director of the program, whereas the participant from the small institution is in a hybrid faculty/director role. The participant from the medium-sized institution offered an interesting answer in that, according to her job description, she is expected to teach, yet she has not done so since there are adequate faculty to cover classes. Thus, the job description appears outdated. Also, it is curious that Participant S does not have a specific job description as the nursing director, yet her responsibilities do include teaching. That warrants the inclusion of her director of nursing duties in the faculty job description. The transition to the director position was identified by the responses in Table 7.

Table 7: How Was the Transition?

<table>
<thead>
<tr>
<th>PARTICIPANT</th>
<th>RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“The director left so I was interim director for one semester then became the director in August.” “... fly by the seat of my pants.”</td>
</tr>
<tr>
<td>M</td>
<td>“... the transition was kind of on the fly.”</td>
</tr>
<tr>
<td>S</td>
<td>“Learning the new position was sink or swim.” “Factors that supported transition to the role ... I have internal drive and internal motivation. I wasn’t going to screw up.” “Having people believe in me.”</td>
</tr>
</tbody>
</table>
This phase is also defined in the literature as transition into practice. During this phase, it can be through orientation or onboarding, which can be accomplished via a formal, informal, or hybrid method. The question asked in the semistructured interview explored orientation or onboarding at various levels in the organization, including general onboarding, onboarding of faculty, onboarding specifically for the director of nursing, and whether onboarding was a formal or informal process.

**General onboarding.** A common practice during the encounter phase is onboarding. The onboarding process can assist the individual in becoming familiar with role, job tasks, group dynamics, and identifying internal conflicts to come to resolution. The participants were asked what type of onboarding was completed as they assumed their new roles as nursing directors (Table 8).

<table>
<thead>
<tr>
<th>Participant</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“I really didn’t have onboarding.” I don’t know if they felt because I have been here so long that I didn’t need to.” “Onboarding was formal as faculty member, informal to Director role. “I really didn’t have official onboarding. None.”</td>
</tr>
<tr>
<td>M</td>
<td>“... none for the Director role but formal onboarding for faculty role. ...formal process through HR when I became a full-time faculty. ...administration HR onboarding really you learn more about policies. Specifically, for the administrator, it was the passport.” The administrator passport....so I literally get this piece of paper and go around the college to meet with them.”</td>
</tr>
<tr>
<td>S</td>
<td>“…here’s your office. None. Learning new position was sink or swim, I kind of got thrown into the water and we’ll see what happens.”</td>
</tr>
</tbody>
</table>
Interestingly, the respondents offered information pertaining to faculty onboarding, which is reflected in Table 9.

**Table 9: How Was Faculty Onboarding Completed?**

<table>
<thead>
<tr>
<th>PARTICIPANT</th>
<th>RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“Formal onboarding as full-time faculty.”</td>
</tr>
<tr>
<td>M</td>
<td>“Formal onboarding for full-time faculty.”</td>
</tr>
<tr>
<td>S</td>
<td>“Formal process as far as HR onboarding and as a faculty member.” “I did not have formal onboarding or even informal (director of nursing).”</td>
</tr>
</tbody>
</table>

There appears to be a more robust onboarding process for faculty. Although the participants in the study previously served in faculty roles, the role of the director of nursing is different and should have prompted an onboarding experience.

When asked to describe the overall onboarding process at their community colleges and whether it was formal or informal, participants answered with the responses presented in Table 10.

**Table 10: Overall Onboarding at the College**

<table>
<thead>
<tr>
<th>PARTICIPANT</th>
<th>RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“Informal.”</td>
</tr>
<tr>
<td>M</td>
<td>“I would say it is more formal.”</td>
</tr>
<tr>
<td>S</td>
<td>“I did not have formal onboarding at all. Apparently, I didn’t have much informal either . . .”</td>
</tr>
</tbody>
</table>
Responses were mixed. Perhaps the distinction between formal and informal was not commonly understood by the participants. Likewise, when asked what type of onboarding would be most useful, the responses in Table 11 were given.

Table 11: Type of Onboarding That Is Most Useful

<table>
<thead>
<tr>
<th>PARTICIPANT</th>
<th>RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“I would like it formalized so I don’t feel like I am pushing myself on people.”</td>
</tr>
<tr>
<td>M</td>
<td>“. . . formal.”</td>
</tr>
<tr>
<td>S</td>
<td>“. . . informal aspects of onboarding”</td>
</tr>
</tbody>
</table>

Again, responses were mixed. Interestingly, the only respondent who thought informal onboarding is most beneficial is also serving in a faculty role.

Participants were also asked about general institutional support; specifically, they were asked how this type of support is provided. The responses are presented in Table 12.

Table 12: Institutional Support

<table>
<thead>
<tr>
<th>PARTICIPANT</th>
<th>RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“the dean. . . she has knowledge on how the college works. She does not help me with the nursing stuff.”</td>
</tr>
<tr>
<td>M</td>
<td>“. . . from my own division. From my supervisor . . . the executive dean.”</td>
</tr>
<tr>
<td>S</td>
<td>“I actually get it from the vice president. I get a great amount of support from the top levels of the college. . . Board of Trustees . . . a consortium provides some leadership development . . . and meetings with identified institutional support personnel.”</td>
</tr>
</tbody>
</table>
Superiors were cited as offering support. The participant from the small institution received that support from a vice-presidential level. This led to a question regarding meetings, and whom they met with to gain insights and how often (Table 13).

Table 13: *Meetings*

<table>
<thead>
<tr>
<th>PARTICIPANT</th>
<th>RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“… the executive dean weekly and associate VP twice a month… attend Administrative Council that talks about strategic priorities.”</td>
</tr>
<tr>
<td>M</td>
<td>“VP and other administrators… she definitely has an open door policy. I just wanted to feel (faculty) supported before I did it….”</td>
</tr>
<tr>
<td>S</td>
<td>“… weekly meetings with VP of instruction.”</td>
</tr>
</tbody>
</table>

All participants met with others in the organization, although the timing and levels of the individuals they met with varied. The specific details of those meetings and what was discussed were not included in the interviews.

Participants were asked about information about onboarding for the role of director of nursing through the Illinois Community College Deans and Directors group. They were asked if and how they relied on this group (Table 14).

Table 14: *Onboarding via the Illinois Community College Deans and Directors Group*

<table>
<thead>
<tr>
<th>PARTICIPANT</th>
<th>RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“… could ask question.”</td>
</tr>
<tr>
<td>M</td>
<td>“… made me feel like I wasn’t alone… the problems I was having, and the other directors were having them… dealing with people that are in similar roles over a nursing program was definitely more beneficial to me.”</td>
</tr>
<tr>
<td>S</td>
<td>“… knew what I was going through. The majority of my onboarding came from the deans’ and directors’ meetings.”</td>
</tr>
</tbody>
</table>
The new directors found value and assistance in an informal capacity from this group. They felt that the members could relate to their issues and situations because they serve in the same roles.

Finally, in terms of onboarding, the participants were asked what an ideal onboarding experience would look like. The suggestions displayed in Table 15 were offered.

Table 15: Ideal Onboarding Experiences

<table>
<thead>
<tr>
<th>Participant</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“Mentoring program to answer questions, assist with answering management things like dealing with faculty and student issues. Course modules on how to complete grants for equipment. Resources available from the state, like how to do reports.”</td>
</tr>
<tr>
<td>M</td>
<td>“I would like a director in the role to orient and train me.”</td>
</tr>
<tr>
<td>S</td>
<td>“A mentoring program or more formal introduction. A clear list of expectations . . . a job description . . . a mentoring program.”</td>
</tr>
</tbody>
</table>

The interviews then transitioned to topics other than onboarding. Specifically, study participants were asked what barriers they encountered when they transitioned into their new role. Their responses are presented in Table 16.

Table 16: Barriers During the Transition

<table>
<thead>
<tr>
<th>Participant</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“. . . understanding what I can and can’t do without permission. It is stressful. Nursing is so unpredictable, and things happen all the time.”</td>
</tr>
<tr>
<td>M</td>
<td>“Fear, what am I getting myself into. I battled with myself, could I ever go back to practicing nursing? I think age . . . people would judge me and maybe not listen to me.”</td>
</tr>
</tbody>
</table>
The barriers mentioned above may have been mitigated with a formal onboarding process. Understanding the role and what was expected is a key element to onboarding, and these individuals did not have this experience.

Often, new nursing directors make mistakes, as do others new to their roles. The participants were asked about mistakes they made. Their reflections are seen in Table 17.

**Table 17: Making Mistakes**

<table>
<thead>
<tr>
<th>PARTICIPANT</th>
<th>RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>S</td>
<td>“Tension between the previous director of program, who returned to faculty position and then retired. Speaking of college... nobody truly understands what we do in these roles. Nobody knew my job, I didn’t know my job. If you are not a little scared, you are not paying attention.”</td>
</tr>
<tr>
<td>L</td>
<td>“I do make mistakes because I didn’t have that onboarding. I think the hardest thing right now is what I can do and what I can’t do without permission. You can make big mistakes that have big impacts on many people.”</td>
</tr>
<tr>
<td>M</td>
<td>“You make mistakes, learn from them, and move forward.”</td>
</tr>
<tr>
<td>S</td>
<td>“Oh, I dropped the ball because I didn’t know it was in the air.”</td>
</tr>
</tbody>
</table>

All admitted to making mistakes. However, there was a feeling that one learns from them and moves forward. It would be interesting to note if mistakes could have been mitigated with a formal onboarding process.

Like onboarding, mentoring is a key activity in the encounter phase. The participants responded to questions about mentoring and whether they experienced it and valued it. Their comments are in Table 18.
Unlike onboarding, mentoring was a specific activity that the newly appointed nursing directors had experienced. Interestingly, it was informal mentoring, by either calling on other nursing directors in the state group or adopting others within the organization.

**Table 18: Mentoring Experiences**

<table>
<thead>
<tr>
<th>PARTICIPANT</th>
<th>RESPONSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“I call... members of Deans and Directors group mentors... I call on them when I have questions. My mentor would be great if I had questions, sometimes I go to the dean. A mentor who is in a similar position and has some kind of educational component that would explain some of the specifics of the role as it applies to nursing programs in Illinois. I would like it formalized so I would not feel like I am pushing myself on people.”</td>
</tr>
<tr>
<td>M</td>
<td>“I had informal mentors... mentors who were in like programs, geographically close, and would answer questions.”</td>
</tr>
<tr>
<td>S</td>
<td>“Informal. I do have nursing education administrator mentors both at the consortium and throughout the state through the Deans and Directors. I also consider my vice president as a mentor. I adopted her as a mentor.”</td>
</tr>
</tbody>
</table>

**Change and Acquisition**

The final phase in Feldman’s contingency model for socialization is the change and acquisition phase, in which the person assimilates to the role and culture of the organization. During this phase, competing role demands are resolved, critical tasks mastered, and group norms and values are internalized. During this phase, the new employee becomes comfortable in the role. It is at this time that succession planning should occur.

In this light, participants were asked to describe how they became comfortable in their new role as nursing director and how long it took. Responses are as follows in Table 19.
Confidence builds slowly in this position, taking several years. It would be interesting to see if formal onboarding or mentoring programs would alleviate angst and assist the nursing directors in becoming more comfortable in their roles in a shorter period of time.

Table 19: *Comfort in the Role of Nursing Administrator*

<table>
<thead>
<tr>
<th>Participant</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“I still am not comfortable . . . I think it will take years.”</td>
</tr>
<tr>
<td>M</td>
<td>“… had to give up practicing bedside nursing because, of course, the hours were much more. Every little mistake has made me feel more comfortable in my role and more confident. For someone to feel comfortable in the job, I would say it takes three years. . . . I like my job.”</td>
</tr>
<tr>
<td>S</td>
<td>“I am still working on it. I’ve been in a very reactionary position the first year. This year I have been more proactive and started building things. You get comfortable and then something rocks the boat. I don’t know if I will ever be comfortable at it, but they haven’t fired me yet. There were four specific days where I loved my job and those were at the state deans’ and directors’ meeting where everybody knew what was going on . . . but, I like my job, I really do.”</td>
</tr>
</tbody>
</table>

Finally, it has been identified that Illinois community colleges have a 33% turnover in the administration of Illinois state-approved programs. ACEN programs have a 34.5% turnover. The participants were thus asked about what type of succession planning brought them to their positions. The responses in Table 20 were given.

Table 20: *Succession Planning*

<table>
<thead>
<tr>
<th>Participant</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>L</td>
<td>“I began as full-time faculty here 10 years ago, then program coordinator, then department chair, and then I was interim for one semester before I took the director role full-time. . . . this was not planned.”</td>
</tr>
<tr>
<td>M</td>
<td>“Another faculty member was filling in as interim director for 2 years. So it was a tough position to fill . . . I was asked to take the role.”</td>
</tr>
</tbody>
</table>
These statements indicate that there is a need to address director of nursing programs positions turnover. This can be done best through intentional and structural succession planning.

**CHAPTER SUMMARY**

Qualitative research produces large volumes of data that are complex. This makes transparency difficult. This chapter displayed and articulated the data in a clear and transparent manner so that sense could be derived. These data also confirm transparency and credibility and ensure transparency. This provides context for data analysis, which will be discussed in Chapter 5.
CHAPTER 5: DATA ANALYSIS AND CONCLUSIONS

INTRODUCTION

As stated throughout this document, this research explored how newly hired directors of nursing programs are on boarded at Illinois community colleges. This qualitative study identified three directors of nursing who had been in the role for less than three years. Participants for this study were directors of nursing who administered state-approved programs at three community colleges of different sizes.

This research identified three overarching themes: (a) a need for standardization of the onboarding process for the unique and important position of director of Nursing in Illinois community colleges, (b) identification of factors that will aid transition into the role, and (c) a need for both formal and informal mentors as a means to organizationally socialize the new nursing director. This chapter will unveil these themes via data collected related to the research questions. Interpretation of the data includes strengths, weaknesses, and suggestions for further research.

RESEARCH QUESTIONS

There were three research questions that guided this study:

1. What type of onboarding programs and experiences are commonly used when new directors of nursing enter the institution?

2. How was the onboarding process implemented?

3. How and in what ways is the onboarding program evaluated for effectiveness?
The demographic makeup of the study participants is white, non-Hispanic females, two of which are under the age of 40. The current nursing workforce for nursing program faculty is 73% non-Hispanic/white and 94% female. The largest group of faculty is between the ages of 41 and 50 years old (Illinois Nursing Workforce Center, 2017). The director of the large institution in this study is solely in an administrator role, whereas the directors of the small and medium institutions are in faculty/administrator positions. ACEN recognizes the director of nursing programs as an administrative role, even if teaching is part of the responsibility.

Each research question will be addressed. Conclusions will be offered as to what was learned through this qualitative process.

Research Question 1

*What type of onboarding and experiences are commonly used when new directors of nursing enter the institution?*

According to Feldman in the contingency model of socialization, phase one, the anticipatory socialization phase, is what occurs prior to or just starting in the new role. In this study, assuming the role of director of nursing was not a planned change for the participants; all were previous faculty at the community college where they were working. A job description is an internal document that provides the scope, duties, and responsibilities and provides the director of nursing with an introduction to the job and role expectations. All but one new director had a job description. It is difficult to have job clarity without a job description.

According to Emory et al. (2017), the nursing program director role is complex and different than the role of nursing faculty. Therefore, training and mentoring is essential for this position. Yet, formal onboarding experiences did not exist when the participants assumed the
role of director of nursing. However, it was interesting to note that these new directors were former faculty. In that role, they had extensive onboarding. When the role changed to director of nursing programs, this onboarding was minimal or nonexistent. When onboarding occurred, it was an informal process.

*Onboarding* is a term familiar to the participants in the study. The human resources department did the initial onboarding or orientation to the college when these individuals were newly hired. This process included completing forms for employment. All participants started at their colleges as full-time faculty members. Onboarding for full-time faculty included an extensive orientation, which included mentoring by another full-time faculty member. Interestingly, no formal onboarding was done when these individuals assumed the role of nursing director. It is presumed that since these directors started in a full-time faculty role, their institutions felt that onboarding was not needed. Yet, this role is substantively different.

When onboarding did occur, it was an informal process. The new directors identified the process as “sink or swim” or “flying by the seat of their pants.” This led to frustration in adjusting to the role with fear of mistakes and consequences for making those mistakes. The new directors of nursing took this approach in stride, stating, “I wouldn’t let myself fail.” Informal onboarding is counterintuitive, since training and mentoring in a new role is essential for the person to become acclimated to the role and to be able to perform in the new role in a timely manner.

In the large institution, which had more than 200 students in the nursing program, the director had assistance with program administration by having both a program coordinator and a program academic chair. Both of these positions had job descriptions to decrease role
ambiguity. Both of these roles have faculty teaching responsibilities with release time, leaving the director as a full-time administrator without teaching duties. The participant from the medium-sized institution had faculty responsibilities written into the job description but did not perform them. The only participant with teaching responsibilities was from the small school.

Research Question 2

*How was the onboarding process implemented?*

Phase two of the Feldman contingency model is the encounter phase. The onboarding process can assist the new director in becoming familiar with role, job tasks, group dynamics, and identifying internal conflicts and how to resolve them. In this phase, the director learns aspects specific to the role and needs assistance in understanding this complex role. Many other aspects of the role are identified, which are different from a faculty role. Some of these tasks are completing state paperwork, maintaining program accreditation, and obtaining and maintaining clinical sites. The nursing director has to deal with faculty and student issues as well. The new director role includes program oversight and collaboration with faculty. These are tasks that full-time faculty members do not complete or have knowledge of, as they are focused on classroom instruction.

All the new directors of nursing programs in this study stated they did not go through an official onboarding process. The onboarding process was done with a combination of meetings with a superior or other administrator. Those meetings occurred regularly, from daily to twice a month. The administrators who were superiors to the nursing directors were not nurses and could not assist with the complexities of understanding nursing program requirements like
completing state and accreditation reports. They also lacked an understanding of clinical requirements.

The Illinois Deans and Directors group was identified as an informal mentoring group. New directors stated they could contact a member from the group to get nursing program questions answered. This group meets quarterly and the directors stated that the members of this group understand the job expectations of the role.

Barriers to role transition included uncertainty as to what can be done without asking permission. Participants mentioned that it was stressful not understanding this nuance. Tension was also noted between the new director and other administrators.

Research Question 3

How and in what ways is the onboarding process evaluated for effectiveness?

None of the participants could provide actual documents that showed either the college orientation process or an onboarding process. This led to the statements that the onboarding for the director of nursing position was an informal process.

The onboarding process was evaluated in terms of how comfortable the director of nursing felt about administering the program. This is the third phase of Feldman’s contingency model for socialization, the change and acquisition phase. During this phase, the person feels competent in the role and critical issues are resolved. At this time, the new directors of nursing stated they enjoyed their positions, but it took them years to feel comfortable in the role. Field notes revealed that the longer the directors were in the role, the more at ease they were during the interview process. Some participants laughed when reflecting on choosing a mentor and overcoming mistakes.
RECOMMENDATIONS

The following recommendations are being made based on the study findings and conclusions.

1. **Formal onboarding is needed for newly appointed directors of nursing.** This onboarding process should be formalized and systematized so that it is embedded within the fabric of the institution. Informal processes provide the possibility that individuals may or may not be properly on-boarded. Optimally, the onboarding should be conducted by someone who is knowledgeable of college processes and procedures. Ideally, someone who is also familiar with nursing program administration would do the onboarding. The ranks of retired nursing directors from the same institution would be a good place to find individuals who could complete the onboarding of new directors. Systematizing a system with retirees, however, could be challenging. Another possibility would be to develop a formal onboarding process via the Illinois Deans and Directors group. This would be time-consuming but perhaps it could be embedded within the work of that group. Another onboarding option for directors of nursing programs is through the Illinois Center for Nursing (ICN). Partnering with this organization could offer this government website as a resource where new program administrators could obtain answers to frequently asked questions and have links to resources when starting their new position.

   To address the identification of a formal onboarding process, a template should be created. The template should include both internal and external resources. The internal resources should also be available to an upper-level administrator who can assist the new program director in understanding the culture, politics, and processes of the community.
colleges. The external resources should be available on the Illinois Center for Nursing website and patterned after the Kansas Board of Nursing website, which provides information regarding the specifics of the nursing program as well as a toolkit (Kansas Nursing Board, n.d.). This information should be available to all Illinois nursing program directors.

2. A mentoring process is needed for new directors of nursing. Like onboarding, mentoring is a critical component that assists new employees in feeling comfortable in their positions. Similar to the first recommendation, mentors who are familiar with the organization’s policies and procedures should be identified. Someone who is also familiar with nursing program administration would be ideal. Again, the ranks of retired nursing directors from the same institution would be a good place to find individuals who could complete the onboarding, but systematizing a system with retirees could be challenging. Another possibility is to develop a formal mentoring process via the Illinois Deans and Directors group, which would be time-consuming but perhaps could be embedded within the work of that group.

The Illinois Community College Deans and Directors group should be used to identify seasoned program directors to become volunteer mentors for new program directors. These mentors should have experience in areas common to the new director’s program, like program size, location of program, or curricular design. The term of this assignment should be a minimum of one academic year. The Illinois Board of Nursing should notify the president of the Deans and Directors group when a change in nursing program community college leadership has occurred. Then the Deans and Directors group should send a welcome note to the new director of nursing programs and invite that individual to the next
Deans and Directors meeting. Information about the Deans and Directors group should be available on the Illinois Center for Nursing Workforce webpage. A brochure should also be developed with the mission of the Deans and Directors group and the benefits of belonging to this unique group. This brochure would provide valuable information on how to engage with this group.

3. **Succession planning is needed to ensure there is a cadre of individuals qualified and willing to take on the role of director of nursing programs at community colleges.** The turnover in the nursing director’s position is well documented. Community colleges need to begin building a cadre of nursing leaders who are ready to take on that role. A nursing program strategic plan should be developed for every program, and it should include succession planning for this important position.

   To begin succession planning, seasoned community college nursing program directors should collaborate with deans and directors of university nursing programs to identify key leadership traits that would be beneficial in identifying the next program directors. Strategies should be developed to provide progressive leadership opportunities to identified potential leaders to equip them to administer a nursing program.

**IMPLICATIONS FOR FURTHER STUDY**

This study highlighted the need for formalized systems to onboard and mentor new directors of nursing. It also stressed the need for succession planning to ensure seamless movement of new directors into the position.

Further study is needed to determine if formal or informal onboarding would be most feasible. The recommendations in this research stress formal processes to ensure the
onboarding does indeed take place. However, informal systems may prove more beneficial for this position. A future study could test this theory.

Likewise, further study is needed to determine the optimal mentoring system for new directors of nursing. Formal systems ensure integration within organizational processes. However, informal mentoring may prove more effective.

Finally, identifying how Illinois universities or other states’ universities onboard new nursing program directors would be helpful to the community college sector. Strategies used by Illinois universities and those in other states would inform strategies and practices needed for community college nursing leadership program development in Illinois.

CHAPTER SUMMARY

Effective onboarding practices for directors of nursing programs have not been documented in the literature. Yet, it is imperative to identify ways to effectively onboard these critical positions as a means of increasing job satisfaction and decreasing turnover. The turnover of nursing program directors is well documented. In addition, community colleges are in the spotlight to help educate and train more nurses to alleviate the nursing shortage. The nursing director is a key position in ensuring these programs are properly accredited and staffed and are of the highest quality. The data gathered via this research supported that onboarding is not systematically deployed at community colleges when a new nursing director is hired.

Interestingly, the decision to become a director of nursing programs was not a planned career move, as was also documented in the literature. This makes onboarding all the more critical. The new directors interviewed for this study had an advantage when assuming their
new role because they had previously served as faculty in their institutions. This previous role allowed them to understand the college’s processes. However, it may have also prevented a formal onboarding process from occurring because their direct supervisors felt the transition would be seamless. Clearly, leading a program can be quite different from teaching in one, and this needs to be acknowledged and addressed.

It was common for these new nursing directors to engage in informal mentoring, which was handled by higher-level administrators at the institution. Yet, these administrators did not fully understand the complexity of the role of director of nursing programs. Much of this understanding occurred gradually and, in some cases, incidentally rather than intentionally.

The Illinois Deans and Directors of Community College Nursing Program group was identified as a key group that could provide answers related to the administration of a nursing program to new directors. Group members were easily reached by phone or could answer questions at regular quarterly meetings. The participants suggested that this group could be used to establish a formal mentoring program for new directors. Although this group is supportive of new directors, formalizing the mentoring program would be important, because new nursing directors often felt they were bothering group members when asking for advice and guidance.

When the new directors began their positions, they made mistakes, but they felt they learned from those mistakes. This showed resiliency and their investment in and commitment to learning and understanding the role. Again, the newly hired nursing directors turned to the Illinois Deans and Directors of Community College Nursing Program group for assistance when they made mistakes.
Results of this study indicate that formal onboarding programs are not available for newly hired directors of nursing at community colleges in Illinois. However, the state is fortunate to have a group that informally supports these individuals. This may not be the case across the country. Thus, it is imperative that a formal, structured onboarding program, which includes formal mentoring, be developed for new directors of nursing programs in Illinois community colleges and across the nation. Feldman’s seminal research on organizational socialization would provide a sound and well-regarded framework for a formal, intentional, and systematic onboarding program, which includes a formal mentoring component.
REFERENCES


APPENDIX A: DEMOGRAPHIC SURVEY
Demographic Survey

(Note: conducted online via SurveyMonkey)

Instructions: Before completing this online survey, please review the Participant Consent form (attached to the email). Your completion of this survey indicates your agreement with the conditions of the study as described in that Consent form and your willingness to participate.

Date: ____________________  Participant Name: ____________________________

Please complete demographic questionnaire below for this dissertation research.

1. Gender: □ Male  □ Female

2. Age Group:
   □ under 40 years
   □ 40 – 44 years
   □ 45 – 49 years
   □ 50 – 54 years
   □ 55 – 59 years
   □ 60 – 64 years
   □ 65 years or older

3. Ethnicity:
   □ Asian or Pacific Islander
   □ American Indian or Alaskan
   □ Black, non-Hispanic
   □ Hispanic
   □ White, non-Hispanic

4. Education:
   □ Doctorate (Ph.D., Ed.D., DNP., etc.)
   □ Master of Nursing Education
   □ Master of Nursing Administration
   □ Other
5. **Current Position**
   - Institution: ____________________________
   - Job Title: ____________________________
   - City/State: ____________________________
   - How long have you been in this position: From (month/year)_______ To (month/year)_______

6. **Previous Position**
   - Institution: ____________________________
   - Job Title: ____________________________
   - City/State: ____________________________
   - How long were you been in this position: From (month/year)_______ To (month/year)_______

7. **Are you considered**
   - [ ] Full-time Administrator
   - [ ] Administrator with Faculty duties

Thank you for taking time from your busy schedule to complete this questionnaire. Your careful responses will provide substantive depth and clarity to this study and will aid in providing necessary context.

Julie D’Agostino
Doctoral Student
Ferris State University
dagostj@ferris.edu
847.682.5824
APPENDIX B: CONSENT FORM
Consent Form

Thank you for agreeing to participate in this research study!

I am a student in the Doctorate in Community College Leadership program at Ferris State University and am working on a dissertation project designed to explore how new director of nursing programs are on boarded at Illinois community colleges.

To inform this project I am conducting interviews with three new directors of nursing programs at Illinois community colleges.

The study consists of 3 parts:

(1) a set of Demographic questions, accessible through an online survey;

(2) a set of questions would be asked via a personal interview at your campus location:

(3) documents provided that were used in the onboarding process as well as a campus and divisional organizational chart.

Your participation in this study is voluntary. Additional details of the study are explained below in this informed consent form.

All information collected from this study will remain confidential; in the dissertation and any additional publications or presentations based on the research, I will use pseudonyms for participants and their institutions to protect the anonymity of all participants.

If you have any questions, please give me a call at 847.925.6523 (office) or 847.682.5824 (cell) or send an email to dagostj@ferris.edu. You can also contact my doctoral faculty advisor or Ferris’ Institutional Research Board at the contact information provided below.

Please review the following information carefully. At the time of the interview, I will review the study details with you and will answer any questions that you may have about the study.

Thank you again!

Julie D’Agostino
INFORMED CONSENT FORM

**Project Title:** Exploration of Onboarding Practices for the Director of Nursing Program Position at Illinois Community Colleges

**Principal Investigator:** Julie D’Agostino  
Email: dagostj@ferris.edu  
Phone: 847.682.5824

**Faculty Advisor:** Sandra Balkema  
Email: SandraBalkema@ferris.edu  
Phone: 231-591-5631

**STUDY PURPOSE**

You are invited to participate in a research study to “explore the onboarding practices for the director of nursing program position at Illinois community colleges.” The researcher is interested in gaining insight from new directors of nursing programs. Three Illinois community college new director of nursing programs will be interviewed to better understand the current state of onboarding that occurs.

**PARTICIPATION**

**Taking part in this study is completely voluntary.**

You are eligible to participate in this study because you are a new director of a nursing program in an Illinois community college. If you agree to be part of this study, you will be asked to complete an online survey and participate in an interview. The interview will consist of a series of questions related to the onboarding practices for the director of nursing position.

**POTENTIAL RISKS/DISCOMFORTS**

There are no known risks associated with this study.

**ANTICIPATED BENEFITS**

This research is designed to explore the onboarding practices for the new director of nursing program position at Illinois community colleges. Through recognizing how current director of nursing programs are onboarded this study will lead to identifying best practices to support this role in Illinois community college nursing programs.
CONFIDENTIALITY

Signing this form is required in order for you to take part in the study and gives the researcher your permission to obtain, use, and share information about you for this study. The results of this study may be published in the researcher’s dissertation and related publications, but the discussion would not include any information that would identify you as a participant.

To keep your information safe, the researcher will protect your anonymity and maintain confidentiality. During the interview, the researcher will record the information, to ensure accuracy and allow the researcher to review the information following the interview. Your personal information (name and institution) will not be included during the interview; instead the researcher will assign a pseudonym for you and your institution. The information you provide on the survey and from the interview will be stored in password protected files and locked cabinets. The researcher will retain the data for 3 years following her Dissertation Defense, after which time the researcher will dispose of your data by standard state-of-the-art methods for secure disposal. The data will not be made available to other researchers for other studies following the completion of this research study.

Note that there are some reasons why people other than the researchers may need to see the information you provided as part of the study. This includes organizations responsible for ensuring the research is conducted safely and properly, including Ferris State University.

CONTACT INFORMATION

The researcher conducting this study is Julie D’Agostino a doctoral student at Ferris State University. If you have any questions you may email her at dagostj@ferris.edu or call 847.925.6523 (office) or 847.682-5824 (cell). You may also contact her faculty advisor, Dr. Sandra Balkema (sandrabalkema@ferris.edu; 231-591-5631).

If you have any questions or concerns about your rights as a subject in this study, please contact: Ferris State University Institutional Review Board (IRB) for Human Participants, 1010 Campus Drive, FLITE 410G, Big Rapids, MI 49307, (231) 591-2553, IRB@ferris.edu.

SIGNATURES

Research Subject: I understand the information printed on this form. I understand that if I have more questions or concerns about the study or my participation as a research subject, I may contact the people listed above in the “Contact Information” section. I understand that I may make a copy of this form. I understand that if my ability to consent for myself changes, either I, or my legal representative may be asked to re-consent prior to my continued participation.

Signature of Subject: ___________________________ Date of Signature: ___________

Printed Name: ___________________________

Contact Information: email - __________________ phone - __________________
Principal Investigator (or Designee): I have given this research subject (or his/her legally authorized representative, if applicable) information about this study that I believe is accurate and complete. The subject has indicated that he or she understands the nature of the study and the risks and benefits of participating.

Printed Name: ___________________________ Title: ___________________________

Signature: ___________________________ Date of Signature: ________________
Interview Questions

The purpose of this study is to explore how newly hired directors of nursing programs are onboarded at Illinois community colleges.

1. Describe your transition into the role of director of nursing at your college and what you did to prepare for this role transition.

2. Does your job description reflect the duties and responsibilities of this position?
   If yes, how? If no, what is different?

3. Describe the overall onboarding process at your community college.
   Is it formal or informal?
   What type of onboarding do you think was most helpful?
   Where did you get most of your institutional support?

4. Discuss factors that supported your transition into this role.
   What do you think was the most helpful transitioning to this role?

5. Describe factors that acted as barriers as you transitioned into your new role.

6. Describe what would have been ideal in your onboarding into this role.

7. Describe how you became comfortable in your new role and how long did this take?

8. Did you have a mentor or coach to assist you with becoming comfortable with the role and expectations?
   • If yes, who was this individual and how were they selected to be your mentor? How did the mentoring process work?
   • If no, do you feel a mentor or coach would have been helpful in your transition? Why?

9. Do you feel your institution provided you ways to grow into the role of director of nursing?

10. Is there anything else you would like to add regarding being a new nursing program director of nursing?
APPENDIX D: IRB APPROVAL LETTER
Date: April 12, 2019

To: Sandra Balkema
From: Gregory Wellman, R.Ph., Ph.D., IRB Chair
Re: IRB Application for Review

The Ferris State University Institutional Review Board (IRB) has reviewed your application for using human subjects in the study, "Onboarding New Directors of Nursing Programs at Illinois Community Colleges" and determined that it does not meet the Federal Definition of research on human subjects, as defined by the Department of Health and Human Services or the Food and Drug Administration. This project does not meet the federal definition of research on human subjects because the methods section presents this project as a case study. This is supported by the fact that the goal is to gain onboarding information from three individuals in a very specific type of position. As such, this would be a real-world history and not classified as human subjects research. As such, approval by the Ferris IRB is not required for the proposed project.

This determination applies only to the activities described in the submission; it does not apply should changes be made. If changes are made and there are questions about whether these activities are research involving human subjects, submit a new request to the IRB for determination. This letter only applies to Ferris IRB Review; it is your responsibility to ensure all necessary institutional permissions are obtained and policies are met prior to beginning the project, such as documentation of institutional or department support. Note that quality improvement project findings may be published, but any findings presented or published should be clearly identified as part of a quality improvement initiative and not as research.

Your project will remain on file with the Ferris IRB for purposes of tracking research efforts at Ferris. Should you have any questions regarding the determination of this letter, please contact the IRB.

Regards,

Gregory Wellman, R.Ph., Ph.D., IRB Chair
Ferris State University Institutional Review Board
Office of Research and Sponsored Programs