Title:
Role Strain, Faculty Stress, and Organizational Support for Clinical Nurse Faculty Assigning a Failing Grade

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Session Title:
Addressing the Challenges Facing Nurse Educators
Slot:
A 02: Friday, April 8, 2016: 10:45 AM-12:00 PM
Scheduled Time:
10:45 AM

Keywords:
Faculty stress, Perceived organizational support and Role strain

References:

Abstract Summary:
Assigning a failing grade to a clinical nursing student remains a distressing and difficult task. A large national sample of CNF completed the online survey consisting of the Role Strain Scale, Faculty Stress Index, and Survey of Perceived Organizational Support. Ten areas requiring change in teaching practices were identified.

Learning Activity:

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<th>LEARNING OBJECTIVES</th>
<th>EXPANDED CONTENT OUTLINE</th>
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<td>1. Identify the stressors encountered by CNF contributing to role strain and faculty stress.</td>
<td>Subjective nature of clinical evaluation; making a value judgment (Glasgow et al., 2012; Loyola, 2010; Oermann, Saewert, Charasika, &amp; Yarbrough, 2009). -Fear of litigation (Johnson, 2009; Scanlan &amp; Care, 2004, 2008; Skingley, Arnott, Greaves, &amp; Nabb, 2007). -Evaluation tools lack psychometrics/reliability (Luhanga, Yonge, &amp; Myrick, 2008a). -Expectation to maintain clinical practice</td>
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<td>2. Describe the relationships between role strain, faculty stress, and perceived organizational support for CNF.</td>
<td>-Examine findings: relationships between main variables; present ramifications -Identify target areas where teaching practices changed. -Discussion of open-ended responses including communication, evaluation process, etc. -</td>
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Discussion of possible system issue - Discuss ways to support CNF role. - Suggestions based on findings: increased administrative support, effective communication with chair/dean, development and implementation of policies, procedures, reliable evaluation instruments, and remediation measures targeting students-at-risk for failure.

Abstract Text:

Background: Nurse Educators remain obligated professionally and ethically to uphold safe clinical practice (Rosenkoetter and Milstead, 2010). Yet, failure to fail remains a significant issue in nursing education (Duffy, 2003; Larocque & Luhanga, 2013; Sprinks, 2014). The clinical experience enhances students’ learning and affords students opportunities to synthesize learning, and build on previous knowledge and skills with actual patients in complex care environments (Killam, Luhanga, & Bakker, 2011; Stokes and Kost, 2005). Assurance that clinical learning outcomes are met is imperative for patient safety and success of the nursing program (Amicucci, 2012; Larocque & Luhanga, 2013; Oermann, 2004). Evaluation of the students’ learning is the responsibility of Clinical Nurse Faculty (CNF) who ultimately determines if a student successfully met clinical course objectives required to progress in a nursing program (Amicucci, 2012; Glasgow, Dreher, & Oxholm, 2012). This can be a difficult and stressful experience (Lewallen and DeBrew, 2012).

Purpose: The purpose of this correlational study was to explore the relationships between role strain (RS), faculty stress (FS), and perceived organizational support (POS) for Clinical Nurse Faculty (CNF) who faced the decision to assign a failing grade to a clinical nursing student.

Design: A cross-sectional design was used; a national sample of 390 undergraduate and graduate CNF were recruited through social media and direct email solicitation. Neuman’s system model served as a theoretical framework.

Methods: Data were collected online using the Role Strain Scale, Faculty Stress Index, Survey of Perceived Organizational Support, and a demographic inventory. Descriptive statistics, t-tests, Pearson r correlations and regression analysis were used to analyze the quantitative data; qualitative data collected in an open-ended question were analyzed using conventional content analysis.

Findings: Strong correlations were identified; inverse relationships between role strain and perceived organizational support ($r = -0.601, p = .000$), and faculty stress and perceived organizational support ($r = -0.613, n = 390, p = .000$) whereas a strong positive relationship between role strain and perceived organizational support ($r = 0.822, p = .000$) were identified. The shared variance in role strain (69.2%) was from faculty stress and perceived organizational support. Perceived faculty stress accounted for nearly twice the variance. Higher degrees of role strain were reported by full-time CNF, those responsible for both didactic and clinical areas, and those enrolled in a doctoral program. Nearly half the participants (46.9%) reported changes to the teaching practice following the deliberation to assign a failing grade.

Conclusions: Assigning a failing grade is distressing for CNF. Perceived organizational support is foundational to the process and a critical factor influencing both undergraduate or graduate CNF’s perceived role strain and faculty stress. CNF identified ten areas where change in teaching practice was necessary.

Clinical Relevance: As Deans and administrators raise their awareness of the issues surrounding the struggle to assign a failing grade, efforts need to focus on providing adequate organizational support and
developing explicit evaluation instruments and processes affording rigorous student evaluations to maintain the graduates are competent and safe to practice.