# Mentoring Licensed Practical Nursing Students to Decrease Attrition

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A shortage of licensed nurses is a primary concern due to projected health care needs in the United States (American Association of Colleges of Nursing, 2019). Nursing educational institutions have made great strides to meet the growing demand for nursing professionals (Farahani et al., 2017). However, the number of additional nurses needed throughout the nation and in Oklahoma continues to rise (Wells et al., 2018). The purpose of this paper is to address an approach to meet this burgeoning need.

### Context

An increase of 4% of licensed practical nurses (LPNs) and 6% of registered nurses (RNs) is needed over the next five years to meet Oklahoma's needs (Wells et al., 2018). Rural counties that tend to be medically underserved areas may have an even greater requisite (Oklahoma State Department of Health, 2015). The national anticipated demand for RNs is expected to grow 3% annually for the next 10-15 years as Baby Boomers age and advances in research and technology expand (Shelton, 2012). Thus, an exacerbation of a shortage of licensed nurses in Oklahoma is expected.

Preventing the attrition of LPN students may increase available nurses in the workforce and relieve the nursing shortage. Hoeve et al. (2017) define attrition as the difference between the number of nursing students beginning in a program and the number who graduate. LPNs are typically not included in strategies to relieve the nursing shortage; however, the potential exists with this cohort (Stickney, 2008). Opportunities are present to further education through bridge programs, including LPN to RN or LPN to Bachelor of Science in Nursing (BSN) curricula. LPNs can also meet healthcare needs by functioning in a team nursing approach, serving in nursing homes, and providing needed residential health care (Stickney, 2008).

## **Literature Review**

A literature review was conducted using The Cumulative Index to Nursing and Allied Health Literature (CINAHL) database to determine contributing factors for attrition and effective academic remediation programs aimed at increasing retention of practical nursing students. Search terms were attrition, retention, practical nursing student, academic remediation program, and mentorship. Inclusion criteria consisted of peer-reviewed, full-text articles in the English language published between 2010-2020. The search was expanded to include Associate Degree Nursing (ADN) and BSN programs due to limited literature specific to practical nursing programs.

Excluded from the review were duplicate entries, works that focused on graduate students, failed to address possible solutions to increase retention or neglected to emphasize retention of nursing students at risk of departure. A total of 75 journal articles were obtained; 57 were excluded for one of the aforementioned reasons. One article by Tinto (1975) was included in the review

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due to the significance of Tinto's contribution to the theory of student retention. A total of 19 articles were reviewed for evidence, validity, and reliability for nursing programs to address specific methods to decrease attrition in undergraduate nursing programs.

### **Current Professional Trends**

Coaching or mentoring by faculty was one persistent evidence-based response that emerged throughout the literature review to decrease attrition rates (Benner et al., 2010; Freeman et al., 2017; Glew et al., 2019; Healey, 2012; Hoeve et al., 2017; Jeffreys, 2007; Jeffreys, 2014; McEnroe-Petitte, 2011; Mooring, 2015; Mudaly et al., 2018; Price et al., 2017; Schrum, 2015; Shelton, 2012; Shustack, 2019; Stickney, 2008). Jeffreys's Nursing Undergraduate Retention Success (NURS) model suggests when students' stressors are effectively identified and addressed, faculty can positively impact academic and social integration and improve student retention (Mooring, 2015).

Evidence has suggested that nursing faculty who integrate a proactive, holistic faculty mentorship program may develop students' full potentials, increase retention, and alleviate the nursing shortage (Freeman & All, 2017).

### **Description of a Mentorship Program to Decrease Attrition**

Mid-America Technology Center's Practical Nursing (MATC-PN) program faculty sought to address the nursing shortage by improving student retention through an innovative holistic mentorship program. According to Jeffreys's NURS model, remediation programs may retain more students when using proactive, inclusive enrichment (PIE) rather than exclusive remediation (Jeffreys, 2014). Early identification of students at risk of departure may thwart failure or withdrawal.

PIE empowers students by shifting focus from correcting weaknesses to developing strengths and encourages learners to "reach for the stars" rather than "reach for the life preserver" (Jeffreys, 2014, p. 165). Rather than concentrating on merely passing a course, PIE encourages students to strive to attain their full potential. Additionally, with PIE students' confidence is enhanced, as opposed to exclusive remediation, wherein students enter with low confidence due to a history of poor academic performance (Jeffreys, 2012a)

Mentorship programs guided by PIE may facilitate professional integration and socialization by offering holistic enrichment to students performing at a variety of academic levels. According to Shelton (2012), students who struggle academically or personally may not take the initiative to pursue faculty assistance. Oftentimes, student challenges are non-academic in nature but may impede their progress in nursing programs. The authors' experiences often include issues surrounding childcare, illness of a family member, financial difficulties, and lack of access to reliable transportation.

Faculty need to be proactive in seeking students who are having trouble and offer support through mentorship (Shelton, 2012). This approach contrasts with exclusive remediation, in which students are usually expected to reach out to faculty for help when they feel overwhelmed and need assistance.

# **Theoretical Teaching Strategies**

Knowles Adult Learning Theory provided a theoretical framework used in the mentorship program to meet the students' individual goals and promote active engagement. According to Knowles, adults have valuable life experiences that can support new knowledge. Faculty may guide, coach, and mentor adults to use individuals' experiences to solve problems (Candela, 2016). A variety of evidence-based teaching activities were implemented to engage students participating in the mentorship program including small group discussion, concept mapping, role play, demonstration, imagery and mindfulness, self-learning modules, writing and journal assignments, simulation, case studies, Socratic questioning, and tutoring (Phillips, 2016).

# **Project Results and Outcomes**

The mentorship program was introduced to a group of 25 practical nursing students in the eighth month of a 10-month program. The students' initial verbal responses included "I wish we had this at the beginning of the year" and "This could have helped the students who failed earlier."

Fourteen students participated in the program; five by self-referral and nine by faculty referral. Weekly scheduled meetings were held via the Zoom online platform due to the Coronavirus Disease 2019 (COVID-19) restrictions. The first author served as the sole mentor to the students. She provided verbal support, compassion, and active listening during the meetings and sought to identify areas that supported or inhibited optimal student performance.

Individualized learning activities were assigned to students depending on identified needs. Examples of program activities include completing Assessment Technologies Institute (ATI) case-study modules for students with academic challenges, creating an hourly schedule for students having difficulty with time-management, and reviewing test-taking techniques for those needing improvement on prioritization.

After participating in the program for two weeks, students completed the Mentorship Program Satisfaction Survey (MPSS) anonymously via SurveyMonkey (Jeffreys, 2012b). The results of the survey are provided in Table 1.

Table 1 Mentorship Program Satisfaction Survey Results

Survey question			% Student response		
	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
1) I am satisfied with nursing as my career choice.	83.33	16.67	0	0	0
2) The nursing courses completed so far provided me with valuable learning.	83.33	16.67	0	0	0
3) Overall, I am satisfied with learning opportunities at the school.	83.33	8.3	8.3	0	0
4) Overall, I was satisfied with the mentorship program.	66.67	25.0	8.3	0	0
5) The mentor was helpful.	83.33	0	16.67	0	0
6) The learning opportunities were informative.	58.33	25	16.67	0	0
7) Participating in the mentorship program improved my self-confidence.	33.33	50	16.67	0	0
8) The learning activities helped me improve my grades.	25	33.33	41.67	0	0

Note. Adapted from Nursing Student Retention Toolkit (p. 13) by M.R. Jeffreys, 2012b, Springer Publishing Company (ISBN 978-0-8261-9955-3). Licensed by Springer Publishing Company LLC on April 13, 2020.

Despite transitioning to online learning due to the COVID-19 restrictions, MATC-PN maintained an 83% pass rate (25 out of 30 students admitted) of graduating students in June of 2020 after implementation of the mentorship program. Historically, pass rates ranged from 80-85%. No students left the nursing program after the necessary rapid changes to online teaching/learning. This is one indicator of short-term success, as normally such an impactful stressor would likely lead to student attrition.

63% of participating students "agreed" or "strongly agreed" that the learning opportunities provided during the mentorship program were informative; 91.67% "agreed" or "strongly agreed" they were satisfied with the mentorship program. Suggestions for the program's improvement included written comments such as "I think the mentorship was an amazing idea and I am so thankful it was implemented for us this year," and "I would focus more on our weakness in the learning material."

The program's short-term outcomes resulted in an increased perception of faculty helpfulness, increased self-confidence, and perceived grade improvement. Projected long-term outcomes include an increase in the number of retained students and a higher number of LPNs available to meet the public's health care needs.

Implementing a faculty mentorship program using Jeffreys's NURS model may extend beyond LPN students and apply to undergraduates at various levels, including diploma, ADN, and RN-BSN programs (Jeffreys, 2012a). Jeffreys states that PIE is an integral component of undergraduate nursing programs to promote retention and integration throughout the educational advancement process (Jeffreys, 2014). Implementing evidence-based strategies such as peerlearning groups, stress management techniques, and simulations may improve professional integration and retention and optimize student success.

# **Conclusions and Recommendations**

Implementing a mentorship program guided by Jeffreys's NURS model in one practical nursing program in Oklahoma supported previous findings that faculty mentorship may support students through nursing school. Further research of mentorship programs, specifically with LPN students, is recommended to ascertain the impact of mentorship on attrition rates over time. Nursing faculty who participate in student mentorship may foster positive and caring student support, improve retention, and ease the shortage of licensed nurses.

# References

American Association of Colleges of Nursing. (2019, April 1). Fact Sheet: Nursing Shortage. https://www.aacnnursing.org/Portals/42/News/Factsheets/Nursing-Shortage-Factsheet.pdf

Benner, P. E., Sutphen, M., Leonard, V., & Day, L. (2010). Educating nurses: A call for radical transformation. San Francisco, CA: Jossey-Bass.

Candela, L. (2016). Theoretical foundations of teaching and learning. In Billings, D. M. G., & Halstead, J. A. (Eds.), Teaching in nursing: A guide for faculty. St. Louis, MO:

Farahani, M. A., Ghaffari, F., Oskouie, F., & Tafreshi, M. Z. (2017). Attrition among Iranian nursing students: A qualitative study. Nurse Education in Practice, 22, 98-104. doi: 10.1016/j.nepr.2017.01.002

- Freeman, J. C., & All, A. (2017). Academic support programs utilized for nursing students at risk of academic failure. Nursing Education Perspectives, 38(2), 69-74. doi: 10.1097/01.nep.0000000000000089
- Glew, P. J., Ramjan, L. M., Salas, M., Raper, K., Creed, H., & Salamonson, Y. (2019). Relationships between academic literacy support, student retention and academic performance. Nurse Education in Practice, 39, 61-66. doi: 10.1016/j. nepr.2019.07.011
- Healey, C. (2013). Development of a plan for improved recruitment and retention of Hispanic practical nursing students. Nurse Education Today, 33(1), 10-12. doi: 10.1016/j.nedt.2012.05.015
- Hoeve, Y. T., Castelein, S., Jansen, G., & Roodbol, P. (2017). Dreams and disappointments regarding nursing: Student nurses' reasons for attrition and retention. A qualitative study design. Nurse Education Today, 54, 28-36. doi: 10.1016/j.nedt.2017.04.013
- Jeffreys, M. R. (2007). Nontraditional students' perceptions of variables influencing retention. Nurse Educator, 32(4), 161-167. doi: 10.1097/01.nne.0000281086. 35464.ed
- Jeffreys, M. R. (2012a). Nursing Student Retention Understanding the Process and Making a Difference. New York, NY: Springer Pub. Co.
- Jeffreys, M. R. (2012b). Nursing Student Retention Toolkit. New York, NY: Springer Pub. Co.
- Jeffreys, M. R. (2014). Student retention and success: Optimizing outcomes through HOLISTIC COMPETENCE and proactive inclusive enrichment. Teaching and Learning in Nursing, 9(4), 164–170. doi: 10.1016/j.teln.2014.05.003
- McEnroe-Petitte, D. M. (2011). Impact of faculty caring on student retention and success. Teaching and Learning in Nursing, 6(2), 80-83. doi: 10.1016/j. teln.2010.12.005
- Mooring, Q. E. (2016). Recruitment, advising, and retention programs Challenges and solutions to the international problem of poor nursing student retention: A narrative literature review. Nurse Education Today, 40, 204-208. doi: 10.1016/j. nedt.2016.03.003
- Mudaly, P. D., & Mtshali, N. G. (2018). Academic monitoring and support of undergraduate nursing education programme: A middle-range theory. Curationis, 41(1), e1-e11. doi:10.4102/curationis. V41i1.1881
- Oklahoma State Department of Health. (2015). Oklahoma Health Workforce Data https://www.ok.gov/health2/documents/Oklahoma%20Health%20 Workforce%20Databook%20V2.pdf
- Phillips, J.M. (2016). Strategies to promote student engagement and active learning. In Billings, D. M. G., & Halstead, J. A. (Eds.), Teaching in nursing: A guide for faculty. St. Louis, MO: Elsevier.
- Price, C. G., & Fulmer, E. (2017). Implementing a nursing literacy initiative to address the needs of students in a licensed practical nursing program. Teaching and Learning in Nursing, 12(4), 258-262. doi: 10.1016/j.teln.2017.06.001
- Schrum, R. A. (2015). Nursing student retention in an associate degree nursing program utilizing a retention specialist. Teaching and Learning in Nursing, 10(2), 80-87. doi: 10.1016/j.teln.2014.09.002
- Shelton, E. (2012). A model of nursing student retention. International Journal of Nursing Education Scholarship, 9(1), 1-16. doi:10.1515/1548-923X.2334
- Shustack, L. M. (2019). A qualitative case study of a high performing practical nursing program in Pennsylvania. Teaching and Learning in Nursing, 14(1), 15-20. doi: 10.1016/j.teln.2018.08.003
- Stickney, M. C. (2008). Factors affecting practical nursing student attrition. Journal of Nursing Education, 47(9), 422-425. doi: 10.3928/01484834-20080901-07
- Tinto, V. (1975). Dropout from higher education: A theoretical synthesis of recent research. Review of Educational Research, 45, 89-125
- Wells, S., Burleson, R., Curry, R., Dunham, S., Grellner, R., Hastings, T., Nelson, J., Ward, J., & Wharton, D. (2018, August). Nursing Professions in Oklahoma Issue Compilation Brief. https://oklahomaworks.gov/wp-content/uploads/2018/10/7.-HWSC-Nursing-Professions-Issue-Compilation-Brief-2018.pdf



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