Hiring Intentions of Directors of Nursing Programs Related to DNP- and PhD-Prepared Faculty and Roles of Faculty☆,☆☆

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This study surveyed administrators of associate degree in nursing (ADN) and bachelor of science in nursing (BSN) programs across the United States to identify hiring intentions and describe the roles and responsibilities of DNP- and PhD-prepared faculty members. The final sample included 253 ADN and 229 BSN programs. ADN programs were neither intentionally hiring nor looking to hire doctorally prepared nurse faculty. Deans and directors of BSN programs reported an average of 3 openings for the next academic year, 2 projected for new PhD-prepared faculty and 1 for a faculty member with a DNP. Schools have made varying decisions regarding the type of appointment (tenure or nontenure track) for DNP-prepared faculty members. Challenges that DNP-prepared faculty members encountered in meeting the role and promotion expectations in their schools focused predominantly on scholarship. (Index words: Doctor of nursing practice; Doctor of philosophy; Nursing education; Nursing faculty; Roles) J Prof Nurs 0:1–7, 2015. © 2015 Elsevier Inc. All rights reserved.

The nurse faculty shortage continues to impede the ability of schools of nursing to increase student enrollment to meet the current and future demand for registered nurses. Schools of nursing in the United States (US) are unable to accept many of the qualified applicants to their baccalaureate and graduate programs because of a lack of faculty, clinical practice sites and preceptors, space, and funding (American Association of Colleges of Nursing [AACN], 2014a). Among these reasons, the faculty shortage is the main factor that inhibits schools from accepting more students into their prelicensure programs (AACN, 2014a; National Advisory Council on Nurse Education and Practice, 2010).

In addition to the need for more faculty to meet student demand, there is a limited pool of doctorally prepared nurse educators, a problem anticipated to worsen with projected faculty retirements in the next few years (AACN, 2014a). A recent survey on vacant faculty positions found that most of the vacancies (57.5%) were for faculty with doctoral degrees (AACN, 2014b). Schools reported that the main issues related to faculty recruitment were the limited pool of doctorally prepared faculty (68.2%), finding faculty with the specialty they needed (63.0%), and noncompetitive salaries compared with positions in the practice setting (59.7%; AACN, 2014b). Those doctorally prepared nurses in short supply have been primarily doctor of philosophy (PhD)-prepared faculty members (AACN, 2014a), educated in a research-based degree program, who are generally expected to maintain a strong research role while also teaching and providing service to their institution and the wider profession (Chase & Pruitt, 2006).

Although the advent of the practice doctorate in nursing has its roots in the early 1970s (Chase & Pruitt, 2006), it was the AACN position statement of 2004 that created the

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☆This study was funded by a grant from the Robert Wood Johnson Foundation Evaluating Innovations in Nursing Education #70185.
☆☆The authors declare no conflict of interest.

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emphasis for the growth in doctor of nursing practice (DNP) degree programs in the US (AACN, 2014c). While the projected need for the practice doctorate in nursing was having a better educated nurse practitioner to address the myriad of patient safety needs, as these programs have developed, the definition of practice in some programs has been extended to include education and nursing administration/systems. In addition, one of the employment settings of DNP graduates is schools of nursing (Chism, 2010). Despite the rationale for and foreseen employment of nurses with practice doctorates being clinical practice, they have sought roles as nurse educators.

In recent years, the number of DNP graduates and programs has continued to grow. From 2012 to 2013, the number of students enrolled in DNP programs increased from 11,575 to 14,688. During that same period, there were nearly 2,500 graduates of DNP programs (AACN, 2014c). In 2014, there were 243 DNP programs across the US with an additional 59 in the planning stages (AACN, 2014c). This growth is even more phenomenal when compared with the 131 research-focused nursing doctoral programs in the US (AACN, 2013). Although there has been an increase in student enrollment, the number of graduates does not meet current demands for nursing faculty. Nurses with PhD degrees are needed to conduct research and develop the science of nursing and nursing education (Broome, 2012; Smeltzer et al., 2014). As noted earlier, the need for additional PhD-prepared nurse faculty is further exacerbated by the projected retirements of faculty.

Little is known about the perspectives of deans and directors of nursing programs related to the hiring of DNP-versus PhD-prepared graduates. While there seems to be consensus that increases in DNP graduates will likely expand teaching capacity, particularly with respect to clinical teaching, several concerns exist related to integrating these nurses as faculty in nursing programs (Edwardson, 2010). The key concerns include potential conflict between DNP and PhD faculty as a result of status differentials, concerns about academic rigor in newly emerging DNP programs, and diminishing research activity in nursing if DNP-prepared faculty are hired rather than PhD-prepared faculty (Agger, Oermann, & Lynn, 2014; Dreher, Glasgow, Cornelius, & Bhattacharya, 2012; Edwardson, 2010).

Graduates of both DNP and PhD in nursing programs who choose academic careers need to be prepared for their role as educators (Agger et al., 2014; Minnick, Norman, & Donaghhey, 2013). This includes essential knowledge and competencies for teaching in nursing and an understanding of the academic nurse educator role (Frank, 2015).

Purpose

The specific aims of this study were to (a) examine nursing program administrators’ hiring intentions regarding DNP and PhD graduates, (b) describe the roles and responsibilities of DNP- and PhD-prepared faculty members, and (c) explore administrators’ perspectives in regard to DNP- and PhD-prepared faculty fulfilling their responsibilities as faculty members.

Methods

Design and Sample

Administrators of associate degree in nursing (ADN) and baccalaureate and higher degree (bachelor of science in nursing [BSN]) programs across the US were surveyed to identify their hiring intentions and describe the roles and responsibilities of DNP- and PhD-prepared faculty in their schools of nursing. The sampling frame for this survey included the AACN member schools and ADN programs listed by the National League for Nursing Accrediting Commission. The survey was sent to a stratified random sample of the total sampling frame with the strata dictated by percentage of programs of each type of preparation (degree offered), program size, geographic location, and ownership (public vs. private). The final sample included 253 ADN programs, 554, for a response rate of 45.7%, and 229 BSN programs out of a possible 455, response rate of 50.3%. Only surveys that were at least 90% complete were included in the data analysis. The institutional review boards of the authors’ universities approved the study.

Instrument

The survey instrument was developed based on current literature concerning the hiring and utilization of DNP and PhD faculty members and intensive interviews with deans and directors of ADN, BSN, and graduate nursing programs across the US. Fifteen deans and directors were interviewed, including seven from ADN and eight from BSN programs. The interviews were recorded, transcribed, and analyzed by the investigators to identify key themes related to factors influencing intentions to hire doctorally prepared faculty, roles and responsibilities of DNP- and PhD-prepared faculty members, and perspectives and experiences related to doctoral faculty members fulfilling their responsibilities in the school (Agger et al., 2014). The survey was pre- and pilot tested for clarity, usability, and comprehensiveness and revised.

The survey collected background information on the school of nursing, programs, faculty, and students. Other sections collected information about intended hiring preferences, roles and responsibilities of DNP- and PhD-prepared faculty (such as teaching, research, service, etc.), appointments, and preparation for the faculty role. About a quarter of the items allowed for the respondent to explain an earlier answer, with the text responses categorized for ease in analysis. For example, for the item Do you have any practices or strategies in place in your school/department of nursing to advance the education of your faculty, the response options were yes and no. A text box that followed allowed respondents to explain their practices or strategies. Some of the categories derived from this item were financial assistance, workload release, mentoring/faculty development program, having a culture of advanced faculty education, and being affiliated with a doctoral degree-granting university.
Procedure and Data Analysis
Deans and directors were invited to participate in the on-line survey via a letter followed by an e-mail. If they agreed to participate in the survey, they were e-mailed a link to the instrument by a survey company, which oversaw the programming and administration of the on-line survey. Nonresponders were followed up by telephone calls. Data were analyzed with descriptive statistics using IBM SPSS 22.0 (IBM Corp, Armonk, New York).

Results
Most of the ADN program respondents were directors (n = 128, 52.2%) of the program. Among the BSN programs, respondents included deans, directors, and chairs (Table 1). The majority of ADN programs were located in rural areas (n = 44, 44.9%) compared with BSN programs, where half were located in urban settings (n = 103, 50%; Table 1). All areas of the US were represented, and most programs were housed in public institutions. Degrees offered by ADN and BSN programs are indicated in Table 1. A number of the ADN programs offered BSN degrees (n = 36), and three of those programs were accelerated BSN tracks. Two thirds of the ADN programs (n = 160, 66.4%) had partnerships with BSN programs.

The mean number of faculty in ADN programs was 18.2 (Standard Deviation [SD] = 15.8). Across ADN programs, there was an average of one DNP- and one PhD-prepared faculty member in the school. In BSN programs, there was a mean of 42.3 (SD = 72.0) faculty members/school. More than a third (37.9%) of those schools currently had faculty members with DNP degrees; 32.9% had their DNP when hired, and 41.2% received their degree while a faculty member in the school. Table 1 reports the mean number of students in surveyed programs.

Table 1. Selected Demographic Characteristics of Schools of Nursing

<table>
<thead>
<tr>
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<th>ADN</th>
<th>BSN</th>
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<tr>
<td><strong>Number of students</strong></td>
<td>Mean (SD)</td>
<td>Mean (SD)</td>
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<tr>
<td>ADN/AS</td>
<td>163.1 (119.6)</td>
<td>213.0 (256.9)</td>
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<tr>
<td>BSN</td>
<td>136.0 (167.0)</td>
<td>297.0 (249.3)</td>
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<tr>
<td>MSN</td>
<td>170.2 (221.9)</td>
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<tr>
<td>DNP</td>
<td>56.4 (60.5)</td>
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<tr>
<td>PhD</td>
<td>35.1 (20.9)</td>
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AS, Associate of Science. MSN, Master of Science in Nursing.
location combined with noncompetitive pay were the primary barriers to faculty recruitment. There were no differences in barriers for recruiting DNP- and PhD-prepared faculty.

Roles of DNP- and PhD-Prepared Nurse Faculty

Deans and directors reported on the roles of DNP- and PhD-prepared faculty in their schools of nursing. Faculty with DNPs taught at all program levels except in the PhD program. They taught in the classroom, on-line environment, and clinical setting (Table 2). They also coordinated courses (n = 116, 63.9%) and advised students on their capstone and similar types of scholarly projects (n = 91, 51.7%).

In the majority of the schools, DNP-prepared faculty did not conduct original research, involving the generation of new knowledge, or disseminate the findings of such studies. They also were not expected to write grants (Table 2). Some schools of nursing had no expectations for scholarship for DNP-prepared faculty (n = 29, 17.8%); however, in others, there was an expectation for some research and scholarship but not to the same degree as for faculty with PhDs (n = 69, 42.3%). In other schools, the expectations were the same for both DNP- and PhD-prepared faculty (n = 65, 39.9%). Faculty with DNPs served on university-wide, school/departmental, and professional committees (Table 2).

Slightly more than half (52%) of the respondents indicated that their schools differentiated master's- and DNP-prepared faculty roles. The main difference was that faculty with DNPs were more likely to have some scholarship responsibilities, teach at the graduate level, and advise students on their scholarly projects compared with faculty with master's degrees. Deans and directors reported that having a DNP increased faculty opportunities to teach at the graduate level (n = 60, 71.4%) and advise students on their projects (n = 48, 57.1%). In the other schools, however, master's- and DNP-prepared faculty roles did not differ.

Faculty members with PhDs taught at all program levels including the PhD program, if the school offered one. This included teaching in the classroom, on-line, and in the clinical setting (Table 2). In comparison to DNP-prepared faculty, more of the faculty with PhDs coordinated courses (n = 152, 87.4%) and advised students on their research and scholarly projects (n = 145, 83.3%). Faculty with PhDs conducted research (n = 129, 74.1%), disseminated research findings (n = 132, 75.9%), and wrote grants (n = 112, 64.4%). Although faculty with DNPs served on committees at all levels, more of the PhD-prepared faculty assumed these responsibilities in the school (Table 2). Faculty members with PhDs also served on research advisory committees (e.g., dissertation, thesis, capstone, and other research projects) as members (n = 133, 91.7%) and as chairs (n = 135, 93.1%).

Appointment Types

In terms of faculty rank, schools have made varying decisions regarding the type of appointment (tenure or nontenure track) for DNP-prepared faculty members. In one third of the schools, the type of appointment depended on the qualifications of the faculty member (n = 62, 36.7%). In other schools, DNP-prepared faculty were appointed to tenure track or nontenure track (Table 3). Similar to the appointment of faculty with DNPs, the majority of decisions about the type of appointment for PhD-prepared faculty members depended on their qualifications (n = 85, 50.3%), or they were appointed to the tenure track (n = 75, 44.4%). If DNP- and PhD-prepared faculty members were on the same track, 113 (66.9%) administrators reported that teaching responsibilities did not differ. In general, faculty with DNPs taught more clinical courses compared with faculty with PhDs.

Because of the increase in the number of DNP-prepared nurses, many schools were reorganizing the work and roles of their faculty. The most common trends were DNP-prepared faculty members teaching courses at the graduate level and in DNP programs. Across schools, there have been few instances of DNP-prepared faculty not being accepted in the school. Of those administrators who reported issues between their PhD- and DNP-prepared faculty members (n = 35, 22%), 13 indicated that faculty with DNPs were not respected by faculty with PhDs.

<table>
<thead>
<tr>
<th>Table 2. Roles of DNP- and PhD-Prepared Nurse Faculty</th>
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<tbody>
<tr>
<td>Roles</td>
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<tr>
<td>Teaching:</td>
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<tr>
<td>In classroom</td>
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<tr>
<td>On-line</td>
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<tr>
<td>In clinical setting</td>
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<tr>
<td>Course coordination</td>
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<tr>
<td>Advising students on research and projects</td>
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<tr>
<td>Conducting research</td>
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<td>Disseminating research</td>
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<tr>
<td>Writing grants</td>
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<tr>
<td>Serving on university committees</td>
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<td>Serving on school/department committees</td>
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<td>Serving on committees in professional organizations</td>
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Considering the size of the sample, this is a small number of acceptance issues.

**Preparation for Faculty Role**

Most deans and directors believed that faculty with DNPs were prepared for their roles as educators \((n = 122, 76.7\%)\). Challenges that DNP-prepared faculty members encountered in their schools of nursing included meeting the scholarship expectations for promotion \((n = 41, 26.8\%)\) and teaching requirements \((n = 27, 17.6\%)\).

In comparison, nearly all \((n = 164, 97\%)\) of the deans reported that faculty with PhDs were adequately prepared for their roles. Some of those faculty members encountered the same challenges as educators prepared with DNPs (meeting scholarship and teaching expectations), and in addition, they experienced difficulty balancing their roles and responsibilities \((n = 29, 20\%)\). Only nine schools expected faculty members to have completed postdoctoral training.

Nearly all \((n = 163, 98.2\%)\) of the respondents considered PhD-prepared faculty as meeting the full expectations of a faculty member in their school of nursing and university. The majority \((n = 129, 84.9\%)\) also believed that faculty with DNPs met the expectations of a nursing faculty member—the one area lacking was scholarship. Across all schools, 43% of the master’s-prepared faculty were pursuing doctoral degrees, almost evenly divided between in-person and online programs.

**Faculty Retention**

Almost half of the administrators experienced difficulty retaining doctorally prepared faculty, citing low salaries as the main issue. Faculty members with DNPs were more likely to leave their positions because of concerns about salary and workload, which included balancing their teaching with a clinical practice and keeping up to date with certification and other practice requirements, than other reasons. In ADN programs, a mean of 5.91 \((SD = 9.0)\) faculty members held a clinical position or maintained an active practice; among BSN programs, the mean was slightly higher \((6.55, SD = 8.1)\).

**Discussion**

Across baccalaureate and higher degree programs, current and future preferences for hiring are targeted predominantly at PhD-prepared faculty. This hiring pattern is the result of an expansion of programs combined with faculty retirements. Although administrators reported an average of only one opening in their school for DNP-prepared faculty members for the next academic year \((2015–2016)\), they anticipated hiring a larger-than-average number of these faculty in the future because of adding a DNP program to their offerings. The impact of adding or expanding a DNP program in a school that also offers a PhD program may lead to shifts in work of PhD-prepared nursing faculty, who may become diverted from mentoring PhD students and teaching PhD courses to the DNP program \((Cronenwett et al., 2011; Minnick et al., 2013)\). With projected retirements of nursing faculty with PhDs, schools need to continue to hire faculty who can teach at the PhD level and conduct rigorous research, essential for increasing the scientific base of nursing \((Broome, 2012; Smeltzer et al., 2014)\).

With the rapid expansion in the number of DNP programs and graduates, there may be problems in the employment market for DNP-prepared graduates interested in academic positions. Openings for doctorally prepared faculty are not likely to be available at the ADN level, although this might change if more community colleges offer BSN programs in the future \((Russell, 2010)\). Deans and directors of BSN programs anticipated hiring more DNP faculty in the future, but considering funding issues for many schools, this hiring may not occur in proportion to the number of nurses with DNPs seeking faculty positions. DNP students who enroll in nurse faculty support-for-service programs to cover the costs of their education, in exchange for a service commitment as a faculty member, which is often full-time employment in a school of nursing for a set number of years, may find it increasingly difficult to secure a full-time position \((Morgan et al., 2014)\). Further study is needed to better understand the employment opportunities for DNP graduates in schools of nursing.

The majority of schools of nursing continue to experience a faculty shortage. Deans and directors in the current study reported that geographic location and noncompetitive pay were the main reasons they had difficulty recruiting doctorally prepared faculty. Schools also have problems retaining faculty because of low salaries. Retention is particularly a problem with faculty members who have DNPs and are also nurse practitioners; in this study, they were more likely than other faculty to leave their positions because of low faculty salaries and a demanding workload. The survey did not explore how many faculty members with DNPs had a joint appointment or sought one, which would facilitate maintaining their certification. The relationship of faculty practice to retention of nurse practitioner faculty should be examined in future studies. As faculty salaries are not competitive with salaries of nurses in clinical positions, it will continue to be difficult to encourage nurses to pursue...
academic careers (Evans, 2013; Morgan et al., 2014; Nardi & Gyurko, 2013).

In terms of teaching, there were similarities in the roles and responsibilities of faculty with DNsPs and PhDs. Both taught in the classroom, on-line, and in the clinical setting, coordinated courses, and advised students on their scholarly projects. However, PhD-prepared faculty members were more involved with course coordination and advising students on their research. While both groups of faculty participated on university-wide, school/departmental, and professional committees, in more than 92% of the schools, PhD-prepared faculty carried these responsibilities. This finding combined with the critical role of faculty with PhDs to conduct research underscores the importance of schools making careful decisions about hiring faculty who can enable the school to achieve its mission.

Although the DNP was not developed as a means to prepare nurse educators, over 30% of DNP graduates teach in schools of nursing and are increasingly needed to teach in DNP programs (National Advisory Council on Nurse Education and Practice, 2010; Smeltzer et al., 2014). In our survey, most of the deans and directors believed that their faculty with DNsPs were adequately prepared for their roles as educators. However, we did not investigate the teaching experiences of DNP-prepared faculty, whether they received their DNP while currently serving as a faculty member or whether they completed nursing education courses as DNP students. Future research should explore the teaching preparation and experiences of DNP-prepared faculty.

DNP graduates are expected to contribute to nursing knowledge through studies testing the effectiveness of interventions and practice approaches that improve patient care and the health care system (Broome, Riner, & Allam, 2013). In many schools, faculty with DNsPs were not expected to conduct original research, publish, or write grants. Other schools expected some scholarship among DNP-prepared faculty. Minnick et al. (2013) suggested that DNP programs may not be developing students' scholarly skills to the extent needed given that most programs in their study required limited scholarly activities of students. In a school that expects all faculty members to engage in scholarship, DNP educators will be at a disadvantage in terms of promotion and career advancement if they lack these skills.

One final note about the survey is in the area of the faculty research role. We neither made assumptions about nor defined the nature of research relevant for faculty with DNP or PhD preparation, rather allowing the respondents to do so within their institution's definitions and expectations. In turn, the respondents did not differentiate between the types of research or scholarship expected of faculty with different doctoral degrees or types of appointment (clinical/ fixed-term track vs. tenure track). It is not clear if this was because we did not ask for further clarification or because the decision about relevance of a research/scholarship approach or orientation (such as generation of new knowledge from original data, generation of new knowledge from secondary analysis, evidence-based practice projects, scholarship of teaching, and others) is individual and depends on the institution's expectations of faculty in general. Accordingly, we cannot speculate about types of scholarship deemed appropriate for faculty with either doctoral preparation.

Schools varied in whether they appointed faculty with DNsPs to the tenure track. In more than one third of the schools in our survey, faculty with DNsPs were appointed to either the tenure or nontenure track depending on their individual qualifications; in 25% of the schools, DNP-prepared faculty were appointed to the tenure track. Many schools of nursing are still developing their appointment, promotion, and tenure guidelines to reflect the types of scholarly productivity appropriate for faculty with DNsPs. Tenure and promotion guidelines need to acknowledge the many types of scholarship in which a faculty member can engage and recognize funding other than National Institutes of Health grants (Oermann, 2014; Smeltzer et al., 2014). This might be easier to accomplish in schools that have implemented Boyer's model and recognize multiple types of scholarship (Boyer, 1990), but across schools, this discussion is critical to align preparation of faculty with performance expectations and promotion criteria.

Our respondents reported that the challenges that DNP-prepared faculty members encountered in meeting the role and promotion expectations in their schools of nursing focused predominantly on scholarship. PhD-prepared faculty were reported to face those same challenges but also experienced difficulty balancing their roles and responsibilities. Thus, mentorship programs geared toward guiding DNP faculty members on their scholarship and targeted efforts at helping PhD-prepared faculty to balance their research and teaching responsibilities would help nursing faculty meet their full potential.

Summary

This study documented the current and future hiring intentions of deans and directors of schools of nursing. Across baccalaureate and higher degree programs, administrators reported that they intended to hire more PhD-prepared faculty compared with DNP-prepared faculty. However, they anticipated hiring a larger-than-average number of faculty with DNsPs in the future when they opened a DNP program. Deans and directors reported that geographic location and noncompetitive pay were the main reasons they had difficulty recruiting doctorally prepared faculty, and low pay also affected retention of faculty particularly those who were nurse practitioners. In terms of teaching, there were similarities in the roles and responsibilities of faculty with DNsPs and PhDs. Both taught in the classroom, on-line, and in the clinical setting, coordinated courses, and advised students on their scholarly projects. Both groups of faculty participated on university-wide, school/departmental, and professional committees. Schools varied in whether they appointed faculty with DNsPs to the tenure track. Schools of nursing need to establish the types of scholarly productivity appropriate for faculty with DNsPs and ensure that performance guidelines reflect those.
References


