CHALLENGES IN THE RECRUITMENT AND RETENTION OF NURSE EDUCATORS: A CASE OF LIMPOPO COLLEGE OF NURSING, SOUTH AFRICA

by

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DECLARATION

I declare that CHALLENGES IN RECRUITMENT AND RETENTION OF NURSE EDUCATORS: A CASE OF LIMPOPO COLLEGE OF NURSING, SOUTH AFRICA is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references and that this work has not been submitted before for any other degree at any other institution.

Edith Tintswalo Rikhotso	Date

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DEDICATION

I dedicate this work to the following valued people:

- My late parents Joyce Tsakani and Edison Makondo for laying the foundation of education for me.
- My husband Eric Zawa Rikhotso for giving me space to study.
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ABSTRACT

The Limpopo College of nursing had a high vacancy rate of nurse educators. in 2014 only 74 posts out of 147 were filled. The purpose of the study was to identify challenges in recruiting and retaining nurse educators and recommend strategies to deal with the challenges. The qualitative approach was found suitable as the study intended to explore nurse educators' experiences and the meaning they attach to recruitment and retention. Nurse educators who have been at the campuses for a period of five years or more were the target population; purposive convenience sampling was used. Thirteen (n=13) nurse educators were interviewed in focus groups, individual interviews were conducted with ten (n=10) heads of department (HOD'S). Thematic data analysis was used. The findings revealed that to recruit and retain nurse educators; salaries improvement, advertisement of vacated posts, proper physical infrastructure maintenance and adequate equipment provision are the strategies to implement.

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LIST OF ABBREVIATIONS

HSRC Human science research council

HOD Head of department

PH&WSBC Public Health and Welfare Sectoral Bargaining Council

SSA Sub-Saharan Africa

SANC South African Nursing Council

OSD Occupation specific dispensation

CHAPTER 1

OVERVIEW OF THE STUDY

1.1 INTRODUCTION

According to Mqolozana and Wildschut (2008:6), shortage of health work force is an international phenomenon. Rawat (2012:2) asserted that about 57 countries in the world, most of them in Africa and Asia, face a severe health workforce crisis and, further, that most countries in Sub-Saharan Africa (SSA) have a few or one nurse-training institutions, which lack the required number of nurse educators, training materials, and have limited student facilities. This therefore negatively affects the schools' ability to increase the supply of newly-trained nurses.

A study by Buehaus, Donelan, Ulrich, Norman, DesRoches and Dittus (2007) as quoted in (Shipman, 2008:522) indicated that there was an inherent connection between the nurses' shortage and nurse educators' shortage; if there are not enough nurse educators to teach, there will not be enough nurses to take care of the increasing health care needs of today's ageing society. Nurses' shortage is said to compromise the quality and safety of patient care. The studies indicated that there was no quick fix; one of the recommendations was to lobby for more financial support from the American Government to expand nursing student capacity along with nurse educators. According to Shipman (2014:521), nurse educators' shortage warrants serious attention and must be a top priority on the public health agenda.

According to Geralamo and Roemer (2011:260), the factors that were influencing recruitment and retention of nurse educators in America were the following: inadequate funding for additional nurse educators posts, high educational costs associated with nurse educators training, lack of interest in nursing education, long periods of clinical practice delaying entry into nursing education positions, low academic salaries, dissatisfaction with careers in nursing education, and fluctuating enrolment in nursing programmes.

According to Rawat (2012:2), Sub-Saharan Africa faces a crisis with human resources for health, where the World Health Organisation (WHO) has estimated that, although Sub-Saharan Africa has 25% of the world's disease burden, it possesses only 1.3% of the trained health workforce. The nurse work force in Sub-

Saharan Africa is a more significant component of its health work force than on other continents. Nurses constitute 45-60% of the entire health workforce, with nurses responsible for a broad range of services. It is clear from this exposition that generally, in Africa, there is shortage of nurses to provide nursing services, and this will affect health services negatively.

In 2008, South Africa had a deficit of approximately 19,000 nurses, and a vacancy rate of 56%, where the rural areas were the most affected (George, Quinlan and Reardon, 2009:7). The Limpopo Province, as one of the nine provinces of South Africa, is predominately rural, and therefore one of the most affected when it comes to nurse shortages, especially the shortage of nurse educators. The Limpopo Province, in combating the challenge of nurses' shortage, established the Limpopo College of Nursing which was formerly known as the Northern Province College of Nursing. It was established in terms of section 2 of the Northern Province College Act (Act No. 3 of 1996).

The College was established in 1997 after the establishment of the democratic South African government in 1994. Before 1994, South Africa had self-governing states known as homelands (Bantustans) that were created to relegate the land-dispossessed indigenous population to remote rural areas where they would govern themselves as independent states from South Africa. On the other hand, white people were the privileged ones to stay in urban areas near cities. At the advent of democracy, the homelands were abolished and nine provinces were formed. One of the provinces was Limpopo, formed by three former homelands namely Gazankulu, Lebowa and Venda, where the majority of the people were speaking Xitsonga, Sepedi, and Tshivenda respectively. Each of these homelands had its own college where nurses were trained. When the homeland system was ended, the three nursing colleges were amalgamated to become one college known as the Limpopo College of Nursing having three campuses. The one in Gazankulu was named Giyani campus, the former Lebowa homeland college was named Sovenga Campus, and Venda College of Nursing became Thohoyandou campus.

The focus of this study was on the three campuses, which were Giyani, Sovenga and Thohoyandou, which are regarded as main campuses because they have all levels of study from first year to fourth year. The other two campuses, Sekhukhune

and Waterberg have a small number of first year students only, having started operating in the year 2013.

1.2 PROBLEM STATEMENT

The Limpopo College of Nursing has a high vacancy rate of nurse educators. The approved nurse educator posts for each of the three campuses of Limpopo College of Nursing, namely Giyani, Sovenga and Thohoyandou campuses, are forty-nine (49), bringing the total number of nurse educator posts for the three campuses to 147. In the first and second quarters of 2014, only 74 posts were filled. In 2013, Giyani campus could not have an intake of new students because of a gross shortage of nurse educators, where of the available 49 nurse educator posts, only 19 posts were filled, which translated to 39% and 30 were vacant which translated to a 61% vacancy rate. The Province thereby missed out on an opportunity to train 65 more nurses (Ngwasheng, 2014: 3). According to Mqolozana and Wildschut (2008:61), the norms of the New Zealand health survey methodology state that a fill rate lower than 80% is regarded as shortage, while the Work Study section of the Department of Health Limpopo recommends a fill rate of 70%.

The researcher as one of the employees witnessed that five lecturers left the Giyani Campus in June 2012 to take up higher and better paying advertised posts in clinics and hospitals. The remaining lecturers were overloaded with work, and therefore could not cope. This in turn led to the dissatisfaction and demoralisation among the remaining Nurse Educators as they were not compensated for the extra work they performed. The current average educator student ratio in the three campuses of the Limpopo college of nursing is 1:60 in both settings, where the South African Nursing Council (SANC) recommends a ratio of one educator to fifteen students (1:15) in the clinical learning setting, and one nurse educator to thirty students (1:30) in a theoretical classroom setting (SANC, 1992:3). According to Rawat (2012:2) and Jacob and Vanderhoef (2014:38), the shortage of nurse educators results in limitation in clinical learning, a heavy workload, use of preceptors and part time instructors. This creates a situation where individual attention in class becomes impossible. A shortage of nurse educators also results in a reduced number of nurses being trained.

1.3 MOTIVATION FOR THE STUDY

The Limpopo College of Nursing has been experiencing a shortage of nurse educators for the past ten years, where on advertisement of the posts, fewer nurse educators than required applied. Most of the nurse educators do not stay more than five years without resigning or transferring to other health departments (Discussion Document with the Members of the Executive Council 2014: 2). In 2009 and 2010, the College tried to close the gap by sending 25 young nurses to the then Nelson Mandela Metropolitan University, now Nelson Mandela University to train as nurse educators, where they were required to sign a five-year contract to serve the college upon their return. Five of the trained nurse educators resigned within two years of coming back, and preferred to pay back their bursaries with interest, rather than serving the contract. The aim of the study was to identify challenges that led to a lack of retention of nurse educators in the service of the college (Atlantic Philanthropies project C Report, 2013:4).

By the time the researcher identified the problem, there had not been an indication that a study of this nature was, or is being conducted in the proposed study area, and therefore the study will assist the Limpopo College of Nursing to revisit the recruitment and retention strategies so as to avoid the shortage of nurses and nurse educators in future.

1.4 SIGNIFICANCE OF THE STUDY

The findings from the study may be utilised by the Department of Health and College management on planning nurse educators as a human resource for the college, as well as determining incentives that might serve to retain the nurse educators. The findings may also influence policy makers as far as staffing norms of the colleges in South Africa is concerned, and may assist college management in responding appropriately to the call of the Minister of Health made in 2009 on training more nurses to solve the crisis of the shortage of nurses countrywide.

Colleges of nursing in other provinces may use the recommendations that are going to be made to formulate strategies on how to recruit and retain their nurse educators. Researchers and academics interested in the subject under study may choose to

replicate the study on a larger scale, yielding information that may be valuable worldwide in the Public Administration discipline.

1.5 AIMS AND OBJECTIVES OF THE STUDY

The purpose of the study was to identify challenges in recruiting and retaining nurse educators in the Limpopo College of Nursing and to recommend strategies to deal with the identified challenges.

The objectives of the study were:

- To examine strategies put in place by the Limpopo College of Nursing to recruit and retain nurse educators; and
- To ascertain the factors that contributes to the shortage of nurse educators at the Limpopo College of Nursing.

1.6 RESEARCH QUESTIONS

The research questions were as follows:

- What are the strategies of recruitment and retention of nurse educators at the Limpopo College of Nursing?
- What are the factors that contribute to the shortage of nurse educators at the Limpopo College of Nursing?

1.7 OUTLINE OF THE MINI-DISSERTATION

The chapters of this dissertation are as follows:

Chapter one introduces the reader to the research study, indicating the identified problem, the rationale for doing the study, and the significance of the study along with its aims and objectives. It provides a brief review of the literature about the problem under study, the study area, population under study, sampling method, sample size, data collection, data analysis, and ethical considerations.

Chapter Two focuses on the discussion of literature on the topic under study and the findings of other studies on the topic. A literature review is conducted to gain

more knowledge about the subject under study, providing justification for the significance of the study.

Chapter Three focuses on the research methodology which entails research design, detailing whether a qualitative or quantitative study was undertaken as well as the rationale for the choice of design, the study area, target population, the sampling method, methods used to collect and analyse the data, ethical consideration as well as limitations of the study are briefly discussed.

Chapter Four The chapter deals with the analysis of the data gathered and interpretation of findings.

Chapter Five presents the conclusion drawn from the study, recommendations based on the research findings, contribution of the study, limitations of the study and suggestions for further research.

CHAPTER TWO

LITERATURE REVIEW

2.1 INTRODUCTION

Reviewing of literature is done in order to identify what is already known about the area under study. It also helps researchers to identify concepts and theories relevant to the study area, research methods and strategies used by other researchers, significant controversies, inconsistent findings and unanswered research questions (Bryman, 2012:98). Literature review may also help the researcher to refine the research question and to find out if the research has been conducted by other researchers, which may help the researcher to replicate the research or decide on changing the topic (Fouche' and Delport 2014:134).

The purpose of this chapter is to provide an overview on recruitment and retention of nurse educators, as well as challenges and strategies thereof. The chapter begins by discussing the recruitment and retention concepts as presented by different scholars and authors. The chapter further presents the challenges faced by organisations in recruiting and retaining employees, and also the strategies of recruitment and retention of Nurse Educators globally.

2.2 THE CONCEPT RECRUITMENT

Recruitment refers to the filling up of deficiencies and is a process of acquiring, seeking or attracting the relevant and qualified human capital in enough numbers (Phago, 2014:38). Recruitment is critical in that relevant and suitably qualified human capital should be sought, that is, seeking the right candidates for the right positions at the right time in order to realise the goals and plans of an organisation (Phago, 2014:38). The public sector also requires highly skilled and competent workforce. There are various recruitment channels available, some of which are the following: Print media, television, radio, internal advertisement, internet, recruitment agencies and professional associations (Phago, 2014:38).

According to Gerber, Nel and Van Dyk (1994), important steps that must be considered in recruitment are the following: formulation of the recruitment policy, analysis of the factors affecting recruitment, investigation of different recruitment sources and choosing between different recruitment techniques, if the process of

recruitment is approached incorrectly and wrong employees are recruited it could have a negative effect on the morale, organisational climate, discipline and productivity (Gerber, Nel and Van Dyk, 1994: 183).

2.3 THE CONCEPT RETENTION

To retain is to keep in place, not to lose, or secure services of. Dessler, Griffiths, and Lloyd-Walker (2007), as quoted in (Dorasamy, 2014:180), define retention as redesigning different human resource activities to enhance job satisfaction, in order to reduce staff turnover, while Mokoka, Oosthuizen and Ehlers (2010:2) define retention as entailing preventing people from leaving an organisation to work elsewhere.

Employees are regarded as valuable human capital and therefore strategies have to be put in place to retain them. Institutions that are unable to retain their valuable human capital do not succeed in provision of public services (Phago, 2014:45). According to Mashupye and Maserumule (2014:71), the biggest question in building state capacity is how to retain human capital. Failure to retain staff results in shortage of staff.

There are assertions that staff turnover may be beneficial to organisations in that the new employees bring new ideas and experiences; also that poor performers may be lost to be replaced with more effective employees. Those who argue against staff turnover indicate that the costs of replacing employees are high in that the posts need to be advertised, selections, and training after employment has to be conducted (Dorasamy, 2014:205)

2.4A GLOBAL PERSPECTIVE ON RECRUITMENT AND RETENTION OF NURSE EDUCATORS

According to Shipman (2008:521), there are studies that indicate that there is an inherent connection between the nurses' shortage and nurse educators' shortage. Nurses' shortage compromises the quality and safety of patient care. Nurse educators' shortage warrants serious attention and must be a top priority on the public health agenda.

If there are not enough nursing educators to teach, there will not be enough nurses to take care of the increasing health care needs of today's ageing society. According

to the American Society of Nurses there was no quick fix. They indicated a solution as being to lobby for more financial support from the Government to expand nursing student capacity along with nurse educators (Shipman, 2008:522). Salaries and workload were identified by the National League for Nursing in America as motivating factors for nurse educators to leave their jobs (Nally and Falls Church 2008:243).

Budget constraints, ageing nurse educators, and non-competitive salaries compared to positions in the practice area were identified as factors that affect recruitment and retention of nurse educators and thus resulting in shortage in America. It was projected that between 200 and 300 doctoral prepared nurse educators will retire each year from 2003 through 2012, and between 220 to 280 nurse educators with master's degree were to retire between 2012 and 2018, leading to a shortage of nurse educators (Rosseter, 2014:2).

Higher compensation in clinical and private sector settings lure current and potential nurse educators away from teaching. According to the American Association of Nurse Practitioners in 2013 the average salary of a nurse practitioner across settings and specialities was \$94,050 and that for a master's degree prepared assistant professor in schools of nursing was \$80,609(Rosseter, 2014:2).

Masters and doctoral programs in nursing were not producing a large enough pool of potential nurse educators to meet the demand. Efforts to expand the nurse educators' population were frustrated by the fact that thousands of qualified applicants to graduate nursing programmes were turned away each year (Rosseter, 2014:2).

Prospective students tried to enter into nursing schools, but they were turned away due to the shortage of nurse educators; as a result nursing schools were not graduating enough nurses to keep up with the demand. Between the 2004 and 2005 academic years, an estimated 92,000 applications for prospective nursing students were rejected. The main reason cited for turning them away was a lack of nurse educators necessary to teach students. The unfilled full-time positions country wide in 2006 was 1390 and the deficit was expected to intensify as the nurse educator work force reached retirement age (Nally and Falls Church, 2008:243).

To combat nurse educators' shortage the American Association of Colleges of Nursing tried to obtain funding from the government to develop nurse educators. In 2006, Americans introduced an act known as the Expansion and Development Act 2005; the Act authorized grants which were used to capacitate and increase the numbers of nurse educators and allowing more students to enrol into nursing programmes. Student applications increased by 175% but less nurses were willing to pursue academic positions because salaries in clinical services were higher than those of nurse educators (Nally and Falls Church, 2008:522).

According to Yordy (2006:6), various states of America implemented the following strategies to recruit and retain nurse educators and thus address shortages:

a) Stimulation of Interest in Nursing Education

To achieve a sufficient increase in the supply of nurse educators, efforts were made to persuade more nurses and nursing students to pursue academic careers, and to do so at an earlier age. The efforts included mentoring that conveys the rewards of being a nurse educator and production of recruitment material such as written material and DVDs; they also reached out to more minorities and men.

b) Provision of Financial Assistance

Financial assistance eliminated or reduced the need to work while pursuing the degrees necessary for being a nurse educator and helped younger candidates to enter the career path. Some health care institutions provided time off with pay for employees pursuing graduate training.

c) Combination of Clinical Experience with Training in Academic Disciplines

Integration of clinical experience and training with other aspects of academic training, including research, allowed earlier entry into an active nurse educator role. Part-time academic training assisted by distance learning programmes, while maintaining a clinical role, was used as a basis for integrated training.

d) Making Academic Training More Accessible

Distance learning coupled with short intensive periods at the academic centre is used to eliminate the necessity of giving up an existing career to pursue a lengthy education often in a different location from one's residence. Cooperative programs

with health care institutions that bring academic training to the clinical site are also used to reduce disruption to personal and family life.

e) Increase Salary and other Faculty Support

Reducing the gap between the income of nurse educators and clinical practise can make a nursing education career more attractive to those with academic interest. To retain those who are already in nursing education who might leave faculty, support such as sabbaticals, money to develop research proposals and paying tuition fee for the dependants of nurse educators may improve retention.

f) Obtaining Support For More Nurse Educators Positions

Funding for additional nurse educators' posts helped to expand nursing student enrolment in many American nursing schools. Specific arrangements were made for the graduates to be committed to a period of employment at the supporting institution.

g) Improvement of Productivity of Existing Staff with Support Programs

Cooperative arrangements among nursing education programmes including using faculty outside nursing to teach non-nursing subjects has been identified as a promising strategy, for example in subjects like Social Science and Pharmacology. The use of technology and distance learning has also been identified as an opportunity to enhance productivity.

h) Nursing Education Needs Study

Many American states have established centres that conduct studies of their own nurse educators' shortages; these centres' studies provide specific proposals for addressing their shortages (Yordy, 2006: 6).

A descriptive survey study done in an American institution found that top attractors or recruitment strategies for doctoral and master's nurse educators were an opportunity to work with students and to help shape the nursing profession. Nearly 70% of male respondents said they have been invited or encouraged by a faculty member to become a nurse educator (Evans, 2013:15). Respondents 45 years and younger believed that both flexibility in working hours and flexibility in job content would help attract people to be nurse educators. The vast majority (98.5%) believed that increased salaries would attract people to be nurse educators. The respondents in

this study recommended a positive work environment as a retention strategy (Evans, 2013:16). 95% of the respondents agreed that employee benefits were a factor in retention; salaries ranked lowest of the top 11 nurse educators retention factors. The findings implied that people do not become nurse educators or remain in nursing academia because of money. A contradiction was that most respondents identified that salary was a major retention issue; flexibility was found to be important to those striving to attract younger applicants (Evans, 2013:18).

Laurencelle, Scanlan and Brett (2016:135), in their study done in Canadian institutions, found that nurse educators are attracted to academia because of flexibility of working hours, available opportunities to study further, wanting to teach, seeing students learn gave them satisfaction, they found it rewarding, and they wanted to contribute to the profession.

A study done in Bugando Mwanza in Tanzania at the Catholic University of Health and Allied Sciences found the factors that influence recruitment and retention of academic staff to be small salaries, limited career options, heavy teaching loads, inadequate equipment and lack of support staff as main barriers to retention of staff (Mshana and Manyama, 2013:90).

The number of nurse educators increased and remained stable after the Malawian ministry of health introduced the following incentives in a bid to attract and retain nurse educators: increase in salaries and non-monetary incentives such as promotion of nurse educators, free housing, free medical services, subsidized utilities, transport for shopping, loan schemes, education and training opportunities, improved supervision, mentoring and a communication system (Caffrey and Frelick, 2006:7).

A retention survey conducted by Mulanje School of Nursing in Malawi found that nurse educators consider the following rank-ordered factors when deciding whether to stay:

- Monetary incentives.
- Housing availability and quality.
- Further training (career options) (Caffrey and Frelick, 2006:8).

2.5 A SOUTH AFRICAN PERSPECTIVE ON RECRUITMENT AND RETENTION OF NURSE EDUCATORS

Duplooy and Snyman (2002) in their research study on academic staff recruitment and retention at Technikon Free State in South Africa, made the following recommendations to improve recruitment and retention of academic staff: market-related salaries, reduction of teaching time, more realistic student/lecturer ratio, adequate facilities and equipment as well as reduced administrative responsibilities (Duplooy and Snyman, 2002:55).

Ryan, Healy, and Sullivan, (2012) as quoted in Mansele and Coetzee (2014:24), asserted that academic staff members are likely to leave an institution if there are frustrations associated with family life and dissatisfaction with salary, teaching load, opportunities for career advancement and developing new ideas.

According to Phago (2014) there are external challenges of recruitment in the public sector in South Africa; he identified the following as challenges: deployment policies of ruling political parties, unemployment rates and conditions, skills shortage, brain drain, labour brokers, affirmative action and employment equity policies (Phago, 2014:47).

Deployment policies of the ruling political party affect recruitment in that the ruling political party earmarks certain positions for political deployment in order to secure implementation of party policies that have been translated into government policies. In developing countries, people with low literacy may be deployed, resulting in a negative impact of poor performance as the deployed person will not be a professional in the field he is serving.

The high unemployment rate in developing countries affects recruitment in that candidates who do not meet minimum requirements for the advertised posts also apply out of desperation to get a job. Therefore authorities have to peruse large quantities of applications searching for those that qualify. In developing countries, there is shortage of skills, making recruitment of candidates with certain skills difficult in that an inadequate number of candidates may apply (Phago, 2014:48).

In most developing countries, trained professionals with skills immigrate to developed countries, resulting in a brain drain from their countries making recruitment of people with skills a challenge, as they will be scarce. Labour brokers also impact on recruitment in that they are said to be highly exploitative of those employed, in that they benefit more than the job incumbents (Phago, 2014:48).

In South Africa, affirmative action and employment equity policies also impact on recruitment because as human capital officers recruit they should take the policies into consideration. The policies stipulate that employers should give first preference to those who were deprived of their basic rights and privileges, that is those who were disadvantaged during the apartheid era, namely black people and women, both black and white (Phago, 2014:49).

In a research study done at a Higher Education Institution in South Africa, Mansele and Coetzee (2014:25) recommend that there should be clearly formulated orientation programmes and documented policies on promotions and training so as to assist new entrants to find a fit into the organisation. They further asserted that employee assistance programmes, provision of career mobility opportunities, organisational support in a form of feedback by supervisors on work done, and provision of generous total benefit packages would most likely lead to retention of staff.

Rispel and Bruce (2015:9) recommended that nursing education reforms be implemented without further delay. They asserted that high level investment in preparing nurses for practice is essential. They further indicated that an adequate number of nurse educators will be needed, and that appropriate training will emphasize adequate staffing and an enabling work environment.

An exploratory descriptive study done on nurse managers of public and private hospitals in Gauteng to find out their views on factors which could influence professional nurses' retention found that general factors such as working conditions, relationships in the work environment, image of the institution and organisational factors such as lack of safety, uncompetitive salaries, limited professional development opportunities, long inconvenient hours, lack of resources, policies and the culture within the organisation contribute to lack of retention of nurses (Mokoka, Oosthuizen and Ehlers, 2010:7). These findings are consistent with those of research done on nurse educators. Though the working environment is not the

same, the common factor is that nurse educators are also professional nurses and that some of the nursing schools are located in hospitals.

In 2006 South Africa as a country had a ratio of 222 nurses for every 100 000 people, where the ratio may have been even lower because the South African Nursing Council (SANC) register was used, which did not include non-practising nurses, and nurses outside the country. The population statistics used are said not to include illegal immigrants. When immigrants were taken into consideration, the South African population was conservatively estimated to be 55 million, and that raised the ratio to 621 people per registered nurse. Limpopo Province had a population of 5 274 800 and 8372 registered nurses. The vacant posts of registered nurses in the public sector service in Limpopo were 15% in 2006, 20% in 2007 and 43.7% in 2008 (Joubert, 2009: 19). These statistics show a steady increase of vacancy rate.

According to Mokoka, Oosthuizen and Ehlers (2010:8), paying of competitive salaries, decent rates of overtime, ensuring sufficient resources and that equipment is in good working order, improving the security at hospitals in parking areas, and lighting passages properly to improve safety may improve retention of nurses. Low salaries and lack of resources were found to be some of the factors that were affecting retention of nurse educators in Malawi and Tanzania, therefore the recommendations of the above authors would apply to nurse educators in those instances.

Mokoka, Oosthuizen and Ehlers (2010:8), further asserted that job satisfaction of the multigenerational nursing workforce should be attended to. They recommended that managers should be conversant with different generational characteristics, especially those of generation x and y, to be able to lead and manage effectively so that they do not leave their organisations.

A quantitative descriptive survey on effectiveness of rural allowances as a strategy for recruiting and retaining health professionals in rural public hospitals in the North West Province of South Africa revealed that rural allowance alone is not sufficient to recruit and retain health professionals (Chelule and Madiba, 2014:84). According to Buykx, Humphreys, Wakerman and Pashen (2010), as quoted in (Chulule and Madiba, 2014:85), globally most strategies used to recruit and retain health professionals include financial and non-financial incentives.

Major recruiting and retaining incentives identified by this study were: specialist support, increasing rural allowance by 30%-50%, provision of adequate medical equipment, adequate accommodation, opportunity for promotion, adequate schooling facilities for children, and bursaries for children. The study was done before the introduction of Occupation-Specific Dispensation, a financial incentive introduced in 2007 by the National Department of Health (Chelule and Madiba, 2014:84). The findings imply that no single solution can address the identified aforementioned issues (Grobler, Marais, Mabunda, Marindi, Reuter, and Volmink (2009), as quoted in (Chelule and Madiba, 2014:91). The responses in this study corroborate findings in other studies conducted in African countries.

2.6 CHALLENGES AND STRATEGIES TO RECRUIT AND RETAIN NURSE EDUCATORS IN SOUTH AFRICA

In 2003 the Department of Health in South Africa, in a bid to recruit and retain health professionals including professional nurses, after identifying that many were leaving the public service and joining the private sector and some going to destinations outside South African borders citing poor working conditions, inadequate facilities and salaries as some of their problems, came up with strategies to retain nurses in general. The Department of National Health made an agreement termed Resolution 1 of 2004 with Trade Unions at the Public Health and Welfare Sectoral Bargaining Council (PH&WSBC) to designate certain categories of health professionals as having scarce skills and to pay them a non- taxable allowance which was 10% of their basic salary. Amongst the nursing professionals, Operating theatre, critical care and oncology nurses were designated (Van der Vyver, 2004:1).

The National Department of Health made another agreement with Trade Unions known as Resolution 2 of 2004, and agreed on designating impoverished areas of the nine South African Provinces as rural and to pay health workers in those areas a "rural allowance" which ranged from 8% to 18% of the basic salary; in areas which were regarded as more impoverished the professionals were paid more. The Heads of Department of Health were delegated to designate areas that are impoverished and rural in their provinces (Van Der Vyver, 2004:3).

The Occupation-Specific Dispensation was introduced by the National Department of Health in 2007 as a recruitment and retention strategy of health professionals, nurse educators were included to benefit from the dispensation because country wide there was shortage of nurse educators. Professional nurses who were also qualified educators preferred to work in hospitals, clinics and the private sector where they were better paid (Van der Walt, 2007: 1).

2.7 STRATEGIES OF RECRUITMENT AND RETENTION OF NURSE EDUCATORS IN LIMPOPO PROVINCE

Limpopo College of Nursing is situated in Limpopo Province, which is one of the provinces in South Africa and therefore had to implement the recruitment and retention strategies of health professionals of the Department of National Health, but unfortunately nurse educators were not designated as a scarce skill.

In Limpopo Province areas and hospitals next to the campuses under study were designated as rural, that is, Mankweng Hospital about 200m from Sovenga Campus, Nkhensani Hospital about 200m from Giyani campus and Tshilidzini Hospital about 200m from Thohoyandou Campus, but all three campuses were not designated. Non-designation of campuses resulted in low morale amongst the nurse educators and many transferred into hospitals and clinics where a rural allowance was being paid or applied for better paying posts (Ngwasheng, 2012).

In the year 2011, Giyani Campus experienced a high turnover of nurse educators.

When Mopani District advertised managerial posts with higher salaries than those of nurse educators, six nurse educators left the Campus to occupy posts in clinics and hospitals and two left through normal attrition of retirement and death. The campus failed to admit new students as the available nurse educators were not coping with the work load (Giyani Campus College Council Report, 2012: 3).

Post-1994 some nursing colleges in Gauteng were closed because the politicians thought there were more nurses than needed in the country. The same sentiments were experienced in Limpopo Province but fortunately none of the old colleges in Limpopo Province were closed; instead they were amalgamated to become one institution. Policy makers in South Africa are aware of the shortage of nurse

educators, especially in rural areas. Some of the policy responses were one year of community service for nurses and monetary incentives (Daviaud and Chopra, 2008: 49).

According to Tshitangano (2013:6), the findings of a descriptive cross-sectional survey done in Limpopo Province, South Africa, with frequency and percentage tables revealed that nurses in Limpopo Province were more dissatisfied (53,9%) than satisfied (37,8%). Respondents were dissatisfied with staffing (85,2%), availability of workplace resources (83,7%), salaries (78.8%) work place safety (73,7%), career development opportunities (64,5%) and hours of work (47.6%). The researcher recommended that attention be given to these specific issues if retention of nurses is to be achieved (Tshitangano, 2013:6).

TABLE 1

FILLED AND UNFILLED NURSE EDUCATOR POSTS PER CAMPUS IN THE YEAR 2012 AT LIMPOPO COLLEGE OF NURSING.

YEAR	CAMPUS	FILLED	PERCENTAGE	VACANT	PERCEN-	NUMBER OF
		POSTS		POSTS	TAGE	STUDENTS
2012	Giyani	19	39%	30	61%	299
2012	Sovenga	25	51%	24	49%	365
2012	Thohoyand	23	47%	26	53%	305
	ou					
GRAND	TOTAL	67	46%	80	54%	969

Source: Limpopo College of nursing discussion document with the Head of Department of Health (2012:3).

The above table indicates that during the academic year 2012 the percentage of filled posts was lower than that of vacant posts in all campuses and that Giyani campus was the most affected campus. According to the Department of Health norms, at least 70% of the posts should be filled. The above table indicates that Limpopo College of Nursing was 24% below the norm and according to Mqolozana and Wildschut (2008), the norms of the New Zealand survey methodology state that a fill rate below 80% is regarded as shortage

TABLE 2

FILLED AND UNFILLED NURSE EDUCATOR POSTS PER CAMPUS IN THE YEAR 2014 AT LIMPOPO COLLEGE OF NURSING.

YEAR	CAMPUS	FILLED	PERCENTAGE	VACANT	PERCENTAG	NUMBER OF
		POSTS		POSTS	E	STUDENTS
2014	Giyani	21	43%	28	57%	242
2014	Sovenga	28	57%	21	43%	316
2014	Thohoyando u	25	51%	24	49%	277
GRAND	TOTAL	74	50%	73	50%	835

Source: Quarterly reports, Limpopo College of Nursing (2014)

Table 2 indicates that shortage of nurse educators was slightly better during the academic year 2014 with filled posts being 20% below the 70% departmental norm and 30% below the Newzealand survey methodology norm. The 4% improvement was due to deployment of nurse educators sponsored by the college to train at Nelson Mandela Metropolitan University.

2.8 CONCLUSION

In this chapter, the concepts "recruitment and retention" were defined, as presented by different scholars and authors, and challenges in recruitment and retention of nurse educators globally and in South Africa were discussed. The challenges of recruitment and retention of human capital including nurse educators in South Africa and Limpopo Province are similar to global challenges. Market-related salaries, work load, student lecturer ratio and brain drain are common factors globally. Strategies to recruit and retain nurse educators globally and in South Africa including Limpopo Province were also discussed. It was identified that researchers' findings were corroborated. They all asserted that monetary and non-monetary strategies should be used to recruit and retain staff. The next chapter will address the research design and methodology used in this research study.

CHAPTER 3

RESEARCH METHODOLOGY

3.1 INTRODUCTION

In the previous chapter, a literature review was undertaken in order to gain more knowledge about the concepts recruitment and retention as presented by different scholars and authors. The challenges faced by organisations globally and in South Africa, as well as strategies used to recruit and retain nurse educators, were discussed. This chapter applies the research methodology and design of this study. Research methodology refers to the steps or procedures and strategies that are used to gather and analyse data in a research investigation. Research methodology provides means by which the research problem can be systematically solved. It outlines certain steps that are to be adopted in unravelling the research problem. It is through the research methodology that the techniques that deem to be relevant to the research will be identified and specified (Polit and Hungler, 1993:440; Kothari and Garg, 2014:8). This chapter begins by discussing research design and the two approaches of research design, namely the quantitative and qualitative approaches. As this study adopted the qualitative approach, it is imperative for the researcher to point out the rationale of having chosen the qualitative approach. The chapter also describes the study area, the population and the sample thereof. Finally, ethical considerations that were taken into consideration and the limitations of the study are deliberated on.

3.2 RESEARCH DESIGN

A research design is a general orientation to the conduct of the study (Bryman, 2012:35). The purpose of the research design is to provide a plan and maintain control in answering specific research questions. The research design should reflect an objective view of the literature and a theoretical framework that guided the choice of the design (LoBiondo-Wood and Haber, 1994:208, 194). A research design depends on the way the researcher believes the research question should be answered and the research perspective that is the ontology and the epistemology.

Ontology is how one sees reality and epistemology is how one thinks social phenomena should be studied (Fouché and Schurink, 2014:310).

There are two approaches commonly known in a research design, namely the quantitative and qualitative approaches. The fundamental difference between quantitative approach and qualitative approach is that a quantitative approach is based on the belief that phenomena can be objectively measured one at a time or in combination; it is deductive in nature and used to test theory. On the other hand, a qualitative approach focuses on the completeness of phenomena, and includes reference to life experiences. It is inductive in nature and utilised to generate a theory (Lierh and Marcus, 1994:255; Bryman, 2012:36).

A qualitative research emphasizes words rather than quantification in the collection and analysis of data; it emphasizes the way in which individuals interpret their social world (Bryman, 2012:36). Qualitative research is concerned with understanding rather than explanations, with naturalistic observation rather than controlled measurement, with subjective exploration of an insider as opposed to that of an outsider (Fouché and Schurink, 2014:308). The qualitative research design used depends on the purpose of the study, nature of the research question, skills and resources available to the researcher (Fouché and Schurink, 2014:312).

In this study the qualitative approach was found suitable, as the study intended to explore different dimensions of nurse educators' experiences and required a small number of participants. The researcher sought to interpret the reality faced by nurse educators and intended to find out the meaning that the nurse educators attach to recruitment and retention of nurse educators (Lierh and Marcus, 1994:257). One-on-one interviews were conducted with subject heads and campus heads using a semi-structured interview schedule, and focus group interviews were also conducted with nurse educators of the three campuses under study. Interviews were conducted with nurse educators at more or less the same time.

3.3 STUDY AREA

The study was confined to the three campuses of the Limpopo College of Nursing namely Giyani Campus in Mopani District which is about 165km from Polokwane city, Sovenga Campus in Capricorn District which is about 36km from Polokwane

City, and Thohoyandou Campus in Vhembe District about 180km from Polokwane City.

3.4 POPULATION

The population is a segment of units from which the sample is to be selected. It is the totality of persons, objects, events, or any other sampling units with which the research problem was concerned (Strydom, 2014:223). In this study, all nurse educators who have been on the campuses under study for a minimum period of five years or more served as the targeted population. Those who have just been employed recently were not part of the study, because they did not experience the challenges, or their experience was for a short time and therefore could not assist the researcher with the desired information. The population was as follows: 11 at Giyani Campus, 22 at Sovenga Campus, and 18 at Thohoyandou Campus; two (2) acting campus heads and one (1) college head were also part of the population, therefore the grand total population was fifty four (n=54).

3.5 SAMPLING

Sampling is a process of selecting a portion of the population under study to represent the entire population. The purpose of sampling is to increase the efficiency of the research study; it would be time consuming, costly and at times impossible to conduct a study where the whole population is included (Bryman, 2012: 201; LoBiondo-Wood and Haber, 1994:290). It was therefore necessary to do sampling in this study because it would have been time consuming and costly to conduct a study on all fifty four nurse educators.

3.5.1 Sample

A sample is a portion of the population under study that represents the entire population. A sample should have characteristics similar to the population, that is, the key characteristics should closely approach those of the population (Polit and Hungler, 1993:174; LoBiondo -Wood and Haber, 2014:234). Sampling was necessary because it would have been time consuming and costly to interview all lecturers (Bryman, 2012:201).

3.5.2 Sampling Method

This is a process of selecting a portion of the population to represent the entire population. Purposive convenience sampling, a non-probability form of sampling, was chosen as method of sampling, Participants were chosen based on their positions and considered to be people who will give the relevant information required for this study. The chosen participants were also chosen based on their accessibility as the researcher works directly with them (LoBiondo-Wood and Haber, 2014:236). The nurse educators, college head and campus heads were relevant to the research; only those who have been working at the college for the past five years or more were sampled because they had a fair exposure to the challenges of the college.

3.5.3 Sample Size

The sample size is the number of subjects in a sample; the bigger the sample the more representative is it likely to be, provided the sample is randomly selected. The sampled participants are those that are relevant to the research questions being posed. Individuals that meet a particular criterion are sampled (Bryman, 2012:418). One focus group per each of the three campuses under study, each consisting of five (5) nurse educators, was interviewed at one of the campuses. Only three respondents made themselves available, therefore a total of thirteen (13) nurse educators were interviewed in focus groups. Individual interviews were conducted with ten (10) individuals as follows: one acting college head, one acting head of campuses, eight (8) subject heads (three at Giyani and Thohoyandou campuses and two at Sovenga Campus). The grand total sample size was twenty-three (23) nurse educators.

3.6 DATA COLLECTION

One-on-one and focus group interviews were conducted to collect data using a semistructured interview schedule with closed and open-ended questions included to allow probing. The responses were manually recorded on the interview schedule and at the same time audio-recorded to enable the researcher to listen to the interview as many times as necessary in order to ensure that important information given by interviewees was not missed. The researcher wanted to interpret the reality faced by nurse educators regarding recruitment and retention, understand their experiences, points of view and concerns on recruitment and retention of nurse educators (Fouche' and Schurink, 2014:309). A question guide with structured and open-ended questions was used to collect data. The guide comprised of three sections namely:

- Demographic profile.
- Strategies in place to recruit and retain nurse educators.
- Factors contributing to shortage of nurse educators.

3.7 DATA ANALYSIS

Data analysis is a process of bringing order, summarizing and giving meaning to the mass of collected data (Schurink, Fouché and De Vos, 2014:397). Thematic analysis was used. It became imperative to analyse data manually because the study was not quantitative in its nature. As stated in Bryman (2012:568), manual coding has an advantage of the researcher reading and rereading available data, making the researcher familiar with technical content and more tacit meaning within the data set, it also helps to ensure that data are correctly categorized Taylor-Powel and Renner (2003: 3) In this study a voice recorder was listened to several times while making notes on key repeated concepts made by respondents and the transcripts were also read several times. According to Bryman (2012:608), there is a dis-advantage when computer-assisted programs are used. He asserts that they may make the researcher detached from findings and miss some themes that are not immediately obvious.

According to Braun and Clarke (2006) as quoted by Maguire and Delahunt (2017:3352), thematic analysis is defined as a process of identifying patterns or themes within qualitative data. It is the most common method of qualitative analysis; it is a flexible and useful research tool that provides a rich and detailed account of data (Wigdorowitz, 2018:3; Thomas and Harden, 2018:2).

According to Wigdorowitz (2018), there are six steps to follow, which were identified by Braun and Clarke (2006), which involve familiarising yourself with your data, generating initial codes, searching for themes, defining and naming themes and

producing a report. The steps are not linear; one may move from one step to the next or forward and back between them (Maguire and Delahunt, 2017: 3354).

In this study the researcher, being a novice, chose to do theoretical thematic analysis that is driven by specific research questions and that is analyst focused because it was found to be simpler. On writing a report direct quotes of participants were used to support the findings (Maguire and Delahunt, 2017:3354).

The data was then used to make recommendations to improve current practises in recruitment and retention strategies. The researcher stopped the process of coding and compilation of data when theoretical saturation was reached; that is a point where new data was unable to yield any new concepts (Bryman, 2012: 569).

3.8 ETHICAL CONSIDERATION

Ethics refer to moral principles or rules of conduct; ethics therefore have to do with the decision made between right and wrong, appropriate or inappropriate, acceptable or unacceptable, moral or immoral. The following steps were engaged in to ensure adherence to research ethics:

Permission to conduct research

Permission to undertake the study was sought in writing from the Department of Health because the college is funded and partly governed by the Limpopo Provincial Health Department; permission was also sought in writing from the heads of campuses under study.

Informed consent and voluntary participation

According to LoBiondo-Wood and Haber (2014:261), informed consent is a legal principle that ensures that potential subjects understand the implications of participating in the research and knowingly agree to participate. Informed consent implies that adequate information is given to the subjects, participation should be voluntary, and subjects should not be coerced into participating in a research project (Strydom, 2014:117).

In this study a written Informed consent was sought from the respondents. They were given a consent form to sign to confirm their willingness to participate in the

research project. The respondents were given time to decide whether to participate or not, and were not coerced to participate.

Before an interview, the importance of the information was explained to participants. Debriefing of participants was done after interview sessions to give them an opportunity to work through their experiences and to remove misconceptions (Strydom, 2014: 121).

Plagiarism

Plagiarism is an act of making use of other persons' thoughts, writings or inventions as one's own (Oxford Dictionary, 1990). The researcher strived to acknowledge authors' thoughts and writings used in this study.

Ethical clearance

Ethical clearance should be sought from the ethics committee that assesses if the research study will not violate human rights and legal principles for this study, ethical clearance was obtained from the Limpopo University Research Ethics Committee.

Privacy and confidentiality

Privacy is based on the principle of respect, it refers to keeping to one-self that which is not intended for others to observe or analyse (Strydom, 2014:119). According to LoBiondo-Wood and Haber (2014:259), confidentiality means that individual identities of subjects will not be linked to the information they provide and will not be divulged publicly. In this study, privacy, anonymity and confidentiality was guaranteed by not writing the respondents' names on the interview schedule and not calling them by name during audio recording of individual and focus group interviews. All possible measures to protect the privacy and harm of respondents were taken, and their identities were not made known (LoBiondo-wood and Haber, 2014:261; Strydom, 2014:121).

No harm

Protection from harm is based on the principle of beneficence, which is an obligation to do no harm. Harm can be physical, psychological, social or economic in nature. The subject's rights are violated when a researcher knows in advance that harm will occur and that the benefits will not outweigh the risks (LoBiondo-Wood and Haber,

2014:260). In this study, physical and economic harm are unlikely, but psychological and social harm are likely.

Before an interview, the importance of the information will be explained to participants, and debriefing of participants will be done after interview sessions to give them an opportunity to work through their experiences and to remove misconceptions. Should it happen that the researcher did not get time to debrief the participants they would be referred to an appropriate professional for counselling (Strydom, 2014:122).

Fair selection of participants

Fair selection of participants is based on the principle of justice and protection of human rights. Research subjects should be selected fairly regardless of race, age, and social standing (LoBiondo-Wood and Haber, 2014:260).

Purposive and convenience sampling were utilised for this study. The college head, nurse educators and campus heads were relevant to the research question being posed, and nurse educators who have been working at the college for five years or more were sampled because they have a fair exposure to the challenges of the college. The research subjects were easily accessible because the researcher works at the same college.

Data integrity and safe storage

Collected data and the voice recordings will be kept in a locked cupboard to prevent unauthorised people from getting hold of them; this will further ensure confidentiality and privacy.

3.9 CONCLUSION

This chapter entails all processes undertaken in conducting the study. The research design which was qualitative in nature and the semi-structured interview methodology utilised in conducting the study were discussed as well as the population under study, who were nurse educators that have been present for a minimum period of five years or more on designated campuses. The total population is fifty four (n=54) and the total sample size is twenty three (n=23). Purposive convenience sampling was utilised and ethical considerations during the study were explained.

Data collection methods, that is one-on-one and focus group interviews and the rationale for choosing these methods were discussed, including limitations of the study. The next chapter presents the data gathered in this study, and also the analysis and Interpretation thereof.

CHAPTER 4

DATA ANALYSIS AND INTERPRETATION OF FINDINGS

4.1 INTRODUCTION

In chapter three, research methodology was discussed. It was explained that a qualitative research design was chosen because the researcher intended to explore different dimensions of nurse educators' experiences and the meaning they attach to recruitment and retention of nurse educators and that it required a small number of participants.

In this chapter, collected data is summarised, analysed and interpreted; meaning is given to the mass of data collected to find out if the set objectives have been met. The demographic profile of respondents and findings on the one-on-one and focus group interviews are presented and compared.

Data was collected from the three main campuses of the Limpopo College of Nursing namely Giyani, Sovenga and Thohoyandou. At Giyani campus, individual one-on-one interviews were conducted with three (03) heads of department (HOD). At Sovenga campus, two (02) HODs were interviewed and at Thohoyandou campus one-on-one interviews were conducted with three (03) HODs and an acting vice-principal. The acting principal of the college was also interviewed. The respondents were coded using numbers to hide their identities. A total of ten (n=10) (=43.4%) out of twenty-three (n=23) respondents were interviewed one-on-one.

Three focus groups were interviewed; at Giyani and Thohoyandou campuses there were five (05) nurse educators per group while at Sovenga campus only three (03) nurse educators made themselves available. The total number of nurse educators interviewed in focus groups was thirteen (13). The themes and subthemes are the same as those identified in one-on-one interview. The groups comprised of nurse educators who were not in management positions and not acting in such positions.

The chapter presents findings based on two themes. The themes are strategies in place to recruit and retain nurse educators, with five subthemes, and factors contributing to the shortage of nurse educators with six subthemes.

The objectives of the study were to:

- Identify strategies put in place by the Limpopo College of Nursing to recruit and retain nurse educators.
- Ascertain the factors that contribute to the shortage of nurse educators at the Limpopo College of Nursing.

4. 2 DEMOGRAPHIC PROFILE OF RESPONDENTS

The following demographic data was requested:

4.2.1. AGE

According to table 3, the respondents were asked to indicate their ages. The ages ranged from 30 to 60 and above, with the largest proportion between 50 and 59 years (n=10) (=43.4%), and the smallest proportion ranged between 30 and 39 years (n=1) (=4.3%), seven (n=7) (=30.4%) were between 40 and 49 years of age while five (n=5) (=21.7%) were 60 years and above. This indicated that the majority of the college staff was nearing the pensionable age. The college should do succession planning by employing younger people when they advertise posts. The literature indicates that ageing nurse educators is one of the factors that affects recruitment and retention of nurse educators resulting in a shortage (Nally and Falls Church 2008:243).

TABLE 3: AGE OF RESPONDENTS

AGE	FREQUENCY	PERCENTAGE
20-29	0	0%
30-39	1	4.3%
40-49	7	30.4%
50-59	10	43.4%
60 and above	5	21.7%
TOTAL	23	100%

4.2.2 GENDER

All (n=23) (=100%) respondents interviewed were females; this indicated that most educators at Limpopo College of Nursing were females. The college should recruit more male nurse educators in order to comply with the gender equality policy. The gender equality policy seeks to address the inequalities between men and women in society; it attempts to eradicate gender discriminatory attitudes.

4.2.3 YEARS OF EXPERIENCE IN NURSING EDUCATION

According to table 4 below, the largest proportion of respondents had six (6) to ten (10) years of experience (n=12) (=52%); the second largest had twenty (20) years and above (n=4) (=17%) and another four (n=4) (=17%) had eleven (11) to fifteen (15) years' experience. The lowest proportion had sixteen (16) to twenty (20) years (n=3) (=13%). All of them had five years or more of experience in nursing education It was assumed that those who had experience of five (5) years and above would be able to give relevant information to the study as they have been in the college for some time.

TABLE 4: YEARS OF EXPERIENCE IN NURSING EDUCATION

YEARS OF EXPERIENCE IN	FREQUENCY	PERCENTAGE
NURSING EDUCATION		
Below 5 years	0	0%
6 to 10 years	12	52.1%
11 to 15 years	4	17.3%
16 to 20 years	3	13%
20 years and above	4	17.3%
GRAND TOTAL	23	100%

4.2.4 HIGHEST PROFESSIONAL QUALIFICATION

According to table 5, the highest proportion of respondents had master's degrees (n=12) (=52%); the second highest proportion had Honours degrees (n=6) (=26%) while the lowest proportion had bachelor's degrees (n=5) (=22%). None of the respondents had a diploma or a doctorate degree which was an indication that nurse educators were well qualified to teach and were developing themselves professionally, but there is still a need for academic development to doctorate level in order to generate more knowledge in nursing issues.

TABLE 5: HIGHEST PROFESSIONAL QUALIFICATIONS

HIGHEST	PROFESSIONAL	FREQUENCY	PERCENTAGE
QUALIFICATION			
Diploma		0	0%
Bachelor's degi	ree	5	21.7%
Honours degree	e	6	26%
Master's degree	e	12	52.1%
Doctorate		0	0%

4.2.5 SALARY LEVEL

The largest proportion of respondents were at salary level 10 (n=16) (=70%) which is the mid-level of nurse educators' salaries; the rest of the respondents were at salary level 9 (n=6) (=26%) which is the lowest level of nurse educators' salary. One respondent was at salary level 12 which is the highest salary level in campuses as it is the salary level of campus heads (n=1) (=4%). Two campuses under study had no campus heads'; the people acting as heads of campuses were HODs at salary level 10. The salary levels indicate that there is a narrow career pathway at the college which the respondents identified as one of the challenges frustrating nurse educators.

TABLE 6 SALARY LEVELS OF RESPONDENTS

SALARY LEVEL	FREQUENCY	PERCENTAGE
9	06	26%
10	16	69.5%
12	01	4.3%
TOTAL	23	100%

4.3 **FINDINGS OF THE STUDY**

The findings are based on two themes, which are strategies in place to recruit and retain nurse educators with five subthemes, and factors contributing to the shortage of nurse educators with six subthemes.

TABLE 7: THEMES AND SUBTHEMES

Themes	Sub-themes
1.Strategies in place to recruit and	Attraction to nursing education.
retain nurse educators.	2. Benefits of working at the
	College.
	3. Benefits currently offered by the
	Health Department.
	4.Benefits that the Health
	Department ought to provide.
	5. Most important benefit.
2. Factors contributing to shortage of	1. Experiences of shortage of nurse
nurse educators.	educators.
	2.Causes of shortage.
	3. Staffing.
	4. Effects of shortage.
	5.Greatest challenges facing nurse
	educators.
	6. Strategies to deal with
	challenges.

4.3.1 STRATEGIES IN PLACE TO RECRUIT AND RETAIN NURSE EDUCATORS

4.3.1.1 Attraction to nursing education.

The one-on-one interview respondents indicated the following as what attracted them to nursing education:

- "...I had passion to teach; I realised it while in the ward because I used to teach students." (Respondent 1 Giyani Campus).
- "...I liked teaching; I was not attracted by anything other than passion."
 (Respondent 5 Sovenga Campus).
- "... I wanted to advance my education because I could see that there was an
 opportunity to attend workshops as compared with the nursing school where I
 was working." (Respondent 6 Giyani Campus).
- "... I wanted to impart my specialised knowledge to students because I have done an advanced course and I hoped for a promotion." (Respondent 2 Giyani Campus)
- "... I loved teaching; most of the time I was teaching in the ward. I was head hunted by the principal then." (Respondent 8 Thohoyandou Campus).
- "... I wanted to continue with my teaching career because where I was the school was closing." (Respondent 4 Sovenga Campus).
- "... I had passion to teach." (Respondent 5 Sovenga Campus).
- "...I was a tutor before I wanted to proceed with nursing academic activities and I wanted change because I had been dealing with patient care and quality in hospital for a long period." (Respondent 10).

The finding from three focus groups shows that.....

Focus group 1 members indicated that they saw it as an opportunity for promotion and better pay after the introduction of OSD. They also wanted change in the working environment, they had passion to teach, and they aspired for professional development and admired nurse educators.

Focus group 2 members asserted that they wanted change in the working environment. Some mentioned that they were unfairly treated in hospitals with regard to performance bonus because they were rated low, while the clerks rated each other higher and gave each other higher bonuses and they observed that at the College the process was fair. That is why they were attracted to move to the college. They also indicated that an opportunity to further their studies attracted them; they asserted that in hospitals the process is biased and restrictive while at the College you can study as much as you like. Health problems were a motivating factor to some; they could no longer cope with the strain of working in hospitals due to the health problems they had and to some the attraction was working near their homes.

Focus group 3 members asserted that they were attracted to the College by their passion to teach, admiration of nurse educators, and better working conditions of not working weekends, public holidays and during the night. Some indicated that they were motivated by colleagues to come over and teach.

It is clear from the responses of the respondents above that they had passion for teaching and they wanted an opportunity to grow academically. That may be the reason why many of them are sticking around at the college though there are challenges. Their responses corroborate the findings of the Canadian study on the meaning of being a nurse educator and attraction to academia done by Laurencelle et al. (2016:135). They found that wanting to teach, seeing students learn and available opportunities to study further as some of the aspects attracting nurses to academia.

An American study on factors influencing recruitment and retention of nurse educators also found one of the top attractors into Nursing Education to be an opportunity to work with students (Evans, 2013: 15).

The responses of nurse educators in focus groups were similar to those of HODs as they also mentioned that they wanted change of environment, had passion to teach and wanted professional growth.

4.3.1.2 Benefits of working at the College.

The respondents were asked to mention benefits that they were getting by working at Limpopo College of Nursing. The question was meant to identify if there were any

strategies in place to recruit and retain nurse educators. The responses of one-on-one individual interview are quoted below:

- "...To be honest I lost most of my benefits. I realised when I was here that there were no benefits; I nearly regretted coming here but I persevered because of my passion to teach. Colleagues on the other side were promoted and given higher notches while here we were disadvantaged. Even my seniors got nothing but I improved academically. If I was in the clinical area I would not have grown academically." (Respondent 1Giyani Campus).
- "...Benefits are very minimal if any; I cannot think of any benefit. There are
 more disadvantages than benefits I cannot think of any except rural
 allowance." (Respondent 2 Giyani Campus).
- "...No benefit; for every benefit you should involve labour." (Respondent 9
 Thohoyandou Campus).
- "...At long last they gave us rural allowance, and I was fortunate to get a bursary of R20 000 from the Atlantic Philanthropies donor fund to study." (Respondent 1Giyani Campus).
- "...I benefited a lot from attending workshops, I learnt new things and have more ideas about current issues." (Respondent 6 Giyani Campus).
- "...Better salary and not working on weekends." (Respondent 8 Thohoyandou Campus).
- "...At the College you become knowledgeable and broader; unlike in a one centred area, you are out of the box, not in the box, because you interact with many people, even those out of your province who are multi-lingual not only those who speak your language." (Respondent 10).
- "...I benefited from being exposed to managerial activities such as moderation of scripts and compilation of exam papers. I am growing in the process. I also benefit from better working conditions especially with regard to working hours." (Respondent 4 Sovenga Campus).
- "...You do not have to request offs unlike in the ward where you have to request and may not even be given the requested days. I learnt much about technology when I arrived here." (Respondent 5 Sovenga Campus).
- "...We are kept up to date with regard to knowledge, especially on nursing education. (Respondent 7 Thohoyandou Campus).

 "...Personal growth because we attend capacity building and interact with colleagues when doing college activities." (Respondent 9Thohoyandou Campus).

Focus group 1 mentioned exposure to technology and an opportunity to study as benefits; they indicated that at the College they were growing professionally, they were learning management skills and College activities through the workshops they attend.

Focus group 2 also mentioned professional growth through workshops as a benefit, as well as better pay, better working conditions, especially not working during weekend and at night, and the fact that they do not work with patients which is at times stressful when they are very sick and one tends to think of them even when off duty. Opportunities to study and promotion were also mentioned.

Focus group 3 mentioned the opportunity to study, professional growth, and better working conditions, especially not working at night and weekends, which gives them time to attend to their social commitments.

The opportunity to study, professional growth, attendance of workshops and working conditions of not working during weekends and public holidays were the most cited benefits by one-on-one respondents but generally the findings indicate that the respondents are not satisfied with the benefits that are currently being offered which may be the reason why the College is struggling to recruit and retain staff.

Commonly mentioned benefits between the three focus groups were: professional growth, opportunity to study, better pay after OSD, better working conditions of not working weekend and night duty. These are similar to those mentioned by HODs except for better pay. HODs were not happy with their pay because their experience was not taken into consideration during implementation of OSD, while the experience of junior lecturers was factored in. This resulted in their salary notches remaining at the same level as those of junior lecturers with experience.

The comments of the respondents corroborates the Canadian and American studies whose findings are that opportunities to study further attracted nurses to Nursing Education (Evans, 2013:15; Laurencelle et al., 2016:135).

According to Caffrey and Frelick (2006), a retention survey conducted by Malanje School of Nursing in Malawi found that nurse educators consider the following rank-ordered factors when deciding whether to stay:

- Monetary incentives.
- Housing availability.
- Further training (career options)

4.3.1.3 Benefits currently offered by the Health Department.

The respondents were asked if the Department of Health was offering them any benefits. This question was meant to identify if there were any strategies in place to recruit and retain Nurse Educators. The quotes below were the responses of one-on-one individual interviews:

- "...At long last they gave us rural allowance." (Respondent 1 Giyani Campus).
- "...I cannot think of any except rural allowance." (Respondent 2 Giyani Campus).
- "... I cannot remember any benefit except for rural allowance." (Respondent 8 Thohoyandou Campus).

Focus groups responded as follows:

Focus group 1 identified that the Department of Health currently offers a rural allowance and the Occupation-Specific Dispensation which recognises nursing education as a speciality, but the group complained that their entry notch is lower than that of specialty nurses in hospitals and clinics. Professional growth was again mentioned.

Focus group 2 only mentioned an opportunity to study as a benefit offered but on probing rural allowance was also mentioned.

Focus group 3 was adamant that there were no special benefits that the Department of Health is providing for nurse educators. They argued that OSD and rural

allowance was received by all nurses, not only nurse educators. They said the Department of Health does not seem to care about nurse educators.

The study shows that the Health Department is offering a rural allowance; this is consistent with the literature which indicates that the National Department of Health made an agreement with unions known as resolution 2 of 2004 to designate impoverished areas of the nine South African Provinces as rural and to pay the health workers in those areas an allowance which ranged from 8% to 18% of their basic salaries (Van der Vyver, 2004:3). Nurse educators complained that this privilege was extended to them only in the year 2016, that is, thirteen (13) years later.

None of the one-on-one individual respondents mentioned the Occupation-Specific Dispensation (OSD) which was being offered according to literature since the year 2007 (Van der Walt, 2007:1), but on probing they acknowledged that it was a benefit because it raised their salary notches. This indicated that nurse educators were aware of these benefits though not satisfied with them.

Rural allowance and a higher salary notch for nursing education as a speciality were mentioned by two focus groups. Some nurse educators who were not in managerial positions seemed to be more content with their salaries than HODs but some were not content. An opportunity to grow professionally was again appreciated.

According to Buykx, Humphreys, Wakerman and Pashen, (2010) as quoted in Chelule and Madiba (2014:85) the findings of their study in which they were assessing the effectiveness of rural allowance as a strategy for recruiting and retaining health professionals in rural public hospitals in the North West Province of South Africa, indicated that rural allowance alone is not sufficient to recruit and retain health professionals. Globally most strategies used to recruit and retain health professionals include financial and non-financial incentives. The study was done before the introduction of OSD.

4.3.1.4 Benefits that the Department ought to provide.

Respondents were asked to suggest benefits that the Department of Health as an employer ought to provide; this was done in order to get inputs for the recommendations on strategies to put in place in order to recruit and retain nurse

educators. Some of their statements from one-on-one individual interview were the following:

- "...It would be good if each discipline was allocated a car for accompaniment
 of students. I know of a province where the principal is given a budget to buy
 cars." (Respondent 7 Thohoyandou Campus).
- "...Proper well equipped classrooms, offices and access to Wi-Fi. Students need proper residences and recreation facilities because they are young." (Respondent 7 Thohoyandou Campus).
- "...The Government needs to give lecturers higher salaries because in the service they earn higher salaries and they have overtime allowance." (Respondent 5 Sovenga Campus).
- "...Lecturers need to be paid on marking of scripts and need to be given night duty allowance to enable them to accompany students on night duty because in the service nurses are paid for being on night duty." (Respondent 5 Sovenga Campus).
- "...Car subsidies for accompaniment of students because pool cars are few and people's programmes are derailed and flexi hours allowing lecturers to work at home." (Respondent 8 Thohoyandou Campus).
- "...Nurse Educators are underpaid; their salaries need to be raised."
 (Respondent 2 Giyani Campus).

Focus group 1 respondents indicated that the Department ought to review the implementation of the OSD; they asserted that though the notch is higher it was not pitched to where it should be

Focus group 2 respondents indicated that the Department ought to provide them with scholarships to study, revise the OSD as it was not properly implemented for nurse educators, and maintain the physical infrastructure to make the teaching and learning environment conducive. They also asserted that they should be provided with car subsidies to enable them to do clinical accompaniment of students with ease.

Focus group 3 respondents asserted that the Department of Health ought to provide nurse educators with subsidised cars for accompaniment of students, scholarships to

enable them to study further, recognise academic qualifications and adjust salary notches accordingly, equipment for better facilitation of learning and full issuing of full uniform which should include shoes, stockings and jackets because the allowance that is provided is inadequate, and cell phones to enable them to phone the campus while working away from the campus because some institutions do not allow them to make official calls in times of need, as well as flexi working hours.

The commonly mentioned benefits by respondents in all focus groups were: scholarship, subsidised cars, and recognition of qualifications and adjustment of salary. What is common between the responses of HODs and that of junior lecturers in focus groups is subsidised cars, adjustment of salaries and provision of adequate equipment for teaching which was mentioned by focus group 3 only.

According to Evans (2013:18) most of the respondents in her study on factors influencing recruitment and retention of nurse educators identified that salary was a major retention issue. In this study all respondents, that is HODs and nurse educators in focus groups, also emphasized that the salary of nurse educators should be readjusted.

The comments of the respondents corroborates the findings that the vast majority of nurse educators (98.5%) in America believed that increased salaries would attract people to be nurse educators (Evans, 2013:15).

The responses also support the theory that non-monetary benefits, if appropriately structured and aligned to public sector compensation, could attract and retain employees because the respondents also mentioned non-monetary benefits (Maserumule, 2014:73).

The above assertions imply that monetary benefits should be given the first priority, followed by non-monetary benefits, but according to Dorasamy (2014) employees who are happy with their work may enjoy greater job satisfaction when their salary levels are raised, but unhappy employees are likely to leave even when the salary is raised further. Thus where the salaries are already competitive, benefit packages such as pension and staff discounts may be helpful (Dorasamy, 2014:206).

Regarding scholarship provision, Dorasamy (2014) asserts that training opportunities enhance commitment of an employee and that employees who pay for their own

studies are more likely to leave the organisation, while those whose studies are paid for by the organisation are likely to stay as they tend to expect career advancement and may be required to repay study fees if they leave (Dorasamy, 2014: 208)

4.3.1.5 Most important benefits

Heads of Department (HODs) identified the following as the most important benefits:

- Increase in salary. "... Why can't the salary of HODs be pushed to level 11? It could attract people to come to nursing education." (Respondent 7 Thohoyandou Campus)
- "Salary-wise we are not on par with those at the clinical area." (Respondent 6 Giyani Campus)

Focus group 1 respondents identified putting people into appropriate speciality notches according to the OSD policy, and personal and professional growth as the most important benefits.

Focus group 2 respondents identified OSD revision as the most important benefit that should be provided to nurse educators.

In order of priority, focus group 3 indicated the following:

- Putting people in proper speciality notches as per OSD document.
- Conducive working environment.
- Adequate resources human and material.

The responses corroborate the findings of the study that indicated that salary was a major retention issue because all three focus groups and one-on-one interview respondents identified salary as the first priority (Evans, 2013:18). This implies that to recruit and retain staff the Limpopo College of Nursing should first ensure that the salary scales are attractive and then also attend to non-monetary benefits too.

The respondents asserted that the Department of Health did not implement the OSD properly; as a result the salaries of their counterparts that are in hospitals and clinics are higher than theirs. The percentage of rural allowance is also higher as they have been put on the lowest percentage of 8% of their basic salaries; the added that in the

service they are offered other allowances such as night duty and overtime allowance which are not offered at the college. The issue of higher salaries in hospitals and clinics than at colleges of nursing is in line with the literature. According to Nally and Falls Church (2008: 243) in America higher compensation in clinical and private sector setting lure current and potential nurse educators away from teaching.

According to Evans (2013:18), most of the respondents in her study of factors influencing recruitment and retention of nurse educators identified that salary was a major retention issue.

4.3.2 FACTORS CONTRIBUTING TO THE SHORTAGE OF NURSE EDUCATORS

4.3.2.1 Experiences on shortage.

The question was asked to explore the experiences of HODs on the shortage of nurse educators and how it affected them and their teams.

- One HOD asserted that "...during the time of gross shortage there was a lot of ill health; people were stressed and agitated and human relations were not good". (Respondent 1Giyani Campus).
- "...we are not happy about the product at the end because we cannot do
 individual follow-up of students; this is coupled with the shortage of nurses in
 the hospital wards. The shortage made us overwork ourselves." (Respondent
 2 Giyani Campus).
- "...students are many as compared to lecturers; instead of teaching 15 to 20 students, lecturers are teaching up to a 100 students." (Respondent 6 Giyani Campus).
- "...It makes us overwork ourselves especially those of us in the clinical discipline where you are expected to teach theory and practice." (Respondent 1Giyani Campus).
- "...I am doing the work of a head of department and a lecturer but when performance assessment is done I am rated and awarded the same way as an ordinary lecturer." (Acting HOD Respondent 9 Thohoyandou Campus)

 Students' competency was also said to be compromised as nurse educators were not able to accompany students in the clinical area effectively.

Focus group 1 indicated that the shortage of staff interferes with their social life as they try to keep up with the workload. They fail to perform some of their social commitments like going to church. The quality of facilitation of learning was affected because they often fail to do proper clinical accompaniment. They also asserted that the standard of entry into the posts of nurse educators was lowered in a bid to curb the shortage the College took former well performing students to study for a one year Diploma in Nursing Education and deployed them at various campuses on completion of training.

Focus group 2 simply said that they experienced a high workload.

Focus group 3 emphasized a high workload too.

Focus groups 2 and 3 mentioned high workload only as their experience, in spite of probing. Focus group1 elaborated as indicated above. HODs indicated that a high workload led to the staff being agitated, stressed and in ill health. The respondents' assertions corroborate the study done in Bugando Mwanza in Tanzania at the Catholic University of Health and Allied Sciences which found one of the factors that may influence recruitment and retention to be heavy teaching loads (Duplooy and Snyman, 2003:55).

The findings of the study show that the shortage of nurse educators results in increased workload and stress, which is consistent with findings in other related studies. According to a study done by Nally and Falls Church (2008: 243), low salaries and workload were identified by the National League for Nursing in America as motivating factors for nurse educators to leave their jobs.

Ryan et al. (2012) as quoted in Mansele and Coetzee (2012:24) asserted that academic staff members are likely to leave an institution if there are frustrations associated with family life and dissatisfaction with salary, teaching load, opportunities for career advancement and developing new ideas.

A study done in Limpopo Province of South Africa by Tshitangano (2013:6) on factors that contribute to public sector nurses turnover found that 85% of the

respondents were dissatisfied with staffing, while 78.8% were dissatisfied with salaries, while Rispel and Bruce (2015: 9) in their study titled "A profession in peril: Revitalising nursing in South Africa" recommended that an adequate number of nurse educators is needed for appropriate training. They emphasized adequate staffing and an enabling environment.

4.3.2.2 Causes of Shortage

This question was asked in order to ascertain factors that may be contributing to the shortage of nurse educators.

The following were the responses of the respondents:

- "...since the college started providing rural allowance, people started being interested to come to the College, before they were not interested".
 (Respondent 4 Sovenga Campus 3).
- "...unavailability of rural allowance and work overload made people to be reluctant to come to the College." (Respondent 2 Giyani Campus).
- "...resignations and retirements without replacement, moratorium to appoint staff are the causes of shortage of staff." (Respondent 4 Sovenga Campus).
- "...students' role is more than the staff." (Respondent 10).

Focus group 1 respondents identified workload, lower salaries than in clinical areas, and lack of overtime incentive as issues that are causing people to leave the College or preventing them from applying for posts, resulting in the shortage. They further indicated that, before the implementation of rural allowance at the College in 2016, people who were already enjoying rural allowance in hospitals or clinics were scared of losing the benefits when they joined the College as the College staffs were not designated to get it.

Focus group 2 identified the non-conducive working environment due to dilapidated physical infrastructure, resignations and retirements without replacements as contributory factors leading to shortage of staff.

Focus group 3 identified narrow career path and workload as contributory factors to shortage of staff.

The respondents identified variable factors except for workload that was mentioned by focus groups 1 and 2. The other factors identified were lower salaries, lack of overtime incentive, non-conducive environment and resignations and retirements without replacements.

Salaries and workload were identified by the American National League for Nursing as motivating factors for nurse educators to leave their jobs (Nally and Falls Church, 2008:243) this indicates that the situation at the Limpopo College of Nursing is similar to that of other nursing schools globally.

The findings indicate that, previously, lack of rural allowance at the College of Nursing discouraged nurses to apply for posts as nurse educators. Chelule and Madiba (2014: 85) in their study recommended that one of the major recruitment and retention strategies should be to increase rural allowance to 30-50%, therefore the responses of nurse educators indicates that lack of rural allowance at the College had a negative impact on recruitment and retention of nurse educators, leading to shortage of nurse educators.

Currently, a moratorium to appoint was cited as the main cause because posts of people who pass on or retire are not advertised. In her study, Robert (2014:2) stated that many schools in America were facing budget cuts and hiring freezes, which was also the case in Limpopo College of Nursing from 2007 to date (2018).

4.3.2.3 Staffing.

All (n=10) (=100%) respondents indicated that they were not well-staffed in their components. One respondent said "... Mine is a clinical component. I would be happy if I had three staff members per paper two for teaching theory and one for clinical teaching" (Respondent 1 Giyani Campus). A study done in Limpopo Province of South Africa by Tshitangano (2013:6) on factors that contribute to public sector nurses turnover found that 85% of respondents were dissatisfied with staffing.

The study shows that all three focus group members agreed that they were not well-staffed; the same sentiment was shared by the HODs. A study done in provinces of South Africa indicates that according to the NZ survey methodology a fill rate lower than 80% is regarded as a shortage (Mqolozana and Wildschut, 2008:61).

At the start of this study in 2014 the fill rates were as follows:

- Giyani Campus 21/49 = 43%
- Sovenga Campus 28/49 = 57%
- Thohoyandou Campus 25/49 = 51%

All three campuses were far below the recommended fill rate of 80%. Giyani Campus was the lowest at 37% lower than the recommended, and Sovenga was 23% lower while Thohoyandou was 29% lower than the recommended rate.

According to Gerolamo and Roemer (2011), nurse educator shortage warrants serious attention and must be a top priority on the public health agenda.

4.3.2.4 Effects of shortage of staff.

The question was posed to the respondents in order to capture their perceptions of how shortage of staff is affecting nurse training and them.

- A respondent said "...we are not doing justice to students; we do content teaching but because of the shortage we do not have any option. We just want the students to pass because if they don't we are "slaughtered". If I were to be unconscious and woke up to find one of my students next to my bed I would scream because I know they are not competent." (Respondent 1 Giyani Campus). This is an indication that she does not trust the skills of the students she taught, but the reality is that the students she is teaching are the nurses of the future.
- Another HOD said "...we are not happy about the product at the end of training; they do not master some of the skills because we are unable to do individual follow-up, eventually resulting in substandard care." (Respondent 2 Giyani Campus).
- "...If there is a shortage it is the clinical that suffers because more lecturers are needed than in a classroom where one lecturer can handle many students." (Respondent 5 Sovenga Campus).

• "...Follow-up to correlate theory and clinical is lacking because the same lecturer has to do that in the wards." (Respondent 8 Thohoyandou Campus).

Focus group 1 indicated that the shortage compromises students' competency because they were not able to give individual attention to students and to do clinical accompaniment of 30 minutes every fortnight as required as they also have other activities like supervision of research projects.

Focus group 2 respondents indicated that students' competency is compromised because clinical teaching is the most affected as students' accompaniment in clinical areas is not done as required or as planned. They further asserted that shortage of staff is a contributory factor to students' failure because individual attention cannot be given to students.

Focus group 3 also indicated that students' competency is compromised by shortage of staff as individual attention and clinical student accompaniment is not done effectively.

The findings from respondents indicates that shortage of nurse educators resulted in increased workload and stress and failure of nurse educators to give individual attention to students, resulting in failure and clinical competency of students being compromised. This may be one of the factors contributing to litigations against the Department of Health due to negligence and omissions.

According to Buehaus et al.(2007 as quoted in Shipman,2008: 522) there is an inherent connection between the nurses' shortage and nurse educators' shortage; if there are not enough nurse educators to teach there will not be enough nurses to take care of the increasing health care needs of today's ageing society. The nurses' shortage is said to compromise the quality and safety of patient care. According to Shipman (2008:521), working conditions may not get better until the nursing educational system educates enough nurses.

4.3.2.5 Challenges facing nurse educators today.

This question was posed to find out what nurse educators regarded as their greatest challenges.

- "...the move to higher education is a challenge because some lecturers do not qualify" (Respondent 5 Sovenga Campus).
- "...generational gap: younger nurse educators do not want to learn from experienced older nurse educators and older nurse educators retire with their wealth of knowledge" (Respondent 5 Sovenga Campus).
- A respondent had this to say: "...we need God to function we are always agitated because of the work load." (Respondent 1 Giyani Campus).
- Another respondent said "...the new ones are not committed to their work."
 (Respondent 5 Sovenga Campus).
- "...we no longer meet and network with people from outside previously we used to attend a lot of workshops." (Respondent 2 Giyani Campus).
- "...the Department is no longer offering workshops; it is said there is no money." (Respondent 6 Giyani Campus).
- "...salary scales of nurse educators in Limpopo are low compared to other provinces." (Respondent 6 Giyani Campus).
- "... Lack of access to technology; lecturers use their money to buy data bundles in order to access internet." (Respondent 8 Thohoyandou Campus).
- "...high input of students with low output." (Respondent 10).
- "...many changes before you implement something new come up; people are not able to cope." (Respondent 2 Giyani Campus).

Focus group 1 identified the following challenges:

- Nurse educators are compelled to do work of support staff as there is also a shortage of support staff which increases the workload of nurse educators
- Insufficient resources such as pool cars and printers; this challenge was also mentioned by HODs

The following challenges were identified by focus group 2:

Limpopo College of Nursing is run by acting personnel some of whom are uncomfortable to supervise their supervisees. Things are not done as expected. They further asserted that people do not feel comfortable as acting personnel because they act for a long period and they end up leaving the College when posts are advertised in other departments.

Focus group 3 identified the following challenges:

- Narrow career pathway; there is no upward mobility.
- Shortage of staff which demoralizes nurse educators.
- Unconducive working environment.
- The college is lagging behind with regard to technology.
- Inadequate equipment for facilitation of learning and to support facilitation of learning; they gave an example of lack of printers.

The three focus groups identified same challenges which were mainly shortage of staff and inadequate equipment. The challenges were also identified by HODs on individual interviews. The challenges are similar to those identified by a study done at Bugando Mwanza in Tanzania at the Catholic University of Health and Allied Sciences whose findings indicated that limited career options, heavy teaching loads, inadequate equipment and support staff were the main barriers to retention of staff (Mshana and Manyama, 2013:90).

According to Rawat (2012), about 57 countries in the world, most of them in Africa and Asia, face severe health workforce Most countries in Sub-Saharan Africa (SSA) have a few, or one nurse-training institutions, which lack required number of nurse educators, training materials, and have limited student facilities. This therefore negatively affects the schools' ability to increase the supply of newly-trained nurses; therefore the experiences and challenges of the Limpopo College of Nursing are similar to those experienced by other nursing education institutions globally.

In summary, the respondents identified the following challenges:

- low salary levels
- narrow career pathway
- Inadequate material resources such as cars, printers and library material
- Inadequate human resources including the support staff
- Inadequate technology such as lack of internet connectivity and student electronic record system
- Information explosion
- lack of commitment by younger nurse lecturers.

The identified challenges are the same as those identified in other studies globally. Salaries and workload were identified by the American National league for Nursing as motivating factors for nurse educators to leave their jobs (Nally and Falls Church, 2008:243).

4.3.2.6 Strategies to be put in place to deal with challenges.

The respondents identified the following as strategies that may be put in place to address challenges:

- "... we need a full time clinical psychologist to help us cope because even when students and colleagues pass on we do not heal well; we use our own strategies to cope because life is expected to go on. We are social beings and sometimes we have social problems that we cannot discuss with colleagues." (Respondent 1 Giyani Campus).
- "...conduct exit interviews especially to those who leave before retirement age to find out what make them leave." (Respondent 2 Giyani Campus).
- "...Acting allowance should be given to those acting including those relieving the Vice-Principal because they have their own jobs to do." (Respondent 2 Giyani Campus 1).
- "...salaries should be raised so we can easily recruit nurse educators."
 (Respondent 6 Giyani Campus).

- "...recruit from all provinces not only Limpopo and recruit more male lecturers." (Respondent 6 Giyani Campus)
- "...Flexi hours should be introduced allowing lecturers to work from home."
 (Respondent 8 Thohoyandou Campus).
- "...Car subsidies for accompaniment of students because pool cars are few."
 (Respondent 8 Thohoyandou Campus).
- "...salaries should be increased, and vice-principals should have deputies to monitor academic activities because the Vice-Principals are doing strategic work and most of the time away from the campus." (Respondent 10 Campus).
- "...campuses should be given adequate budget so that so that they can purchase enough material resources and posts should be advertised to obtain adequate human resource." (Respondent 10 Campus)
- "...student lecturer ratio should be normalised and there should be improved internet connectivity (Respondent 10 Campus).
- Review of staff establishment to include post of the deputy-vice principal and a secretary for the vice-principal: "...Inclusion of a post of the deputy viceprincipal and a secretary for the vice-principal because these people have a lot to do." (Respondent 7 Thohoyandou Campus).

The strategies recommended by respondents are the same as those raised in other related studies; only a few are unique to the Limpopo College of Nursing.

Duplooy and Snyman (2003:55) in their study on academic staff recruitment and retention at the Technikon Free State recommended market-related salaries, reduction of teaching time, more realistic student lecturer ratio, adequate facilities and equipment as well as reduced administrative responsibilities.

The strategies that were unique to the Limpopo College of Nursing were the revision of the staff structure to include the post of a Deputy Vice-principal and a secretary to the Vice-Principal, provision of acting allowance to those in an acting capacity, and appointment of a clinical psychologist to attend to staff and students.

Other strategies raised were the following:

- Offering of scholarship to nurse educators and affording them an opportunity to specialize in their fields of interest in order to keep abreast of new knowledge.
- Replacement of nurse educators through advertisement on attrition.
- Giving allowances to staff in acting positions.
- Offering more incentives such as adequate performance bonuses.
- Recognition of academic qualifications, that is, remuneration based on qualifications.
- Free education for staff children.
- Recruitment of male nurse educators.
- Giving nurse educators a forum to talk with higher authorities.
- A questionnaire for nurse educators to raise concerns anonymously.

Improvement of salaries was identified as the most important strategy; this contradicts what is cited in some literatures. According to Maserumule (2014), a study by Fogel and Lewin (1973) indicates that money matters less and non-pecuniary benefits matter more to public sector employees. Public sector compensation should encompass non-pecuniary compensation and postemployment benefits which are critically important in attracting, retaining and motivating state employees. He asserts that according to the study done by Anderson, Ericsson, Kristen, and Pederson (2012), non-pecuniary benefits if appropriately structured and aligned to public sector compensation could attract and retain employees.

Non-pecuniary compensation refers to non-monetary benefits such as subsidised medical aid schemes, leave benefits, flexible working hours, pension scheme and others (Maserumule, 2014:73).

These strategies were also identified in other studies. A study done by Evans (2013:16) identified the following strategies: Flexibility in schedule and job content, scholarship, positive work environment, salaries, faculty networking, infrastructure to do the job, administrative support and continuing education as strategies that may be employed. Shortage of nurse educators and the challenges that they face is a global

phenomenon and there are a lot of similarities as pointed out on various sections of this study.

4.4 CONCLUSION

In this chapter the researcher used data collected from three campuses of the Limpopo College of Nursing. All respondents were females, the majority were between 50 and 60 years of age and all had five years or more of teaching experience at the college.

Nine one-on-one interviews were conducted with heads of departments who are deputy managers using a semi-structured interview guide. The acting principal was also interviewed and three focus groups which were constituted of nurse educators who were not managers (one group from each campus) were interviewed. The findings from individual and focus groups were similar with a few differences.

All groups and individuals identified low salary notches as compared to those of their counterparts in hospitals, un-conducive working environment and inadequate resources (human and material) as the challenges currently facing nurse educators at the Limpopo College of Nursing. The respondents recommended review of salaries, flexi working hours, maintenance and improvement of the working environment, recognition of qualifications, offering of scholarships, car subsidies, cell phones, scholarships for staff's children and issuing of full uniform as strategies that may be used to attract and retain nurse educators.

CHAPTER 5

SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1 INTRODUCTION

In chapter four, data collected from individual and focus group interviews was analysed and presented according to themes and subthemes.

In this chapter, the overview of the dissertation is outlined, with a summary of findings according to themes, limitations encountered during the study are discussed, the objectives of the study are evaluated, and suggestions on further research are made. This chapter also presents the conclusion drawn from the study and recommendations based on the research findings.

The purpose of the study was to identify challenges in recruiting and retaining nurse educators in the Limpopo College of Nursing and to recommend strategies to deal with the identified challenges.

The set objectives of the study were to:

- Identify strategies put in place by the Limpopo College of Nursing to recruit and retain nurse educators.
- To ascertain the factors that contributes to the shortage of nurse educators at the Limpopo College of Nursing.

5.2 OVERVIEW OF THE CHAPTERS

The chapters of this dissertation are as follows:

Chapter one introduces the reader to the research study, indicating the identified problem, the rationale for doing the study, and the significance of the study along with its aims and objectives. It provides a brief review of the literature about the problem under study, the study area, population under study, sampling method, sample size, data collection, data analysis, and ethical considerations.

Chapter Two focuses on the discussion of literature on the topic under study and the findings of other studies on the topic. A literature review is conducted to gain more

knowledge about the subject under study, providing justification for the significance of the study (LoBiondo Wood and Haber, 1994:111).

Chapter Three focuses on the research design, detailing whether a qualitative or quantitative study was undertaken, as well as the rationale for the choice of design. Methods that were used to collect the data were also discussed.

In this chapter it was indicated that the qualitative approach was found suitable as the study intended to explore different dimensions of nurse educators' experiences and required a small number of participants, and the researcher sought to interpret the reality faced by nurse educators and intended to find out the meaning that the nurse educators attach to recruitment and retention of nurse educators (Lierh and Marcus, 1994:257).

Chapter Four describes the methods used in collection of data; the data was summarised, analysed and interpreted. Ethical considerations and limitations of the study were also discussed.

5.3 SUMMARY OF KEY FINDINGS

Findings on analysis of the demographic profile of respondents are summarised, as well as findings based on themes that were identified.

5.3.1 Demographic profile summary.

On analysis of the demographic profile, it was found that all (n=23) respondents were females, the majority of whom were between 50 and 59 years of age. That was an indication that the majority of the college staff were nearing the pensionable age and that there were fewer males, if any, at the College. It was further found that all respondents had five years or more experience in nursing education as required by the study because the researcher assumed that those who had that much experience would be able to give relevant information to the study; 52% (n=12) had experience of 6 to 10 years.

The highest proportion of respondents (n=12) (=52%) had master's degrees as the highest professional qualification, the second highest proportion (n=6) (=26%) had Honours degrees and the lowest proportion had Bachelor's degrees (n=5) (=22%), which was an indication that nurse educators were well qualified to teach and that

they are developing themselves professionally because none had a Diploma. The largest proportion were at salary level 10 (n=16) (=70%) which is a midlevel of nurse educators salaries, (n=6) (=26%) were at salary level 9 which is the lowest level, and only one (n=1) (=4%) respondent was at salary level 12, which is the highest level at the Limpopo College of Nursing. This was an indication of a narrow career pathway.

5.3.2 OBJECTIVE 1: STRATEGIES IN PLACE TO RECRUIT AND RETAIN NURSE EDUCATORS.

The respondents indicated that they were attracted to be nurse educators mainly by their passion to teach and a wish to develop professionally and academically. The majority of respondents indicated that they do not see any benefits of working at the Limpopo College of Nursing, though they identified rural allowance and the fact that they are placed at a speciality salary notch according to the Occupation Specific Dispensation as benefits. They argued that those benefits are not specific for nurse educators but are enjoyed by other nurses too, who are even put at higher notches than them. Some respondents mentioned working conditions of not working during weekends, public holidays and at night as benefits which allow them more time to spend with their families and participate in community activities.

Respondents identified increase in salary as the most important benefit that the Department of Health ought to provide in order to recruit nurse educators; they indicated that the salary levels of nurses in hospitals and clinics are higher as well as benefits such as rural allowance.

5.3.3 OBJECTIVE 2: FACTORS CONTRIBUTING TO SHORTAGE OF NURSE EDUCATORS

The findings of the study indicated that the shortage of staff results in increased workload, which leads to stress, making staff members leave the institution. This results in shortage of staff. The study also indicated that, previously, lack of rural allowance at the Limpopo College of Nursing discouraged nurses from applying for posts as nurse educators because rural public hospitals and clinics were declared in

the year 2004, while the Limpopo College of Nursing was only declared in 2016, which is 12 years later. This means that the nurses at the College have not been receiving the rural allowance for 12 years, while those in hospitals and clinics next to them were receiving such an allowance. When those with interest were transferred to the College, the benefit was withdrawn. A moratorium to appoint was cited as the current main cause of shortage of staff because posts of people who pass on or retire are not advertised.

All respondents (n=23) indicated that their components are not well staffed and that it results in students not being competent in clinical skills because nurse educators were not able to give them individual attention. The respondents indicated that the challenges facing nurse educators at Limpopo College of Nursing are low salaries, narrow career pathway, inadequate material resources, shortage of staff, and inadequate technology such as lack of internet connectivity. The information explosion, lack of commitment of younger nurse educators and the un-conducive work environment were also identified as challenges.

The respondents suggested that the following strategies should be put in place to deal with the challenges:

- Increase of salaries.
- Flexi working hours.
- Car subsidies.
- Review of staff establishment to include posts of deputy-vice principal and secretary for the vice-principal.
- Recruit from all provinces.
- Offering of scholarships to nurse educators.
- Replacement of nurse educators through advertisement on attrition.
- Giving allowance to staff in acting positions.
- Offering of more incentives such as adequate performance bonuses.
- Free education for staff children.
- Recruitment of male nurse educators.
- Giving nurse educators a forum to talk with higher authorities.
- A questionnaire for nurse educators to raise concerns anonymously, and
- Recognition of qualifications.

5.4 CONCLUSION

The findings of the study indicated that the National Department of Health introduced the rural allowance in the year 2004 and Occupation Specific Dispensation (OSD) in the year 2007 in a bid to recruit and retain nurses including nurse educators. It was unfortunate that the Limpopo Province only designated the College as rural in 2016, while all the areas and hospitals next to college campuses were declared as rural as far back as 2004. That is a gap of twelve (12) years. During that time, nurses in the service enjoyed the benefit and were reluctant to be nurse educators because that would make them lose the benefit. The study also identified strategies that may be employed by the Department and the Limpopo College of Nursing to attract and retain nurse educators. Four strategies were identified by the respondents as the most important namely:

- Improvement of nurse educators' salaries
- Advertisement of vacated posts as soon as they are vacated
- Proper maintenance of physical infrastructure to make the working environment conducive, and
- Provision of adequate equipment including technology.

The study confirmed the findings of other related studies done in South Africa and worldwide. Duplooy and Snyman (2003) in their research study on academic staff recruitment and retention at Technikon Free State in South Africa made the following recommendations to improve recruitment and retention of academic staff: market related salaries, reduction of teaching time, more realistic student lecturer ratio, adequate facilities and equipment, as well as reduced administrative responsibilities. These recommendations are the same as those made by the nurse educators of Limpopo College of Nursing.

In a study done in Bugando Mwanza in Tanzania at the Catholic University of Health and Allied Sciences found the factors that influence recruitment and retention to be small salaries, limited career options, heavy teaching loads, inadequate equipment and support staff as main barriers to recruitment and retention of staff (Mshana and Manyama, 2013:90). All factors were identified by the Nurse Educators of Limpopo College of Nursing.

According to Rawat (2012), most countries in Africa and Asia face severe health work force crises. She further asserted that these countries have a few (or one) nurse training institutions which lack the required number of nurse educators, training materials and have limited facilities. This was found to be the case with the Limpopo College of Nursing

Both objectives of the study were attained. They were discussed under findings. It was found that there was a rural allowance, Occupation-Specific Dispensation and a few benefits in place like attendance of workshops (which was inadequate due to budget constraints). Additional strategies and benefits were suggested by respondents and have been included under recommendations.

Factors that contribute to the shortage of nurse educators were also identified, such as workload leading to stress, making nurse educators likely to leave, dissatisfaction with salary and work environment, moratorium on appointing staff due to budget constraints, and narrow career pathway.

In conclusion, the findings of this study indicate that a reasonable salary, positive work environment, reasonable workload, support for academic and professional growth and reasonable non-monetary benefits would promote job satisfaction as well as recruitment and retention of nurse educators.

5.5 RECOMMENDATIONS

5.5.1 STAFFING

Respondents indicated that they were not well staffed in their components. According to Wildschut and Mqolozana (2008), the norms of the New Zealand Survey methodology state that a fill rate lower than 80% is regarded as a shortage while the work study section of the Department of Health in Limpopo recommends a fill rate of 70%. As indicated on analysis of the findings, none of the campuses had the recommended fill rates by the start of this study in 2014. This therefore supports the respondents' assertions that they are not well staffed.

The following is therefore recommended to improve staffing:

- Funded vacant posts should be advertised as soon as possible to avert the situation of having many staff members in acting positions and a shortage of staff. The posts should be filled within two to three months.
- Staff members in acting positions should be remunerated as per departmental
 policy and should not be left to act for long periods. The findings of the study
 indicated that the respondents were not happy about the many staff members
 who are in acting positions and not given an acting allowance. They further
 asserted that some of the people in acting positions were not comfortable to
 supervise, resulting in inefficiencies.

According to Rispel and Bruce (2015), an adequate number of nurse educators is needed for appropriate training to take place, while, according to Shipman (2008), nurse educators' shortage warrants serious attention and must be a top priority on the Public Health agenda. She further asserted that if there are not enough nurse educators to teach, there will not be enough nurses and that a nurses' shortage compromises the quality and safety of patient care.

5.5.2 ATTRACTION OF NURSES TO NURSING EDUCATION

In order to recruit and retain more nurse educators, the following strategies should be put in place, as suggested by the respondents:

• To attract more nurses to be nurse educators, scholarships should be offered to nurse educators to afford them an opportunity to keep abreast with new knowledge. Relevant workshops should also be conducted because many of the nurse educators indicated that they were attracted to the College by a passion to teach but also by the observation that the College conducted or sent staff to attend workshops. They wanted to grow academically and professionally. They saw the college as the right environment to do so.

According to studies done by Evans (2013) and Laurencelle et al. (2016), opportunity to study further attracted nurses to Nursing Education. Dorasamy (2014) asserted that training opportunities enhance commitment of an employee and that employees

who pay for their own studies are more likely to leave the organisation, while those whose studies are paid for by the organisation are likely to stay as they tend to expect career advancement and may be required to repay study fees if they leave.

5.5.3 RECRUITMENT OF MALE NURSE EDUCATORS

The analysis of the demographic data in this study revealed that all (n=23) respondents interviewed were females, which is an indication that there were few male nurse educators or none at the Limpopo College of Nursing. It is recommended that the College recruit more males in order to comply with the Employment Equity Act No. 55 of 1998 and the gender equality policy. Both documents seek to address inequalities between men and women in society. They attempt to eradicate gender discriminatory attitudes.

5.5.4 RECRUITMENT OF YOUNG NURSE EDUCATORS

Findings on analysis of demographic data indicated that a large proportion (n=10) (=43.4%) of respondents were 50-59 years of age. The second largest proportion (n=7) (=30.4%) were 40-49 years of age while the third largest proportion (n=5) (=21.7%) were 60 years and above. Only one (n=1) (=4.3%) respondent was 30-39 years of age. The findings were an indication that the majority of nurse educators were nearing pensionable age. It is recommended that the College do succession planning by employing younger people when posts are advertised.

According to a study by Nally and Falls Church (2008), ageing nurse educators is one of the factors that affects recruitment and retention of nurse educators, resulting in shortage.

According to Conrad (2011), the reasons for the continuing challenge to nurse educators were an ageing and overworked faculty who earn less than nurses entering clinical practice.

5.5.5 SALARIES

- Salaries of nurse educators in general should be reviewed to reduce the disparity between nursing education and nursing service. Academic qualifications should be taken into consideration: a nurse educator with a master's degree should have a salary notch higher than the one with an honours degree. The morale of nurse educators would be boosted and many nurse educators may be retained.
- According to Carlson (2009 as quoted in Conrad, 2011) in the United States of America nursing students with two or three years' experience often earn more than the instructors that taught them, even though the nursing professors have to pursue costly master's or doctoral degrees to become educators.
- The Department should review the implementation of the Occupation-Specific Dispensation (OSD) on nurse educators to redress the situation of those who were disadvantaged when their experience was not taken into account.

According to Evans (2013), the vast majority (98.5%) of American nurse educators believed that increased salaries would attract people to be nurse educators. The findings of this study too indicated that nurse educators take salary issues as a priority.

According to Caffrey and Frelick (2006), a retention survey conducted by Malanje School of Nursing in Malawi found that nurse educators, when asked to rank order factors when deciding whether to stay, monetary incentives were ranked first.

According to Ryan et al. (2012) as quoted in Mansele and Coetzee, 2012), staff members are likely to leave an institution if there are frustrations associated with dissatisfaction with salary.

Geralamo and Roemer (2011) in their study of factors influencing recruitment and retention of nurse educators in America found that inadequate funding for additional

Nurse educator's posts, dissatisfaction with careers in nursing education and low academic salaries were some of the factors that had an influence.

5.5.6 BENEFITS

Benefits should be given to deserving staff. The findings of the study indicated that the respondents do not find it beneficial to work at the Limpopo College of Nursing; therefore offering of more benefits would be necessary to recruit and retain nurse educators. The benefits that the respondents suggested were:

- Flexi working hours
- Car subsidies
- Free education for staff children
- Scholarships
- Cell phones
- Payment on marking examination scripts.

5.5.7 PHYSICAL INFRASTRUCTURE

Physical infrastructure in campuses should be well maintained in order to make the campuses an attractive and conducive working environment. The findings of the study indicated that staff members are demoralised and embarrassed by the dilapidated and poorly maintained buildings and surroundings. They indicated that they do not feel proud to be working at the Limpopo College of Nursing and would leave should an opportunity arise. According to Rispel and Bruce (2015), for appropriate nurse training to take place, there should be appropriate infrastructure.

5.5.8 EQUIPMENT

The findings of the study indicated that inadequate equipment including technology is one of the challenges that are faced by nurse educators. It is therefore recommended that the College be given adequate budget to procure basic equipment such as printers which were commonly cited as examples by respondents, and further that it be ensured that the technology at campuses be upgraded to the level of other higher institutions of learning. The students and staff

should be able to access the internet for their research projects and search for any information needed. The campuses should be able to keep electronic records instead of paper records, which are cumbersome and bulky, taking up a lot of storage space.

5.6 LIMITATIONS OF THE STUDY

The sample size was too small to extrapolate findings to other colleges either nationally or worldwide, and data was collected only in selected campuses of Limpopo College of Nursing. Generalisations can only be made applicable to the Limpopo College of Nursing itself. Data collection and analysis was very time consuming, where the researcher had to analyse every word on the interview schedule as well as listen to the audio recorded conversations several times. The study may have been subjective, because the findings relied on the researcher's views and nurse educators with less than five years of experience in nursing education were excluded from the study. It may be difficult to replicate the study because it is unstructured, and is reliant on the researcher as the main instrument of data collection (Bryman, 2012: 405; Mouton, 2013: 149).

5.7 CONTRIBUTION OF THE STUDY

The findings of the study may assist policy makers in Limpopo Department of Health and Limpopo College of Nursing in formulation of policies on recruitment and retention of nurse educators in Limpopo Province and also to formulate appropriate strategies to recruit and retain nurse educators. Researchers and academics interested in the subject under study may choose to replicate the study on a larger scale, yielding information that may be valuable worldwide in the Public Administration discipline.

5.8 FURTHER RESEARCH

Further research could be conducted on the following topics:

- Challenges in recruitment and retention of nurse educators in South Africa.
- Perception on competency of nurses trained at Limpopo College of Nursing in South Africa.
- Impact of the Occupation-Specific Dispensation on nurse educators in South Africa

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ANNEXURE: A

ENQUIRIES: Edith Tintswalo Rikhotso

Cell: 0823347950

INTERVIEW CONSENT FORM

I am a student in Master of Public Administration (MPA) at the Turf loop Graduate School of Leadership (TGSL). My research study topic is "Challenges in recruitment and retention of nurse educators: A case of the Limpopo College of Nursing, South Africa".

- The purpose of this study is to identify challenges in recruiting and retaining nurse educators at Limpopo College of Nursing and to recommend strategies to deal with the identified challenges.
- Please note that as you are being interviewed you will be audio recorded too with your permission.
- Your personal details will not be revealed therefore during our interaction you will not be called by name and you should not identify yourself in order to remain anonymous.
- You can withdraw from the study at any time and you will not be asked any questions about why you no longer want to take part.

I the undersigned have read and understood the research study information above, I have been given an opportunity to ask questions about the research study, and have also been given adequate time to consider my decision. I therefore agree to take part in the study.

Name of Participant
SignatureDateDate
Name of Researcher: Edith Tintswalo Rikhotso
SignatureDateDate

Thank you very much for agreeing to participate in this study.

ANNEXURE: B

ONE-ON-ONE INDIVIDUAL AND FOCUS GROUP INTERVIEW SCHEDULE INSTRUCTIONS: MARK YOUR RESPONSE WITH AN (X)

1. DEMOGRAPHIC PROFILE OF RESPONDENTS

1.1 What is your age range?

20-29	
30-39	
40-49	
50-59	
60 and above	

1.2 Gender

Male	
Female	

1.3 How long have you been a nurse educator at Limpopo College Of? Nursing?

Below 5 years	
6 to 10 years	
11 to 15 years	
16 to 20 years	
20 years and above	

1.4 What is your highest professional qualification?

Diploma	
Bachelor's degree	
Honours degree	
Master's degree	
Doctorate	

1.5 At what salary level are you?

Level 9	
Level 10	
Level 12	

ANNEXURE: C

INTERVIEW GUIDE FOR BOTH ONE-ON-ONE AND FOCUS GROUPS

1	I. STRATEGIES IN PLACE TO RECRUIT AND RETAIN NURSE EDUCATORS
	1.1 What attracted you to apply for a job as a nurse educator /Lecturer at the Limpopo College Nursing?
	1.2 What are the benefits of working at Limpopo College of Nursing?
	1.3 What are the benefits that the Department of Health is currently offering to recruit and retain Nurse Educators?
	1.4 Are there benefits that the Department of Health ought to provide to recruit and retain Nurse Educators that are currently not being provided?
	1.5 Which one of the benefits you mentioned do you regard as the most important?

2. FACTORS CONTRIBUTING TO SHORTAGE OF NURSE EDUCATORS

2.1 Think back to the time the campus experienced a shortage of Nurse Educators: what were your experiences?
2.2 In your opinion what may have been the causes of the shortage of Nurse Educators at Limpopo College of Nursing?
2.3 Are you well-staffed in your component?
Yes
No
2.4 If your component is not well staffed, how is the Nurse Educator's shortage affecting nurse training in Limpopo College of Nursing?
2.5 What is the greatest challenge facing Nurse Educators today at the Limpopo College of Nursing?
2.6 What strategies should be put in place to deal with the challenges? Mention at least three (03) strategies.
2.7 Is there anything that we should have talked about but did not?
Source: (Krueger, 1998: 4)

ANNEXURE: D

P.O.Box 1798

Giyani

0826

08-10-2017

Attention: Latif Shamila

The Head of Department-Health

Limpopo Province

PERMISSION TO CONDUCT A RESEARCH STUDY

I hereby request permission to conduct a research study at the Limpopo College of Nursing.

I am an employee at the Limpopo College of Nursing – Giyani Campus and a student in Master of Public Administration (MPA) at the Turfloop Graduate School of Leadership (TGSL). My research study topic is "Challenges in recruitment and retention of nurse educators: A case of Limpopo College of Nursing, South Africa".

The purpose of the study is to identify challenges in recruiting and retaining nurse educators at the Limpopo College of Nursing and to recommend strategies to deal with the identified challenges.

Receive attached the following documents as required:

- Approved research proposal.
- Consent form.
- Interview schedule and
- Ethical clearance certificate.

Hoping for a favourable response

Yours truly,

Edith Tintswalo Rikhotso

.....

Contact no: 082 334 7950

Email: rikhotsoet@webmail.co.za or



University of Limpopo

Department of Research Administration and Development Private Bag X1106, Sovenga, 0727, South Africa Tel: (015) 268 2212, Fax: (015) 268 2306, Email:noko.monene@ul.ac.za

TURFLOOP RESEARCH ETHICS COMMITTEE CLEARANCE CERTIFICATE

MEETING:

31 August 2017

PROJECT NUMBER:

TREC/269/2017: PG

PROJECT:

Title:

Challenges in the recruitment and retention of nurse educators:

A case of Limpopo College of Nursing, South Africa

Researcher: Supervisor: ET Rikhotso Dr AA Asha

Co-Supervisor:

N/A

School:

Turfloop Graduate School of Leadership

Degree:

Masters in Public Administration

PROF TAB MASHEGO

CHAIRPERSON: TURFLOOP RESEARCH ETHICS COMMITTEE

The Turfloop Research Ethics Committee (TREC) is registered with the National Health Research Ethics Council, Registration Number: REC-0310111-031

Note:

 Should any departure be contemplated from the research procedure as approved, the researcher(s) must re-submit the protocol to the committee.

 The budget for the research will be considered separately from the protocol. PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES.

Finding solutions for Africa

DEPARTMENT OF HEALTH

Enquiries: Stols M.L (015 293 6169)

Ref;4/2/2

Rikhotso ET PO Box 1798 Giyani 0826

Greetings,

RE: Challenges in the recruitment and retention of nurse educators: A case of Limpopo College of Nursing, South Africa

The above matter refers.

- 1. Permission to conduct the above mentioned study is hereby granted.
- 2. Kindly be informed that:-
 - Research must be loaded on the NHRD site (<u>http://nhrd.hst.org.za</u>) by the researcher.
 - Further arrangement should be made with the targeted institutions, after consultation with the District Executive Manager.
 - In the course of your study there should be no action that disrupts the services.
 - After completion of the study, it is mandatory that the findings should be submitted to the Department to serve as a resource.
 - The researcher should be prepared to assist in the interpretation and implementation of the study recommendation where possible.
 - The above approval is valid for a 3 year period.
 - If the proposal has been amended, a new approval should be sought from the Department of Health.
 - Kindly note, that the Department can withdraw the approval at any time.

Your cooperation will be highly appreciated.

Head of Department DOMGO

2017/11/06 Date

18 Collega Street, Polokwane, 0700, Private Bag x8902, POLIOLKWANE, 0700 Tel: (015) 283 6000, Fax: (015) 293 8215/20 Website: http://www.impopo.gov.za



University of Limpopo Faculty of Management and Law OFFICE OF THE EXECUTIVE DEAN

Private Bag X1106, Sovenga, 0727, South Africa Tel:(015) 268 2558, Fax: (015) 268 2873, Email: johannes.tsheola@ul.ac.za

13 June 2017

ET Rikhotso (201428436)
TURFLOOP GRADUATE SCHOOL OF LEADERSHIP
MASTER OF PUBLIC ADMINISTRATION

Dear Ms Rikhotso ET

FACULTY APPROVAL OF PROPOSAL

I have pleasure in informing you that your Masters proposal served at the Faculty Higher Degrees Committee meeting on 13 June 2017 and your title was approved as follows:

"Challenges in the Recruitment and Retension of Nurse Educators: A Case of the Limpopo College of Nursing, South Africa".

Note the following: The study

Ethical Clearance	Tick One
Requires no ethical clearance	
Proceed with the study	
Requires ethical clearance (Human) (TREC) (apply online)	
Proceed with the study only after receipt of ethical clearance certificate	1
Requires ethical clearance (Animal) (AREC)	+
Proceed with the study only after receipt of ethical clearance certificate	

Yours faithfully

Prof MP Sebola

Chairperson: Faculty Higher Degrees Committee

CC: Dr AA Asha Supervisor, Dr E Zwane, Acting Programme Manager and Prof MX Lethoko, Acting Director of School

Finding solutions for Africa

Anne Kruger Language Practice

- 19 Nooitverwacht, 105 Main Street, Paarl 7646
- tel 072 374 6272 or 021 863 2315
- annekruger25@gmail.com

To whom it may concern

DECLARATION OF LANGUAGE EDITING

I, Elsje Anne Kruger, hereby declare that I have personally read through the dissertation of Edith

Tintswalo Rikhotso titled "Challenges in the recruitment and retention of nurse educators: A case of

Limpopo College of Nursing, South Africa".

I have highlighted language errors and checked references. The track changes function was used and the author was responsible for accepting the editor's changes and finalising the references. I did no structural rewriting of the content.

Yours sincerely

Eakinger

Date

30-08-2018