

**Formal Orientation and Faculty Retention**

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### **Formal Orientation and Faculty Retention**

Nurse educators play a vital role in healthcare education. They teach students, nursing staff, and other healthcare professionals in various settings including hospitals, colleges, universities, and even private practices. Career opportunities for a nurse educator include academia, community-based healthcare organizations, public health nursing, and acute healthcare systems. The purpose of a nurse educator in a hospital setting is multifaceted and encompasses various responsibilities. Nurse educators play a crucial role in bridging the gap between theory and practice, ensuring the delivery of quality patient care, and fostering professional development among nurses. Nurse educators are responsible for orienting and precepting newly hired nurses or nurses transitioning to new clinical areas. They provide comprehensive orientation programs, ensuring that new nurses are familiarized with the hospital's policies, procedures, and practices. Nurse educators may also serve as preceptors, guiding and supporting nurses in their clinical practice. Finally, Nurse educators promote the integration of evidence-based practice (EBP) within the hospital. They stay updated on current research and evidence and collaborate with nurses to implement evidence-based interventions and improve patient outcomes. Due to staff shortages, nursing schools turned students away. In the year 2019, schools turned away approximately 80,407 qualified students from undergraduate and graduate programs. This was 68,000 more compared to the year 2014.

As the baby boomer generation ages and the increasing number of nurses retire, the nursing shortage is projected to worsen in these coming years further supporting the need to increase the number of nurse educators. The nursing shortage refers to a situation where there is a significant gap between the demand for nurses and the number of available nurses in the



workforce. Several factors contribute to the nursing shortage. One of the many challenges that nurse educators face is the lack of resources to produce an adequate formal orientation.

Formal orientation for nurses is a structured and organized process that introduces newly hired nurses to their roles, responsibilities, and the overall work environment of a healthcare institution. It is designed to ensure that nurses are equipped with the necessary knowledge, skills, and resources to provide safe and effective patient care.

### **Research Problem**

Nurse educators face several challenges due to the nursing shortage such as increased workload, competing for resources, and adapting curriculum. Nurse educators often encounter challenges related to the lack of resources when it comes to producing an adequate formal orientation for new nurses. A comprehensive and effective orientation program is crucial for ensuring that new nurses are properly prepared to provide safe and competent care to patients. Shortages of nurse educators and preceptors can significantly impact the quality of orientation programs. When there are not enough experienced nurses available to provide guidance and support to new nurses, the orientation process may be compromised. A formal orientation is essential to ensure that nurses have a solid foundation and are prepared to deliver high-quality care. It helps nurses integrate into the organization, develop confidence in their roles, and align their practice with institutional standards and best practices. Orientation also provides an opportunity for novice nurse educators to establish relationships and connections with colleagues, administrators, and support staff. These relationships can foster a sense of community, promote collaboration, and provide a support system, all of which contribute to job satisfaction and retention.



If nurse educators lack proper orientation, several potential consequences can arise, affecting their ability to perform their roles effectively and impacting the quality of nursing education. The quality of nursing education may suffer if nurse educators lack orientation. Ineffective teaching strategies, limited knowledge of best practices, and challenges in meeting accreditation standards can hinder students' learning experiences and their ability to acquire essential knowledge and skills.

### **Research Question**

This systematic review of the literature will seek to answer the following research question: Among novice nurse educators, does providing a formal orientation process increase faculty retention as compared to no formal orientation?

### **Purpose of Review**

Researching the impact of providing a formal orientation process on faculty retention compared to no formal orientation is important for several reasons. While there is no specific data or research available regarding the impact of a formal orientation process on faculty retention specifically among novice nurse educators, it is generally recognized that providing a formal orientation may contribute to higher retention rates across various professions. The same principles can likely apply to novice nurse educators as well. Conducting research allows us to gather empirical evidence and data on the effectiveness of a formal orientation process in improving faculty retention. It provides a basis for informed decision-making and helps institutions allocate resources effectively. Research may also help identify best practices and strategies that promote faculty retention. It allows us to determine the specific elements of a formal orientation process that have the most significant impact on retention, such as mentorship programs, onboarding activities, or ongoing support. While the benefits of orientation programs



are generally recognized, specific research focused on nurse educators' orientation and its impact on faculty retention is limited. Conducting research in this area fills an important knowledge gap and provides insights specific to nurse educators, helping tailor orientation programs to their unique needs and challenges.

### **Theoretical Framework**

The Novice to Expert theory, developed by Patricia Benner, is a well-known framework in nursing education and practice. Benner's theory proposes that individuals acquire nursing skills and knowledge through a series of five stages: novice, advanced beginner, competent, proficient, and expert.

According to Benner, novices are beginners who have limited knowledge and rely on rules and guidelines to perform tasks. They lack experience and struggle to interpret and prioritize information effectively. As novices gain experience, they progress to the advanced beginner stage, where they start recognizing patterns and develop some basic clinical judgment skills. As nurses gain more experience and move into the competent stage, they become more efficient and organized in their practice. They can anticipate situations and apply their knowledge and skills to patient care. In the next stage, proficient nurses demonstrate a deeper understanding of patient care and can quickly identify and respond to complex situations. Proficient nurses rely less on rules and guidelines and more on intuition and tacit knowledge. The final stage of Benner's theory is the expert stage. Experts have extensive experience and intuition, allowing them to make quick and accurate clinical judgments. They have an intuitive grasp of complex patient situations and can easily adapt their practice. Experts can also serve as mentors and role models for less experienced nurses.



Benner's theory emphasizes the importance of experience and reflection in the development of nursing expertise. It suggests that experience is the key factor in becoming a proficient or expert nurse rather than simply the passage of time. The Novice to Expert theory provides a valuable framework for understanding the development of nursing skills and expertise over time, recognizing the role of experience and reflection in nursing practice. A formal orientation program is valuable for new nurses and experienced nurses transitioning to new clinical settings. It ensures a smooth integration into the new work environment, enhances patient safety, and promotes quality care delivery.

In conclusion, while experience is a fundamental aspect of nursing expertise, a formal orientation program complements Patricia Benner's Novice to Expert theory by providing structured learning opportunities and support for nurses at various stages of their development. A well-planned orientation helps nurses transition through the stages more effectively and prepares them for ongoing professional growth and the attainment of nursing expertise.

### **Literature Review**

As an ongoing phenomenon, nurse shortages were not so often as in recent decades of healthcare. Nursing shortages have been a workforce issue globally in healthcare systems. Although there is not much specific research between faculty retention in nurse educator faculty retention and formal orientation programs, other research support evidence of orientations, onboarding, or training effectiveness in faculty retention in the nursing workforce. Blass et al. (2023) research successfully assessed the differences in effectiveness between nurse educators and training programs for new graduate nurses in the intensive care unit (ICU). They compared Nursing Educator-led Programs versus Clinical Coach-Led Programs. Although both the nurse educator role and clinical coach role have similarities, there are distinct differences. They both



set learning goals in clinical teaching and have an ongoing collaboration with supervisors. But the role difference between a clinical coach role compared to a nurse educator role is that a clinical coach has the clinical oversight of the nurse, selects appropriate patients, uses the technical application of skills, and gives daily feedback to students. The nurse educator's role assures competency assessments, gives formal lectures, provides formal remediation, and arranges a formal evaluation. Although the Nurse Educator-Led programs did not have an overall best rating over the Clinical Coach-Led programs, the nursing turnover rate is a significant difference. The comparison in turnover rate between Nursing Educators and Clinical Coaches was much less. The turnover rate for Nursing Educator-led programs was 8.08% while Clinical Coach-led programs had a turnover rate of 15.97%, which is a 7.9% difference. With this lower turnover rate, it concludes that nurse educators demonstrate an advantage in nurse retention and job satisfaction. It also supports a stable nursing workforce through nurse educators through their expertise and guidance in these onboarding programs. Job satisfaction does play a factor in nurse retention which in return helps nurses feel supported, valued, and have access to educational resources.

Newly graduated nurses also play a role in nurse turnover rates. Newly graduated nurses often lack experience and skills. With proper education and training, the transition from a controlled environment of nursing school to a real-world healthcare setting can still be difficult. Kim & Shin, (2020) research explores the barriers and facilitators for a successful transition in new graduate nurses. This convergent mixed methods design used both quantitative research and qualitative research. The quantitative research used a cross-sectional study while the qualitative research used a focus group interview design. One of the facilitators that this study found was that a phased and continuous transition program was needed. Most of the participants agreed that



hospital organizations should provide an orientation program for a successful transition from student to nurse competency level. The implication for nursing education from this research is that the transition period between six to twelve months of practice is the most sensitive and vulnerable time to commit to or leave the profession. Nursing educators play a vital role in helping newly graduated nurses develop skills to increase their competency levels in this transition period. Insufficient skill development may lead to an increase in nurse turnover, especially in this transition period.

As hospitals provide an orientation program for new nurses, it fails to address the crucial aspects of the organization. Lalithabai et al., (2021) research study reveals that overall competency in newly employed nurses was high after nurses participated in an orientation program. But although competency was sought to be improved, the topics and teaching strategies that were provided did not satisfy all the nurses who participated in this research study. The participants suggested using various teaching strategies and providing the content before the presentation should help build a passion for discussion and learning. Also, the selection of presenters should be based on specific criteria, and training for them should be conducted in lighting up their presentation and communication skills. In conclusion, formal orientation may not be sufficient if the organization of the program does not have any quality teaching and educational content. Simply providing a basic orientation without any meaningful education content may not prepare new nurses. The result of this research study conducted improvement to these orientations such as including case-based exercises to bring a balance between taught and self-directed elements. The participants that were a part of the orientation program require different delivery approaches; the lack of a structured transition program contributes to nursing dissatisfaction and increases turnover. A well-organized orientation should include teaching



strategies, a support system, and evaluation methods in maintaining engagement and creating a positive experience for new nurses.

Nurse educators and preceptors play a vital role in the orientation programs in which newly graduated nurses are expected to be competent. In Lindfors et al., (2022) research study, their objective was to see the effectiveness of an education intervention towards preceptors in new graduate nurses' competence development. The intervention for the preceptors was an eight-hour clinical education session about new employee orientation focusing on their viewpoint. The educational intervention included lectures, discussion exercises, and moments. The impact of the intervention resulted in no statistically significant difference compared to a group of preceptors with no education intervention. Although the study showed no impact on the intervention of the preceptors, the results of the research provided information that is worth mentioning. This study showed insight into how new graduate nurses may feel the most vulnerable. It also showed where they needed more practice and support to become more competent. Rather than focusing on educational development, it is to show that there is a need for the development of practice programs and support systems for new graduate nurses to improve turnover and faculty retention. When developing a well-organized orientation, it is required for nurse educators to be persistent in providing an effective transition to prepare new graduate nurses and develop a higher competency level in the clinical setting. Tufano et al., (2023) qualitative study outlines motivators for nurse educators to persist in their profession. The two significant motivators factors that influence motivation are intrinsic and extrinsic motivators. The self-determination theory mainly defines the intrinsic motivators which is doing something because it is interesting or enjoyable. An earlier qualitative study found that the attributes influencing the desire to remain in the nurse educator profession would be service to the profession and personal



satisfaction. The self-determination theory would describe extrinsic motivation which explains that they are doing it because it leads to separable outcomes. Extrinsic motivators such as pressures or rewards are examples of which can be self-endorsed with attitudes of willingness. This reflects inner acceptance or value of the task according to the self-determination theory. It was found through this research that nurse educators experienced more intrinsic than extrinsic motivators regarding their persistence in their profession. Although this study does not directly reflect on nurse educator retention, it does reflect certain aspects of the profession and why nurse educators leave the profession. This research, in return, highlights the acknowledgment of applying motivators that encourage nurse educators to persist in the field. The understanding and implementation of the strategies for the persistence of nurse educators to build on may improve nurse educator retention and recruitment.

The effects of mentoring education on nurse mentors' competence during clinical practice can be challenging, especially for students. Tuomikoski et al., (2020) research highlights how an educational intervention affects nurse mentors' competence in mentoring students during clinical practice. As nurses need to improve their clinical mentoring skills and need more support for mentoring students, educational interventions were applied in a university hospital and two central hospitals in Finland. As the educational interventions were conducted twice per year, the mentoring education aimed to strengthen mentors' competence and improve the quality of mentoring by applying a theoretical framework for the education intervention. The results showed that overall competence significantly increased in all areas of mentor characteristics which include mentor motivation and reflection. This indicates that participation in mentoring education increases mentors' self-evaluation of mentoring competence. Though this study did not show any evidence of staffing retention in the nursing workforce, nor does it specify any



reflection on nurse educators, the study results do show how effective an education intervention would be at improving competency. When preparing nurses for the clinical setting, nurse educators must conduct an effective well-organized orientation, very similar to an educational intervention of some sort that was conducted by Tuomikoski et al., (2020) research.

### **Compare and Contrast**

There are similarities between Lalithabai et al., (2021) research and Tufano et al., (2023) research study in which they both use qualitative analysis and quantitative evaluation. What makes Tufano et al., (2023) research from Lalithabai et al., (2021) is that Tufano et al., (2023) uses a phenomenological qualitative study design. This approach investigates the everyday experience of human beings with the researchers' preconceived assumption about the phenomenon, in which Tufano et al. uncovered a further understanding of intrinsic factors that persist with nursing education practices.

Tuomikoski et al., (2020) research study used the same research design as Lindfors et al., (2022) in which they both are quasi-experimental studies but remain different in data collection.

Tuomikoski et al., (2020) quasi-experimental study design used a pretest-posttest design with a nonequivalent control group. Lindfors et al., (2022) quasi-experimental design used a longitudinal intervention design after a three-month period compared to a nine-month period using a Nurse Competence Scale.

Kim & Shin, (2020) used both a quantitative research design and a qualitative research design. The quantitative research used a cross-sectional study while the qualitative research used a focus group interview design. The qualitative study was to find significant factors affecting transition which include self-efficacy, job satisfaction, nursing stress, and structural empowerment. The qualitative findings resulted in identifying the barriers and facilitators of a



successful transition. They found that the barriers were fears, excessive role expectations, workload, and emotional difficulties and the facilitators were self-confidence, interaction with colleagues, positive & supportive work environments, and most importantly a phase transition program.

Blass et al., (2023) research approach was a descriptive study in which they compared two groups of participants with the results that include program pass rates, satisfaction, preparedness, turnovers, and competency.

### **Strengths and Weaknesses**

Lalithabai et al., (2021) and Tufano et al., (2023) research both provide a more detailed understanding of their complex issues when using a qualitative study design and they both use multiple methods for gathering data in their respective subjects. On the other hand, both studies did use a small sample size of participants.

The advantage that Tuomikoski et al., (2020) has over Lindfors et al., (2022) research is that the pretest-posttest design that Tuomikoski et al., (2020) has multiple data points that models more information than just a posttest-only design. Lindfors et al., (2022) longitudinal study design involves having the same variables over a period, which has its advantages in its own way but seemingly did not produce any significant impact on its participants. Data collection could have been done differently with Lindfors et al., (2022) research but does not seem to have any effect on the participants but could have potentially shown a significant difference between both groups.

The in-depth view of the requirement of substantial clinical training that Blass et al., (2023) is an advantage of what a descriptive study design has to offer. However, its sampling may not reflect the actual scene in which both educator-lead and clinical coach-led models did



not show any statistical significance between two and did not identify any measurement of effectiveness from each other.

Kim & Shin, (2020) use of both quantitative and qualitative research design made it difficult to identify any gaps or weaknesses in its study. Data collection was sufficient in finding both barriers and facilitators of new graduate nurses' successful transition into the clinical setting. The use of both research designs targeted their aim to explore the barriers to and facilitators of the successful transition.

### **Conclusion**

Faculty retention is crucial for the stability and success of educational institutions, and orientation programs play a vital role in supporting faculty retention efforts. By providing new faculty members with effective onboarding, professional development opportunities, and a sense of belonging, orientation programs contribute to faculty satisfaction, teaching effectiveness, and long-term engagement within the institution. A well-designed orientation program helps adjunct clinical faculty members feel welcomed and integrated into the nursing education institution. By providing information about the institution's culture, values, and mission, and facilitating connections with colleagues and key stakeholders, orientation fosters a sense of belonging and affiliation. Orientation helps set clear expectations regarding faculty roles, responsibilities, and performance criteria. When faculty members understand their roles and expectations, they can effectively align their efforts with institutional goals and priorities. This clarity reduces ambiguity and enhances job satisfaction and retention. By investing in comprehensive and supportive orientation programs, nursing education institutions can demonstrate their commitment to the professional growth and satisfaction of adjunct clinical faculty. These efforts



contribute to building strong relationships within the workplace, fostering a sense of community, and ultimately increasing faculty retention rates.



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