

**DEVELOPMENT OF RECRUITMENT STRATEGIES FOR PROFESSIONAL
NURSES IN MANKWENG HOSPITAL INTO A MASTERS STUDIES OF NURSING
AT UNIVERSITY OF LIMPOPO, SOUTH AFRICA**

by

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DECLARATION

I Khetsiwe Fisiwe Nsibande declares that this dissertation on the development of recruitment strategies for professional nurses into a masters studies of nursing at University of Limpopo in Mankweng hospital 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.

.....
K.F NSIBANDE

.....
DATE

DEDICATION

This work is dedicated to my family, my church, University of Limpopo, all the nurses in Mankweng Hospital and other hospitals.

ACKNOWLEDGEMENTS

I praise the Almighty God who gave me daily strength while I was completing this work. I also want to thank the following people for their respective contributions to this dissertation:

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LIST OF ABBREVIATIONS

C.A.P.A:	Council of Australian Postgraduate Associations
C.H.E:	Council for Higher Education
D.O.E:	Department of Education
HEMIS:	Higher Education Management Information System
I.S.S.O:	International Student Support Office
N.Q.F:	National Qualifications Framework
N.R.F:	National Research Foundation
RNs:	Registered Nurses
S.A.N.C:	South African Nursing Council
U.K:	United Kingdom
UL:	University of Limpopo
USA:	United States of America

ABSTRACT

BACKGROUND

A master's program in nursing is an essential tool to prepare students to manage and offer health care services to the public professionally and successfully. However, there has been low enrolment of professional nurses into masters studies of nursing in a higher educational institution. Therefore the study aimed to develop recruitment strategies for professional nurses into Master studies of Nursing at a higher educational institution.

METHODS

The qualitative research method was used to develop recruitment strategies of professional nurses in Mankweng Hospital into a Master's Studies at the University of Limpopo. The population were professional nurses with honours equivalent and those with honours degree. Semi-structured interviews were conducted from eighteen professional nurses who were purposely selected to participate in the study. Tech's coding method of data analysis was used to analyze audio-recorded data.

RESULTS

The results indicated that lack of study leaves, shortage of nurses, lack of information about requirements for enrolling into masters, lack of recognition for postgraduates and financial instability contributed to most professional nurses not registering for master's studies.

CONCLUSION

The study concludes that the institution of higher learning should develop recruitment strategies for master's studies in nursing. Findings revealed lack of recruitment strategies, information about the masters degree, and scholarship as well as employer related factors such as lack of study leaves as challenges for recruiting nurses into a masters studies. Such strategies

include the increase of funding scholarships by the universities that can facilitate the postgraduate uptake and allocation of study leaves for professional nurses by the Department of Health.

DEFINITION OF CONCEPTS

Recruitment strategies

Recruitment is the process of finding and attracting capable applicants (Bianca, 2012). Strategies refer to ways by which an organization seeks to meet its objective (Bianca, 2012). In this study, recruitment strategies refer to a process of attracting a pool of potentially qualified professional nurses to study a Master's degree in the University of Limpopo.

Professional nurses

A professional nurse; midwife or staff nurse for specified conditions or intervention; 'supportive care' means all services which enhance the other elements of care, essential to individualized care, including health education, advocacy, and competence, (SANC, 2013). In this study professional nurses refer to a nurse who is registered with SANC, employed at a Mankweng hospital and has an honour's degree.

Master's studies

Master's studies is an academic degree granted to individuals who have undergone a study demonstrating a mastery or high-order overview of a specific field of study or area of professional practice (HEMIS, 2009). In this study, it is a qualification that professional nurses should obtain at an educational institution of higher learning.

TABLE OF CONTENTS

CHAPTER 1: OVERVIEW OF THE STUDY

1.1 INTRODUCTION AND BACKGROUND	1
1.2 PROBLEM STATEMENT	3
1.3 THEORETICAL FRAMEWORK.....	4
1.4 PURPOSE OF THE STUDY	5
1.4.1 Aim of the study	5
1.4.2 Research Objectives.....	5
1.5 RESEARCH QUESTION.....	5
1.6 OVERVIEW OF RESEARCH METHODOLOGY.....	5
1.7 SIGNIFICANCE OF THE STUDY	6
1.8 CONCLUSION.....	6

CHAPTER 2: LITERATURE REVIEW

2.1 INTRODUCTION.....	7
2.2 LITRATURE SEARCH STRATEGY.....	7
2.3 PROFESSIONAL NURSES ACQUARING KNOWLEDGE AND SKILLS...8	
2.4 CHALLENGES FACED BY POSTGRATUATE STUDENTS.....	9
2.5 DEVELOPMENT OF STRATEGIES.....	10
2.5.1 Traditional Media Used for Recruiting.....	10
2.5.2 Print.....	11
2.5.3 Availability of scholarships.....	12
2.6 SUMMARY AND CRITIQUE OF LITERATURE.....	13
2.7 CONCLUSION.....	15

CHAPTER 3: RESEARCH METHODOLOGY

3.1 INTRODUCTION	15
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3.2 QUALITATIVE RESEARCH APPROACH.....	15
3.3 RESEARCH DESIGNS	15
3.3.1 Exploratory Design.....	16
3.3.2 Descriptive design.....	16
3.4 STUDY SITE	16
3.5 POPULATION AND SAMPLING	17
3.5.1 Population.....	17
3.5.2 Sampling.....	17
3.5.2.1 <i>Inclusion criteria</i>	17
3.5.2.2 <i>Exclusion criteria</i>	17
3.6 PREPARATION FOR DATA COLLECTION	18
3.7 DATA COLLECTION.....	18
3.7.1 Semi structured interview.....	18
3.7.2 Support tools for data collection.....	19
3.7.3 Data saturation.....	19
3.8 DATA ANALYSIS.....	20
3.9 MEASURES TO ENSURE TRUSTWORTHINESS	21
3.9.1 Credibility	22
3.9.2 Dependability.....	22
3.9.3 Confirmability	22
3.9.4 Transferability	23
3.10 ETHICAL CONSIDERATIONS.....	23
3.10.1 Permission to conduct the study	23
3.10.2 Informed consent and voluntary participation.....	23
3.10.3 Principle of utonomy.....	24

3.10.4 Principle privacy, autonomy and confidentiality	24
3.10.5 Principle of justice	25
3.10.6 Principle of beneficence	25
3.11 CONCLUSION	25

CHAPTER 4: DISCUSSION & INTERPRETATION OF FINDINGS

4.1 INTRODUCTION.....	26
4.2 CHARACTERISTICS OF PROFESSIONAL NURSES.....	26
4.3 RESEARCH RESULTS.....	27
4.4 INTEGRATION OF THEORY OF CHANGE AND STUDY RESULTS.....	44
4.5 CONCLUSION.....	45

CHAPTER 5: RECRUITMENT STRATEGIES OF PROFESSIONAL NURSES INTO MASTERS STUDIES OF NURSING

5.1 INTRODUCTION	46
5.2 PURPOSES OF THE RECRUITMENT STRATEGIES	46
5.3 RECRUITMENT STRATEGIES OF PROFESSIONAL NURSES INTO MASTERS STUDIES OF NURSING.....	46
5.3.1 Development or Improvement of recruitment strategies by the university could lead to improved uptake for masters degree.	46
5.3.2 Drawing seniority list in hospital toward the provision of scholarships by the Government.....	47
5.3.3 Allocations of fully funded scholarships by tertiary educational institutions	48
5.3.4 Allocation of research mentors.....	48

5.3.5 Dissemination of information related to the registration opportunities out as an option.....	48
5.4 CONCLUSION.....	49
CHAPTER 6: SUMMARY, LIMITATION, RECOMMENDATIONS AND CONCLUSION	
6.1 INTRODUCTION.....	50
6.2 SUMMARY OF THE STUDY	50
6.2.1 Aim of the Study.....	50
6.2.2 Objectives of the Study	50
6.2.3 Research question.....	51
6.2.4 Research methodology.....	51
6.2.5 Findings of the study.....	51
6.3 LIMITATIONS OF THE STUDY	53
6.4 RECOMMENDATIONS.....	53
6.4.1 Recommendations to the Universities.....	53
6.4.2 Recommendations to the department of health.....	54
6.4.3 Recommendations to professional nurses.....	54
6.5 CONCLUSION.....	54
LIST OF FIGURES	
Figure 1.1: Steps of bringing a change in the organization.....	4
Figure 4.1: Integration of Theory of Change and study finding.....	45
LIST OF TABLES	
Table 4.1: Characteristics of professional nurses.....	26
Table 4.2: Themes and Sub-themes.....	27

REFERENCES.....	55
Appendix A: Interview guide.....	61
Appendix B: Example of a transtcript.....	62
Appendex C: Consent form.....	68
Appendix D: Ethical clearence.....	69
Appendix E: Permission letter Department of Health.....	70
Appendix F: Permission letter Mankweng Hospital.....	71
Appendix G: Independent coder.....	72
Appendix H: Letter from the Editor.....	73

CHAPTER 1: OVERVIEW OF THE STUDY

1.1 INTRODUCTION AND BACKGROUND

A masters program in nursing is an essential tool to prepare the students to manage and offer health care services to the public professionally and successfully. It is upon this premise that obtaining a Masters degree in Nursing will increase the knowledge and skill of health care professionals as well as patient's satisfaction with care (Yadidia, 2016). An American Association of Council of Nurses (2011) states that a Masters program prepares nurses for flexible leadership and critical action within the complex, changing systems, including health, educational, and organizational systems. They further outlined that a Masters Program equips nurses with valuable knowledge and skills to lead change, promote health, and elevate care in various roles and settings (American Association of College of Nursing, 2011).

There is, however, a continuous void created by the fact that very few students in South Africa, a body which represents South Africa's universities, (HESA, 2009), said in its report: "Postgraduate student enrolments and outputs remain low in relation to national economic and social development needs, and between 2010, there was a marginal increase of 1.8% in the size of the postgraduate student body". The issue of low enrolment outputs is evident in the University of Limpopo which is one of the traditional Universities that have a large number of students from deprived families; as such, the students do not afford the postgraduate programs. The Department of Nursing Science under the School of Healthcare in the Faculty of Health Sciences experience low enrolment in the Master's program. Yorke and Longden (2013), a Health Services Researcher, posits that the declining of enrolment for the postgraduate program in Nursing is due to several aspects of work-life that include dissatisfaction with the workload, salary, and availability of teaching support.

Therefore, low enrolment of the students into a Masters program poses a threat on the health care system as a result of incompetent professional nurses, which will lead to the closure of the school of nursing in some countries. A study by Feldman, Faan, Greenberg, Marilyn, Jaffe-Ruiz, Kaufman, and Cignarale (2015) shows that qualified applicants are being turned away in their thousands, in most of the countries as a result of an insufficient pipeline of the faculty. On the other hand, Yedidia (2016)

suggests that to remedy the situation, the Schools of Nursing should implement effective strategies for addressing the nurse faculty shortage. It is critical that the University of Limpopo develops some recruitment strategies that will promote and drive postgraduate nurses to pursue their Masters in nursing degrees.

Furthermore, the South African Nurses association revealed another concerning statistic in its 2000-2001 enrollment and graduation report – that the enrollment of masters-level students decreased by 3.9% (Brooks, 2009). What could be the source of this decline? It is essentially a combination of factors but chief amongst them is that the unreasonable remuneration system of obtaining a masters degree may not appear as enticing to some nurses since many hospitals do not differentiate the attainment of advanced education when considering salary (Moore & Simendinger, 2014).

The Department of Nursing Science at the University of Limpopo is consequentially not immune to the challenges mentioned above. There is a small number of enrolment master nursing students each year as compared to its counterparts (UL Fact Site, 2008). Little research has been carried out to this day to look into the long-standing Yorke and Longden (2013) low throughput and graduation rates in postgraduate education especially around Limpopo Province. Even) assert the proposition that very little is known with certainty about various factors that influence student throughput and graduation in postgraduate nursing education. However, the lower graduation rates at a postgraduate level call for strategies to scale up throughput rates to retain students in their programs and enable them to complete their program courses (HEMIS, 2009). By 1987, twenty years after the University of Pretoria had taken the lead to initiate Masters programs in nursing, the number of Universities in the country offering such programs had risen to 11. At this time very little published material was available on the nature and form of the master's program offered by the different Departments of Nursing. At the end of 2012, the percentage distribution of headcount enrolments in public higher education institutions at the end of 2011 was 9.2 percent (HEMIS, 2009), which was considered low compared to the healthcare service demands in South Africa.

Given this background, this, therefore, becomes a subject to be researched to determine strategic measures that can be utilized to recruit professional nurses into a Masters degree at the University of Limpopo. There is also a need to analyze what procedures, practices, and criteria govern the admission, training and examining of Masters students in Departments of Nursing Science at South African Universities. More so, there is a need to identify some strategies that would promote and further drive graduate nurses and other health professionals to pursue advanced degrees especially at the University of Limpopo.

1.2 PROBLEM STATEMENT

According to the University of Limpopo Fact Site (2008), the annual graduation rate among nursing postgraduate students over 6 years from the year 2000 to 2005 was much lower compared to the enrolment rate over the same period. Student graduation data (UL Fact Site, 2008) indicate that over a 5 year period from 2000 to 2005, an average of 13.7% of postgraduate nursing students dropped out, 6.5% were excluded while 27.9% graduated and 51.9% difference is not accounted for, this perhaps corresponds to the number of students that are still in the education system. This could suggest that their progress was slow. According to the UL fact site, the Department of Nursing Science was enrolling less than 8 students into postgraduate studies from 2010 to 2014, this suggests limited recruitment strategies into postgraduate studies in the university.

In the past 10 years, the University of Limpopo, Department of Nursing Science has witnessed an excellent academic development of its staff. The department having consisted of 8 staff members have more of the staff being full professors as compared to other Nursing Department of other universities. This implies that new knowledge has been gained and there is more supervision capacity to assist in postgraduate studies. The department can now produce more advanced diplomas, Masters and doctoral nursing students. However, the more postgraduate student cannot be produced while the enrolment number was low. Also, the Department of Nursing Science has not dedicated much effort in recruiting postgraduate students. Therefore, the researcher believes that developing recruitment strategies for professional nurses into Masters Studies of Nursing will benefit the higher educational institution

1.3 THEORETICAL FRAMEWORK

The theory of change was used in the study. Theory of change is a theory-based approach to planning, implementing or evaluating change at an organization. The theory of change is chosen to support and guide the study methods. A theory of change articulates explicitly how a project or initiative is intended to achieve outcomes through actions while taking into account its context Connell, and Klem, (2000). Developing strategies is regarded as a project, which will take into account what currently exists about the postgraduate studies in the University. Figure 1.1 explains the steps to be considered when bringing a change in the university and the mentioned steps are to be considered when collecting and analyzing data from professional nurses. Connell, and Klem, (2000) stated that theories of change may be articulated in different ways and using different methods. The inductive approach will be followed by, observing phenomena in action rather than relying on what is already known or assumed about how it works. Connell, and Klem, (2000) support the idea that if the proposal utilizes the inductive approach it would support the qualitative research method. In using this approach, professional nurses' views were explored and described, and the findings using the steps stated in figure 1.1, were used to develop strategies.

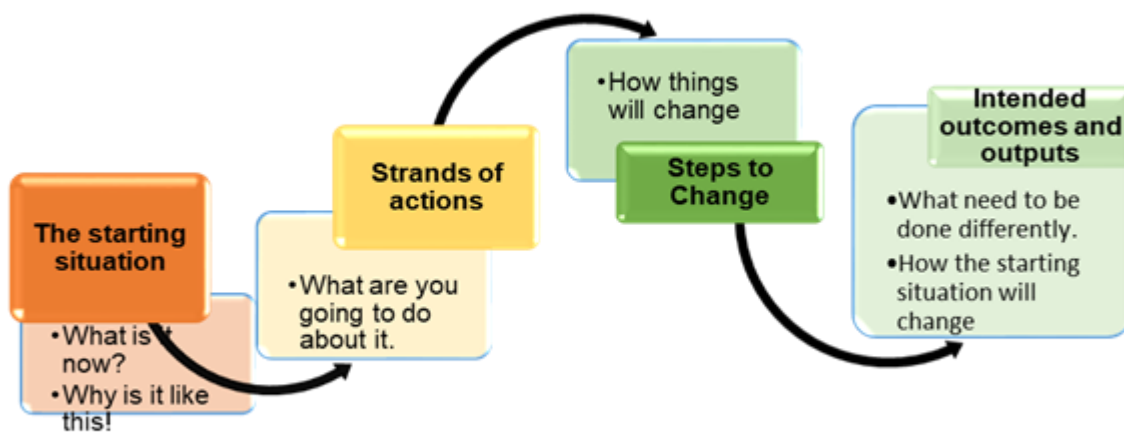


Figure 1.1 Steps of bringing a change in the organization.

1.4 PURPOSE OF THE STUDY

1.4.1 Aim of the study

- The study aims to develop recruitment strategies for professional nurses into master's studies of Nursing at the University of Limpopo.

1.4.2 Research Objectives

The objectives of the study are:

- To explore and describe views of professional nurses regarding recruitment strategies of enrolling into masters studies of nursing at the University of Limpopo.
- To explore and describe reasons for professional nurses not enrolling for masters nursing qualification at the University of Limpopo.
- To develop recruitment strategies for professional nurses into masters studies of Nursing at the University of Limpopo.

1.5 RESEARCH QUESTIONS

To achieve the objectives, the study seeks to answer the following questions:

- Why are professional nurses not enrolling for masters studies of Nursing at the University of Limpopo?
- How can professional nurses be recruited into masters studies of Nursing at the University of Limpopo?

1.6 OVERVIEW OF RESEARCH METHODOLOGY

A qualitative research method was used in the study to achieve a research aim. Exploratory and descriptive research designs were used to explore and describe the reasons why professional nurses were not enrolling into masters studies of nursing. The population was all professional nurses in the tertiary hospital. Purposive sampling was used to select professional nurses in the study. Semi-structure interviews were used to collect data from professional nurses. Ethical standards and principles were observed before the commencement of data collection. The trustworthiness of data

was ensured by four criteria of the Lincoln and Guba model. A detailed research methodology is discussed in Chapter 3.

1.7 SIGNIFICANCE OF THE STUDY

The findings of the study might assist the higher institution of learning to see the need for providing the availability of scholarships and sufficient information that would increase the intake of postgraduate students to register for masters studies. The findings of the study might also assist the department of health in addressing issues of staff development such as seniority of staff to be trained and acknowledge additional qualifications. The study findings might create awareness to professional nurses about the required information for enrolling into masters of nursing.

1.8 CONCLUSION

This chapter presented an overview of the study. The purpose of the study was to explore and describe views of professional nurses regarding recruitment strategies of enrolling into masters studies of nursing at the University of Limpopo. The chapter provided a rationale for developing recruitment strategies for professional nurses into masters studies of nursing. The chapter highlighted the methodology that can be used to achieve the research aims.

CHAPTER 2: LITERATURE REVIEW

2.1 INTRODUCTION

Chapter one presented an overview of the study. This chapter discusses the literature review as a process that involves finding, reading, understanding and forming conclusions about the published research and theory on a particular topic (Burns & Grove, 2012). The purpose of the literature review is to determine what is already known about the topic to be studied so that a comprehensive picture of the state of knowledge on the topic can be obtained. This helps to minimize the possibility of unintentional duplication and increase the probability that a new study may make a distinctive contribution (Brink, Van der Walt & Van Rensburg 2012). The discussion of this chapter will be on theories for change, challenges faced by professional nurses to enroll for postgraduate courses and the possible strategies that can be implied by training institutions to enroll more nurses and masters in the nursing program. For this research study, a focused literature review was conducted after the completion of data analysis.

2.2 LITERATURE SEARCH STRATEGY

A literature review was completed by accessing electronic databases through the University of Limpopo library. The nursing electronic database and search engines accessed were Google Scholar, PubMed, and OVID Medline. The Boolean search strategy was used to retrieve relevant articles and key search words included: 'recruitment strategies into masters in Nursing,' 'professional nurses,' and 'novice nurses'. These terms were searched alone and in combination with 'work experiences', 'transition experiences,' and 'orientation'. The initial searches were further refined to include English language, peer-reviewed, and full-text articles published from 2008-2018. Duplicates were removed and articles were reviewed. Also, the key search words 'development of recruitment strategies for nurses into postgraduate studies' was entered to retrieve articles specifically focused on this program. Internet searches for government and professional websites also provided references.

Literature was chosen according to its relevance to the phenomenon being investigated. Hand searches were also implemented to retrieve desired articles found

in reference lists of relevant journal articles. Approximately 45 articles were reviewed for relevance to this current study. Seventeen scholarly articles and seven grey literature references were included in this literature review.

2.3 PROFESSIONAL NURSES ACQUIRING KNOWLEDGE AND SKILLS

This second section of the literature review explores the outcomes of postgraduate education across a range of specialty areas including cardiac, critical care, accident and emergency, pediatrics, palliative care, and addictive behavior, as well as postgraduate courses for which the specialty was not specified. This includes the knowledge and skills that nurses acquired from postgraduate education.

Increased knowledge and skills are outcomes of postgraduate education, and there is professional support for the importance of postgraduate education (Smedley, Morey, & Race, 2010). A national Delphi study of Australian cardiac educators and clinicians identified that inadequate educational preparation was one of the many reasons, which raises concerns about the lack of focus on the quality of care issues (Pelletier, Duffield, Gallagher, Soars, Donoghue, & Adams, 1994). As the national voice for graduate nursing, the American Association of Colleges of Nursing (2011) believes “education has a significant impact on the knowledge and competencies of the nurse clinician”. The growing demand for qualified professionals to fill leadership and management positions in nursing has increased attention to graduate education. As technology continues to advance and the status of hospitalized patients becomes increasingly complex, nurses are challenged to adapt rapidly to an ever-changing health care environment (Stevenson, 2003).

Several studies indicate that the main reason for undertaking postgraduate education is the improvement of professional knowledge (Ng, Tuckett, Fox-Young, & Kain, 2014). Eraut, (2002) also identified improving knowledge and skills as an attraction for many to study and gain a postgraduate qualification.

According to a study by Richards and Potgieter (2010) on registered nurses, they found that the reasons nurses engaged in continuing formal education is to improve the quality of nursing care to patients. Nurses were prompted to engage in continuing formal education to develop the competency to meet their patients' expectations and attain advanced knowledge and skills. The results revealed in that study by (Richards & Potgieter, 2010) the beneficial aspects of continuing formal education as being; the financial and promotional prospects increased the knowledge base and the development of leadership skills.

Specific clinical skills such as triage decisions, critical thinking, communication, use of research, and inter-professional collaboration, as well as those relating to more generic autonomous practice, professional development and broadening or deepening of knowledge, were also reported to be improved by postgraduate education. A correlational design study using survey methods to identify relationships between triage nurses' decisions on triage category allocation and the type and length of nursing experience and the level of educational preparation of triage nurses showed a positive correlation between triage decisions and qualifications (Cotterill-Walker, 2012). This notion supports findings by, Fry, and Stainton, (2005) who stated that educational preparation is positively correlated with acceptable decision-making and that nurses with higher educational preparation had a higher incidence of correct decisions. Critical thinking ability and decision-making were better in nurses who had a higher standard of education. However, critical thinking, clinical decision-making and problem-solving can be improved through postgraduate education, research has not identified significant differences in critical thinking in practice at different stages of their studies. On the other hand, a significant improvement in decision-making skills as a result of postgraduate education. Fry, and Stainton, (2005).

2.4 CHALLENGES FACED BY POSTGRADUATE STUDENTS

The literature review identified other recurring effects of postgraduate education that were relevant to the purposes of this study. These effects relate mainly to the facilitators of and barriers to undertaking postgraduate education. Facilitators included career advancement and increased credibility, whereas barriers were wide-ranging and included difficulties with work-study life balance and family relationships, an imbalance between expectations of promotions and reality, negative impact on job

satisfaction and a sense that more senior nurses did not value the graduates' qualifications, (McDonald & Burton, 2010). A cross-sectional survey of a group of 51 new graduates undertaking postgraduate education within a nursing entry to practice (NETP) program. One of the biggest challenges experienced by the new graduates in the study of was about their education was time management. Most of the participants found it difficult to balance work, study and life stresses. McDonald & Burton, 2010).

This finding was also reported by Wong (1988) and Carlisle (1991). Skinner, Madison and Humphries, (2011) interviewed a group of nurses who had completed a postgraduate diploma in pediatrics. This finding is consistent with the study of Simsen and Holyroyd (1997) who found that nurses with a postgraduate qualification do not have any advantage over nurses without this qualification in terms of promotion. Negative impacts on work roles and job satisfaction have also been reported (Pelletier, Duffield, Gallagher, Soars, Donoghue, & Adams, 1994), as well as difficulty in instigating change and apathy from colleagues (Hardwick & Jordan, 2002).

Raso, (2013) reported that many believed their employers did not value the qualification. However, this may be explained by a large number of senior nurses in that study who did not have a postgraduate pediatrics qualification; hence, the participants' perceptions that the employers did not value the qualification.

2.5 DEVELOPMENT OF STRATEGIES

2.5.1 Traditional Media Used for Recruiting

Recruiting for higher education has typically been accomplished by using a variety of print and Web media to reach prospective students with a particular message or offer. According to Brown, and Duguid, (2017), the types of print media used originally were typically in the form of posters, bulletins, announcements, and letters. Many of these methods are still used at a large percentage of institutions, and over the past 40 years, their tactics have deviated little (Greenfield, Midanik, & Rogers, (2000). While higher education recruiting still implements print media, the use of the Web has become commonplace as an avenue to recruit students as well (Griscti, & Jacono,

(2006). Web recruiting media includes school websites, individual websites for each college, emails sent to students, banner and even posted videos (Griscti & Jacono, (2006). Print and Web media recruiting for higher education has changed little from the norm, where students still receive information about the various programs, financial options, and scholarship information. One critical change has affected how these media are used. The change is known as personalization. Personalization delivers information and resources that are tailored and pertinent to individual users and is defined as a "campus that assesses what it knows about its users and then provides them with specific information, content, and layouts. This provision is usually accomplished through an enterprise portal that integrates various campus applications and leverages the vast data held in administrative systems" Lambin, and Schuiling, (2012). Personalization, when related to print media, can be as simple as a prospective student receiving a letter in the mail with his or her name on it, rather than a mass-produced letter. Personalization in Web media allows viewers to have a unique experience on a university website, depending on their interests Lambin and Schuiling, (2012). Prospective students can visit the website of an interesting school, browse information, and upon returning to the website, a personalized welcome message, as well as suggestions based on past visits, will be provided.

2.5.2 Print

While print media has typically been viewed as "dying" or becoming less and less prominent due to the Internet and other emerging social media in the past decade, experts say that it will maintain steady business and growth as time goes Brown, and Duguid, (2017). To illustrate the effectiveness of the different types of print media, Sevier (1996) researched in the springs of 1995 and 1996 that surveyed 3,000 college-bound students. In this particular study, one of the questions had students rate the type of information seen on recruiting materials, and give the information a number on a nine-point scale (1 being lowest interest, 9 being highest). The top three included Scholarship Brochure, Financial Aid Brochure, and Catalog. Universities utilize a very large number of different types of media to promote themselves. Each has its message, intent, and design. Throughout this research, it is helpful to understand how a typical university uses print, web, or social media effectively so that the distinction can be made from one medium to another as well as give insight on

how these mediums are used specifically. One example of using print media for recruitment comes from the University of South Dakota. Their aim, according to their website (<http://www.sc.edu>) is to improve awareness, perception, inform donors, and strengthen connections with alumni. Annually, there are about 350 media releases that highlight news, events, people, and projects. Many of these are aimed towards recruiting new students.

Another example of higher education recruitment material comes from Purdue University in the form of a brochure. Like the University of South Dakota, Purdue increases brand awareness, image, and reaches prospective students, alumni, and donors. These brochures give students information like available colleges, majors, financial aid information, and more. Norberg, Dziuban, and Moskal, (2011), show the effectiveness of print media is shown to be still very high, and many institutions of higher education use it. However, the number of schools that are adopting Web-based recruiting practices is increasing.

2.5.3 Availability of scholarships

The financial cost was identified as personal (reduction of working hours to pursue postgraduate education) and/or academic (cost of postgraduate education). The reality is that most of the nurses in this study needed to remain employed because of financial, professional (requirement of registration) and/or family commitments. These nurses noted that lack of financial support in a form of scholarships was a barrier to postgraduate education and that this was compounded in some cases by having to reduce work status to part-time to pursue postgraduate education. Many nurses are working parents and spouses and must juggle studies and work to support their families and provide security for their future.

They often do not want to add an economic burden to their family's current financial situation. Many of the participants in this study who do persist in their studies usually struggle financially and find it difficult to balance their studies with their jobs. These findings are consistent with those of previous studies (Altmann, 2011). Cohen (2011) suggests that the provision of financial assistance in a form of a scholarship, employer assistance and/or educational leave of absence for the pursuit of postgraduate education to counter the need to reduce working hours would

encourage more nurses to pursue postgraduate education. Even though the pursuit of postgraduate education rests ultimately with the individual nurse, the employer's support can play a significant role in contributing to a highly educated nursing workforce (Richards & Potgieter, 2010).

Financial compensation through the nurse's salary could offer an incentive for him/her to pursue postgraduate education. Nurses in this study in both cohorts (with or without postgraduate qualification) wanted their efforts to be rewarded specifically by increased salary (Bahn, (2007). As an example, in Queensland, all permanent full-time registered nurses working for Queensland Health are given an additional 3.5% fortnightly allowance (based on their working hours) in recognition of their postgraduate education (Queensland Health, 2014). However, this remuneration is not consistent throughout the country. Most of the registered nurses in Australia will have incurred a HECS-HELP debt during their undergraduate years. HECS-HELP is a government loan scheme to help eligible Commonwealth-supported students to pay their student contribution amounts through a loan or upfront discounts (Study Assist). However, not all universities in Australia offer Commonwealth-supported places at the postgraduate level, and most of these courses are offered as fee-paying. Many of the nurses in this study did not want to contemplate an extra financial burden by pursuing postgraduate studies.

2.6 SUMMARY AND CRITIQUE OF LITERATURE

The professional nurses in this study spoke of a perceived gain, often hard-won, from the completion of masters studies in terms of their professional and career development. Professional reported suggested areas in which change might help to motivate registered nurses to undertake masters studies in nursing. Professional recognition was an unexpected finding, but it suggests that professional requirements may play a role in influencing professional nurses into master's studies. Nursing is an increasingly complex profession that requires highly educated staff with a sound academic background. Therefore, the decision to pursue a master's studies must be planned to ensure that all of the financial, personal and professional elements of change are considered.

2.7 CONCLUSION

From this literature review, it was concluded that there were several issues associated with the professional nurse's recruitment into masters studies of nursing. The literature provides some insight into the Department of Health and Universities on why professional nurses were not enrolling for masters studies in nursing in the higher institution of learning.

CHAPTER 3: RESEARCH METHODOLOGY

3.1 INTRODUCTION

This chapter explains the research methodology used in the study. A qualitative research method is discussed, as well as the exploratory and descriptive research designs chosen for the study. This chapter discusses the nature of and the process of selecting the participants in the study. The chapter also discusses the measures to ensure the trustworthiness of data and how the ethical standards and principles adhered in the study.

3.2 QUALITATIVE RESEARCH APPROACH

A qualitative design is described as the type of research design that attempts to understand the phenomenon in its entirety, focuses on life experiences and stresses more on the importance of people's interpretations of events and has few preconceived ideas (Parahoo, 2014). The researcher used qualitative research to understand the perspective and meaning of professional nurses in enrolling into masters studies in nursing (Maxwell, 2013). The qualitative approach further assisted the research in understanding how the healthcare system influences the perspective of professional nurses in enrolling for masters studies in nursing. Therefore qualitative research approach enabled the researcher in developing recruitment strategies of professional nurses into masters studies in nursing. Again as guided and supported by the theory of change the qualitative approach was found relevant to the study. The following research design, population, sampling method, and data collection method and analysis were used to support the use of a qualitative research approach.

3.3 RESEARCH DESIGNS

A research design is described as the strategies used to understand the phenomenon in it's entirety (Parahoo, 2014). Therefore qualitative research designs were used in the study to explore and describe reasons for professional nurses not enrolling for master's studies of nursing in higher institutions of learning. The research designs concentrated on the real words and views of the professional nurses (Brink, Van der Walt & Van Rensburg 2012). The following qualitative research designs were used in the study:

3.3.1 Explorative design

This type of research design examines human experiences by exploring people's experiences rather than a person as a subject (Brink, Van der Walt & Van Rensburg, 2012). The exploratory design enabled the researcher to uncover relationships and dimensions of professional nurses and enrolling into postgraduate studies (Mouton & Marais, 2010). The exploratory design explored the reasons of professional nurses not enrolling into master's studies of nursing in higher institutions of learning (Grinnell & William, 2011). Therefore the researcher used reflective and probing skills during the interview process to explore and gain more information about professional nurses not enrolling for masters studies of nursing.

3.3.2 Descriptive Design

Descriptive research refers to a more intensive examination of phenomena and their deeper meaning, thus leading to the thicker description (De Vos, Strydom, Fouchè & Delpont, 2011). This research design is used when more information is required or used when there's a need to identify problems (Brink, Van der Walt & Van Rensburg, 2012). The descriptive research design facilitated as well the process of the researcher allowing participants to describe in detail their reasons why they are not enrolling in to masters studies in nursing.

3.4 STUDY SITE

The study was conducted in a natural, uncontrolled, real-life environment (Brink, Van der Walt & Van Rensburg, 2012). The study was conducted at the Mankweng hospital complex of the Polokwane Municipality Capricorn District of the Limpopo Province in South Africa. The Polokwane Mankweng Hospital Complex is a tertiary hospital that is catering for all patients who are 5 transferred from various clinics, primary and secondary hospitals in the Limpopo Province. The hospital complex has two hospital campuses which are Mankweng and Polokwane. Mankweng Hospital is located 30km east of Polokwane city center. The hospital has several professional nurses with degrees who qualify for Master's Studies.

3.5 POPULATION AND SAMPLING

3.5.1 Population

Brink, Van der Walt and van Rensburg (2012) define a population as the group of people that are of interest to the researcher meaning only those who meet the criteria the researcher is interested in. A population is the entire group of persons that is of interest to the researcher and that meets the criteria that the researcher is interested in studying or set of individuals having some common characteristics (Babbie & Mouton 2012). In this study, the population comprised of all professional nurses working in Mankweng Hospital.

3.5.2 Sampling

According to Polit, Beck and Hungler (2010) sampling is a process of selecting subjects who are representative of the population being studied. Non-probability purposive sampling was used to select a professional nurse in the study. According to Bless, Smith, and Sithole (2013), purposive sampling is based on the judgment of a researcher regarding the characteristics of a representative sample. The logic in purposive sampling is selecting participants who would provide rich information, to understand the phenomena under study (Bloomberg, Volpe, & Tracy, 2013). In purposive sampling, the researcher consciously chooses the people who he or she seems to be knowledgeable about the phenomena under study and who are willing to contribute to the study. Therefore the professional nurses were selected based on their qualification level as the main reason for selection.

3.5.2.1 Inclusion criteria

Professional nurses with honors equivalent and those with an honors degree were included in the study because these nurses qualify to enroll for masters studies.

3.5.2.2 Exclusion criteria

Professional nurses with a diploma in nursing were not included in the study because they don't qualify for masters studies.

3.6 PREPARATION FOR DATA COLLECTION

University of Limpopo Turfloop Research Ethical Committee (Appendix B) permitted for the study to be conducted. (TREC/265/2017: PG). Permission to conduct the study in the tertiary hospital was granted by the Limpopo Department of Health (Appendix C). The CEO of the tertiary hospital permitted to interview professional nurses (Appendix D). An operational manager assisted in arranging private cubicles for conducting interviews. The researcher requested the professional nurses for permission to participate in the study by explaining the topic of the study and giving them a consent form to sign. Before the interview, participants were put at ease by sharing important information about the study such as voluntary participation and the issue of confidentiality. Professional nurses were given informed consent to sign to participate in the study and that the interviews should be audio recorded.

3.7 DATA COLLECTION

Data refers to the pieces of information or facts collected during a research study to address a research problem (Polit & Beck, 2012). Qualitative research data collection is more flexible and decisions about what to collect evolve in the field. It is collected in the natural setting or environment of the participants. The primary data collection method in qualitative research is interview and observation (Polit & Beck 2012). Therefore the researcher used a semi-structured interview for data collection.

3.7.1 Semi-structured interview

This was also used in qualitative research studies where the interviewer is required to ask certain questions but additional probes are allowed or even encouraged. A semi-structured interview is an interview in which the researcher has a list of topics to cover rather than a specific series of questions to ask but cannot predict what the answers will be (Polit & Beck 2012). The semi-structured interview involves several open-ended questions based on the topic area that the researcher wants to cover (see appendix B). The researcher prepared a written topic guide, which is a list of questions to be covered with each participant; it must be in a logical sequence, that is, from general to specific. Therefore the interviewer heard freedom to probe the

professional nurses to elaborate on an original response or to follow a line of inquiry introduced by the participant (NIHR, 2009). The job of the interviewer is to encourage participants to talk freely about all the topics on the guide. This technique ensures that the researcher obtains all the information required, and it gives the people the freedom to provide as many illustrations and explanations as they want (Polit & Beck, 2012). The central question was: "What are the nurse's views regarding enrolling for a Master's degree at the University of Limpopo". Two pilot interviews were conducted to ensure in-depth probing by the researcher. Interviews were conducted in quiet cubicles without distractions and participants were requested to switch off their cell phones for the duration of the interview. Interviews were audio-recorded and personal field notes were kept (Polit & Beck, 2012).

3.7.2 Support tools for data collection

Polit & Beck (2012), as well as Tracy (2013), encourage a researcher to take notes during interviews because non-verbal communication enhances the transcription and they are of value if the audiotape recording is lost or corrupted. During the interview, the researcher took some notes on the verbal and non-verbal communication and emotions presented by the participants. Interviews were done in English, the official language of service provision in the hospital, and on average lasted 45 minutes to allow the researcher to get a thick description of participants.

After each interview, the researcher expressed appreciation for the participants' time and rich information. The tape-recorded interview was listened to and checked for audibility and completeness. Each interview was assigned a code and this code indicated the day of the interview and the number of the interview. Each interview was recorded on a different file on digital audio tape and was also saved on the computer and saved with an assigned interview code.

3.7.3 Data saturation

Data saturation is defined as when no new information is forthcoming from the participants in the sample that has been recruited already (Heckathorn, 2011; Sadler, 2010). Interviews continued until data saturation was reached with twelve (18) participants.

3.8 DATA ANALYSIS

The data which was collected during one to one interview sessions were analyzed using 8 steps of Tech's open coding method of data analysis as described by Creswell (2014). The following steps were adhered to during data analysis:

Step 1 – Reading through the data

The researcher got a sense of the whole data by reading all the verbatim transcripts carefully. This gave ideas about the data segments and how they look like/mean. The meaning that emerged during reading were written down and all ideas as they come to mind. The researcher carefully and repeatedly read the transcripts of all the participants and understood them. An uninterrupted period to digest and thought about the data in totality was created. The researcher engaged in data analysis and wrote notes and impressions as they come to mind.

Step 2 – Reduction of the collected

The researcher scaled-down the data collected to codes based on the existence or frequency of concepts used in the verbatim transcriptions. All the topics that emerged during the scaling down were listed. The researcher also grouped similar topics, and those that did not have association were clustered separately. Notes were written on margins and the researcher started recording thoughts about the data on the margins of the paper where the verbatim transcripts appear.

Step 3 – Asking questions about the meaning of the collected data

The researcher read through the transcriptions again and analyzed them. This time the researcher asked herself questions about the transcriptions of the interview, based on the codes (mental picture codes when reading through) which existed from the frequency of the concepts. The questions were 'Which words describe it?' 'What is this about?' and 'What is the underlying meaning?'

Step 4 – Abbreviation of topics to codes

The researcher started to abbreviate the topics that have emerged as codes. These codes need to be written next to the appropriate segments of the transcription. Differentiation of the codes by including all meaningful instances of a specific code's

data was done. All these codes were written on the margins of the paper against the data they represent with a different pen color as the one in Step 3.

Step 5 – Development of themes and sub-themes

The researcher developed themes and sub-themes from coded data and the associated texts and reduced the total list by grouping topics that relate to one another to create meaning of the themes and sub-themes.

Step 6 – Compare the codes, topics, and themes for duplication

The researcher in this step reworks from the beginning to check the work for duplication and to refined codes, topics and themes where necessary. Using the list of all codes she checked for duplication. The researcher grouped similar codes and recoded others were necessary so that they fit in the description.

Step 7 – Initial grouping of all themes and sub-themes

The data belonging to each theme were assembled in one column and preliminary analysis was performed, which was followed by the meeting between the researcher and co-coder to reach a consensus on themes and sub-themes that each one has come up with independently.

3.9 MEASURES TO ENSURE TRUSTWORTHINESS

Trustworthiness is the degree of confidence that qualitative researchers have in their data. The quality of data quality or rigor in qualitative research was based on the model of Lincoln and Guba (2013). The criterion for evaluating qualitative research differs because it focuses on how well the researcher has provided evidence of descriptions and analysis of the situation and persons studied (Bloomberg &Volpe, 2013). The model of Lincoln and Guba proposes four criteria for ensuring trustworthiness in qualitative studies; credibility, dependability, confirmability, and transferability (Brink, Van der Walt & Van Rensburg, 2012).

3.9.1 Credibility

Credibility refers to the truth and interpretation of data (Brink, Van der Walt & Van Rensburg 2012). It also refers to whether the participants' perceptions match up with the researcher's portrayal of the theme (Bloomberg & Volpe, 2013). Credibility was ensured by prolonged engagement in the study where the researcher took two months to collect data to capture the realities of the phenomenon. Triangulation on data collection was used to ensure credibility, i.e. an audio recorder was used to record the data while field notes were written during the semi-structured interviews. The researcher sent the transcribed data, field notes, and audio recordings to the independent coder who specialized in qualitative research to ensure credibility. A meeting was arranged to reach a consensus about the themes and sub-themes that had emerged independently.

3.9.2 Dependability

Dependability refers to the stability of the data over time and conditions, meaning that the researcher must provide the audience with evidence that if the research were to be repeated with the same or similar respondents in the same context, its findings would be similar (Babbie & Mouton 2012; Bloomberg & Volpe, 2013; Polit & Beck, 2012). Dependability occurs when the researcher attempts to account for changing conditions in the phenomenon chosen for the study since an increasingly refined understanding of the setting creates corresponding changes in the design. The researcher re-examined data during data analysis to ensure dependability. Semi-structured interviews were conducted until data saturation was reached to ensure dependability.

3.9.3 Confirmability

Confirmability is the degree to which the findings are the product of the focus of inquiry and not of the biases of the researcher (Babbie & Mouton, 2012). Confirmability was ensured by searching for relevant literature to support the study findings. Confirmability ensured by discussing the research process with the

supervisor and co-supervisor. An independent coder was used for data analysis to ensure confirmability.

3.9.4 Transferability

Transferability refers to the extent to which the findings can be applied in other contexts or with other participants (Babbie & Mouton, 2012). Transferability is about how well the study has made it possible for readers to decide whether similar processes will work in their settings and communities by understanding in-depth how they occur at the research site (Bloomberg & Volpe, 2013). Qualitative researchers do not expect their findings to be generalizable to all other settings. It is, however, likely that the lessons learned in one setting may be useful in others. Therefore the researcher collected and reported sufficient detailed description of the study. A thick description refers “to a rich and thorough description of the research setting, study participants, and observed transactions and processes,” (Polit & Beck 2012). Transferability was ensured by using purposive sampling to select professional nurses in the study.

3.10 ETHICAL CONSIDERATIONS

The following ethical standards were adhered to while conducting the study:

3.10.1 Permission to conduct the study

University of Limpopo Turfloop Research Ethical Committee (Appendix B) permitted to conduct the study (TREC/265/2017: PG). Permission to conduct the study was requested from the Limpopo Department of Health (Appendix C) and CEO approval from Mankweng hospital (Appendix D). The researcher contacted the area manager intending to build rapport and recruit professional nurses to participate in the study. Permission to approach professional nurses was granted by the area manager.

3.10.2 Informed consent and voluntary participation

Consent means to give approval, to agree in participating in a study or procedure (Heidenthal, & De Vos, 2016). Informed consent must be free, voluntary, clear, universal and comprehensive and during the study, the participant is free to withdraw at any time without any reason being given. To obtain informed consent the researcher explained the study aims and objectives. Emphasis was placed on giving

accurate and complete information for enabling professional nurses to fully comprehend the investigation and consequently, to make voluntary decisions about their possible participation in the study (De Vos, 2016). The researcher indicated that professional nurses are not forced to participate and they can withdraw at any time in the study. Professional nurses gave informed consent by signing the consent form.

3.10.3 Principle of autonomy

Section 12 (2) of the Constitution of the Republic of South Africa, Act 108 of 1996 states clearly that every person has a right to bodily and psychological integrity including the right not to be subjected to medical or scientific experiments without informed consent. An individual is considered to be a rational, self-reliant and thinking being. Autonomy expresses respect for the unconditional worth of an individual and respect for an individual's thoughts, actions, and convictions. Respect for an individual's thoughts and actions means allowing people to make choices according to their convictions (Pera & Van Tonder, 2011). Autonomy is a participant fundamental right and rejects the researcher's paternalism. The participant has a right to either refuse or voluntarily accept being in the study and is also free to withdraw from the study (Medical Research Council, 2004).). The researcher neither withheld information nor offered incorrect information to the participants while recruiting them to participate in the study (Gerrish & Lacey, 2011; De Vos, 2011).

3.10.4 Principle privacy, anonymity, and confidentiality

Every research participant has the right to privacy, anonymity, and confidentiality (Pera & Tonder, 2011). The researcher ensured that the identities of the participants were protected by not recording the identity of professional nurses. This was done by using numbers in the study such as participant 1. Professional nurses were assured that all recorded information was going to be stored in a safe area with password protection for a period of five years after data analysis and interpretation is completed to maintain confidentiality. Privacy originates from the concepts of individual freedom, autonomy and it involves the ability of an individual to control the release of information that relates to him or herself. The researcher also informed all research participants that recorded responses would not be given to unauthorized personnel. Confidentiality is the right to rely on the trust of an individual and to control access to

and disclosure of private information entrusted to the individual (Ascension Health, 2012). Confidentiality stems from a relationship when an individual gives private information to another individual, on the condition or with the understanding that the receiving person would not disclose it, or will disclose it to extend that the individual directs beforehand (Gerrish & Lacey, 2010).

3.10.5 Principle of justice

The principle of justice demands equitable selection of respondents while avoiding the coercion of professional nurses into participating (Larry, 2011). The researcher ensured that all professional nurses were treated equally and that the same information was distributed to all of them equally.

3.10.6 Principle of beneficence

Beneficence – the researcher should prevent evil or harm and promote well (Pera & Van Tonder, 2011). This principle implies that participants must be protected at all times from physical and emotional harm. The professional nurses in this study voluntarily decided to participate in the study. The principle of beneficence is the ‘middle person’ in so far as it is partially dependent for its content on how one defines the concept of good and goodness. Professional nurses were assured that they will not be harmed physically and emotionally. The researcher protected the professional nurses from any form of physical and emotional discomfort that emerged from the research study by giving the participants thorough information about the impact of the study (De Vos, 2011).

3.11 CONCLUSION

The chapter indicated how the qualitative research method; explorative and descriptive research designs were used in the study. The geographical site where the study took place was explained, as well as the processes that were taken for the preparation of data collection. Semi-structured interviews as a data collecting tool were also explained in detail. Field notes were written during the interviews and these interviews were also audio recorded. Data were analyzed according to Tech's method of data as outlined by Creswell (2014). This chapter discussed the element that ensured trustworthiness, as well as the ethical standards followed while conducting this study.

CHAPTER 4: DISCUSSION AND INTERPRETATION OF FINDINGS

4.1 INTRODUCTION

This chapter discusses the findings of data collected from professional nurses with honors equivalent and those with an honors degree because this nurse qualifies to enroll for masters studies. Four (3) themes and eighteen (16) sub-themes emerged from semi-structured interviews, and such interviews had an average time of 30 to 40 minutes.

4.2 CHARACTERISTICS OF PROFESSIONAL NURSES

In the study professional nurses who participated were females eighteen in total with no male participants. Professional nurses with two-years' experience were four, while five years were four and more than ten years nine. Professional nurses with a degree were participating in the study, with a degree were eighteen and zero diploma. The table below summarises the characteristic of the nurses who participated in the study.

Table 4.1: characteristics of professional nurses

Characteristic	Number
Gender	
Male	0
Female	18
Professional nurse experience	
Two years' experience	4
Five years' experience	4
More than ten years	9
Qualifications	
Degree	18
Diploma	0

4.3 RESEARCH RESULTS

Themes and sub-themes reflecting views of professional nurses on the development of recruitment strategies to enroll for a master of nursing degree at the University of Limpopo are summarized in Table 4.2 below:

Table 4.2: Themes and sub-themes of the study

Main themes	Sub-themes
1. Expressed views related to the recruitment of nurses to enroll for the master of nursing	1.1 Nurses' workload viewed as a stumbling block towards the successful recruitment of nurses to masters' degrees. 1.2 Nurses working in light wards might raise interest to enroll for masters' degrees. 1.3 Lack of prominent standing by the university versus rules of admission. 1.4 Lack of information sharing on the availability of postgraduate degrees leads to a lack of enrolments. 1.5 Postgraduate studies viewed as a good path for academic and professional growth.
2. Identified challenges related to professional nurses' registration towards obtaining masters' degree	2.1 The shortage of nurses in the wards leads to a lack of masters registration (fear burnout due to increased workload). 2.2 Unavailability of study leaves resulting from minimal nurses' staff compliments. 2.3 Lack of management support after acquiring a master's degree lead to a lack of interest in registration. 2.4 Lack of recognition incentives (especially for self-funded studies) after completion of qualification leads to a lack of interest towards registration.

- 2.5 Work, financial and social burdens result in a lack of interest to register for masters in nursing.
 - 2.6 Lack of financial support by DoH and the University blamed for fewer numbers enrolment in the degree.
 - 2.7 Fear of research amongst nurses pointed out leading to a lack of enrolment to the master of nursing.
- 3. Perceived benefits for acquiring masters of nursing qualification
 - 3.1 Master of nursing qualification viewed as providing nurses with knowledge power.
 - 3.2 Master of nursing lead nurses to adjust to new advancement in the health care environment.
 - 3.3 Master of nursing leads to improvement of patients' care due to its research evidence-based characteristics.
 - 3.4 Master of nursing qualification leads to great work opportunities and monetary gains.

Theme 1: Views expressed related to the recruitment of nurses to enroll for masters in nursing.

The findings pointed out that there are various views expressed related to the recruitment of nurses to enroll for masters in nursing which were outlined during the interview sessions conducted. These emerged in the following six sub-themes:

Sub-theme 1.1: Nurses' workload viewed as a stumbling block towards the successful recruitment of nurses to masters' degree

The findings pointed out that nurses' workload is viewed as a stumbling block towards the successful recruitment of nurses to master's degrees. The workload has influenced most nurses not to do their studies toward their master's degree. This finding was confirmed by the participant who said: *"The department must hire people*

or they can do the overtime because even the time, I was doing the postgraduate diploma it was tough for me just to write the assignments, always tired seven/seven and even the off duties Ah! Always tired difficulty to read Hmm.”

Furthermore, another participant indicated that: *“Yah! When you work let's say you are three in the labor ward like this work is too much, you have got to do 1, 2, 3 when you go home you are tired and then the masters degree requires a lot of offs, you must sit down and study, so most of the nurses are not interested because they think they cannot pull up and they will not manage to do the work.*

In support another participant indicated that: *“I think the best way, if the campus maybe what can I say if the University maybe it offers bursaries and then maybe the workload must not be too much as we are nurses and besides we are staying at home we are mothers, we are everything, maybe if the workload can be a little bit less though.”*

The study conducted by Hayward, Bungay, Wolff, and MacDonald, (2016) workload is another contributing factor, it is one of the most significant factors that implies concerning the recruitment of professional nurses to postgraduate studies and this is due to an increase in patient numbers and lowered staffing levels resulting to burnout. Extensive international nursing research strongly links fatigue in nurses with performance deficits and unsafe practice issues (Littlejohn, 2012).

Sub-theme 1.2: An explanation that focuses on nurses working in light wards and might have the interest to enroll for a masters degree

The findings pointed out that nurses working in light wards might have the interest to enroll for the master's degree and most nurses complained of the working environment as a barrier not to be able to study further. This finding was confirmed by the participant who said:

“Hmm maybe if I can change the ward and go to mainly the other wards that are not so this one is an emergency ward running around maybe if you I can go to the ward like OPD or general ward like Surgical, Ortho and Medical maybe it will be better.”

Furthermore, another participant indicated that: *“Like we are having a university nearby to us but we don't benefit from the university as nurses at making hospitals*

only nurses from maybe other hospitals or provinces there are the ones who are benefiting because they are from small hospitals.”

In support, another participant indicated that: *“In terms of the facility it is when you have to reach that rock about attending because sometimes there will be off duties in the ward. In the ward at least, you can say okay then on Thursday let it be a day off so that I can attend but in the theatre, the off duties are somehow.”*

Inflexible work scheduling imposed by management was cited by most of the participants in this study. Many researchers have also noted the negative influence of inflexible work schedules and an apparent lack of commitment from managers. Many of the nurses in this study do shift work and find it a challenge to pursue postgraduate studies while having an inflexible work schedule. They must arrange their study time (assignments and examinations) around their current work schedule. (Beutell, 2010).

Sub-theme 1.3 Lack of prominent standing by the university versus rules of admission

The findings pointed out that a lack of prominent standing by the university in recruiting nurses to enroll for a master's degree outlined. During the interviews participants complained of the University for not taking an action in providing them with necessary information towards a masters degree yet it they are nearby the university. This finding was confirmed by the participant who said: *“Like I said the university must have a clear admission criteria that must be clearly stated to nurses and open for professional nurses who are interested in studying masters studies of nursing”*.

Furthermore, another participant indicated that: *“Like myself, I was supported to do a masters but first I have to go to some management course in UNISA before I can enroll for masters. When I asked what was to happen if I enroll in the University of Limpopo I cannot be enrolled there, I need to go and do an honors and come back to do a masters so the rules there are very much difficult because I’ve done nursing diploma then the BCUR is very late, it very late. Like we are having a university nearby to us but we don’t benefit from the university as nurses at making hospitals only nurses from maybe other hospitals or provinces there are the ones who are benefiting because they are from small hospitals.”*

In support, another participant indicated that *“The University should include the rule of accepting everyone who has done BCUR because they do not allow such. Some people want to enroll for masters but since the requirements are not easy to get people to become demotivated to pursue their study”*

Most registered nurses in Australia have incurred a HECS-HELP debt during their undergraduate years. HECS-HELP is a government loan scheme to help eligible Commonwealth-supported students pay their student contribution amounts through a loan or upfront discounts. However, few universities in Australia offer Commonwealth-supported places at the postgraduate level because most are fee-paying courses (Gale & Parker, 2013). Many of the nurses in this study prefer to enter the workforce upon completing their undergraduate degree and do not want to contemplate extra financial burden by pursuing postgraduate (Altmann, 2011).

Sub-them 1.4 Lack of information sharing on the availability of postgraduate degrees leads to a lack of enrolments.

The findings pointed out that lack of information sharing and poor knowledge related to masters in nursing leads to less interest for enrolment in the degree. Nurses outlined during the interviews that information regarding masters is lacking thus has affected masters enrolment. This factor has contributed to most nurses because most of them indicated during the interviews that they don't know anything or have information about masters studies. This finding was confirmed by the participant who said:

“The other thing they can do, they have to try and visit the institution like as I said they have to go there and they try to motivate us while we are still studying because it's not easy to motivate a person after completing, people are enjoying money but if they can start at a lower level try to tell us the importance of doing a masters and which course need a masters, I think it's better unlike now you can see that I'm not having enough information because most of the information I get is on google. I try to get information but if you get the complete information while you are still studying, so you decide while you are still studying when I finish here I'm going to do the degree after degree I'm going to do masters.”

Furthermore, another participant indicated that: *“Maybe through advertising vacancies, through the manager we would like to have so many people enrolling*

masters this year, then the hospital will say the university is for students who are interested in a doing a masters and whoever is interested should come forward then you go there they give you the conditions and go to the university unlike doing it underground.”

In support another participant indicated that: *“Yes we really do need motivation especially the majority of nurses who are coming from poor background and rural areas, we don’t have much information about what’s going on, the only thing that we know is that we are going to work as nurses, we don’t know about the opportunities after or the opportunities when you want to study further”.*

Studies, indicate that undergraduate and postgraduate students have negativism in research related courses institutions of higher learning, (Bowen, 2018). Lack of recognition and valuable, meaningful research related to clinical practice contributes to ((DeBruyn, Ochoa-Marín, & Semenic, 2014), poor knowledge and enrolment related to masters in nursing degree. As a result, many nurses graduate and enter into clinical practice with little value and knowledge of research. To ensure that information is distributed and thus students' expectations of programs are clear, orientation programs should be implemented and effective platforms where information can be shared should be made available. Flexible teaching and delivery methods should be implemented, including satellite campuses, after-hours and weekend contact sessions, and the use of interactive e-learning platforms.

Sub-them 1.5 Postgraduate studies viewed as a good path for academic and professional growth.

The findings pointed out that postgraduate studies viewed as a good path for academic and professional growth and most participants pointed out the importance of masters mainly on academic growth and professional. However, nurses were emphatic that masters provided them with new knowledge and improved their clinical practice by providing a greater depth of understanding. This finding was confirmed by the participant who said: *“I think it’s a better thing to do because it helps us to expand our knowledge and it also gives us this desire to love nursing more and another thing it also help us in diagnosing as well if you are working at a community, working in a clinic, you can easily diagnose because you will know that okay and these are the signs and symptoms, I have seen this before and I’ve learned about this before.”*

Furthermore, another participant indicated that: *"It gives knowledge in terms of gaining more, it is more academic so it gives you become more, how can I put it "more knowledgeable in terms of research 'Akere' you can bring new ideas and more yeh! New ideas you became more knowledgeable and when you are knowledge practically it means you will deliver even practically at work".*

In support, another participant indicated that: *"Hmm, so it's good for nurses to study into the higher grade so that they can be acquainted with the changes and maybe to upgrade the standard of nursing. So that nursing can be seen as a profession."*

According to Pelletier, Duffield, Gallagher, Soars, Donoghue, and Adams, A., (1994) the driving forces for nurses undertaking further study is that they understand that specialized knowledge must be obtained to have confidence performing more senior roles and delivering high-quality care. Advocates of PG education for RNs state that it enhances nursing practice through increased confidence, enabling better decision making and contributing to greater understanding and use of specialist nursing knowledge and skills leading to better patient outcomes.

Theme 2: Identified challenges related to the professional nurse's registration towards obtaining a masters degree.

The finding presents the information concerning marked identified challenges related to professional nurse's registration. The information has emerged in the four sub-themes of the theme presented.

Sub-them 2.1 Shortage of nurses in the wards lead to lack of masters registration (fear burnout due to increased workload)

The findings pointed out that the shortage of nurses in the ward leads to a lack of masters registration. Most participants stated that the shortage of nurses was a contributing factor for them not being able to register for masters studies which may results in the increased workload to them. When there are shortages of nurses, patient loads are increased leading to burnout to nurse's masters. This finding was confirmed by the participant who said:

"I think the problem is a shortage of the staff, because of the shortage of the staff they cannot give me or not more than two people the study leave they can give two or one studies leave the part-time study, the others you have to use your own time.

Furthermore another participant indicated that: *"They always tell you about the shortage, time is so small you become so exhausted so studying using your own time your family is going to suffer so socialization no longer socializing with other people things like that, but if we get full opportunity or even part-time study leave from work so they don't consider us so if you study at your own time they will always tell you that they are running short of nurses especially like things like BCUR, they only considering to bridging and specialty only but once you start like BCUR, masters they don't consider them"*.

In support, another participant indicated that: *"Yeah! If they say you submit that you are registered to write the University of Limpopo, they look in the ward and check how many are you, is the problem of shortage somewhere, somehow when you go for exams 80% of sisters will go for exams, so there is a shortage. ,"*

Most of the professional nurses found it difficult to balance work, study and life stresses, which resonates with earlier studies of McDonald, Willis, Fourie, and Hedgecock, (2009) that reported disruptions to family and work life.

According to the study, the global nursing shortage has forced health care organizations to focus on factors that cause these shortages and ways to alleviate them. Mitchell (2011) cites, as one of the possible solutions, encouraging registered nurses to pursue advanced education in nursing by obtaining post-basic certificates. Where possible, nurses should be encouraged to continue studies up to masters and doctoral degrees. While this can be seen as a pathway towards self-actualization, it could also lead to frustration, burnout and eventually intent to leave, if the graduate nurse is not adequately or suitably placed.

Sub-theme 2.2 Unavailability of study leaves resulting from minimal nurses' staff compliments.

The findings pointed out that unavailability of study leaves resulting from minimal nurse's staff compliments. Participants revealed during the interviews that study leaves are not granted and they find it difficult to study while working.

This finding was confirmed by the participant who said: *"The strategy that can be used maybe it must be implemented on top, every institution must have that thing per*

year, and there should be a study leave for people who are studying masters and BCUR. So that people can be developed.”

Furthermore, another participant indicated that: *“For now, we just go to school ourselves we use our own time even if we write exams sometimes we use our sick leave and our annual leaves. They don’t consider our study leaves”*

In support another participant indicated that: *“No, they don't like each, they don't provide people with study leave, people go and obtain masters and with study leave, people go and obtain masters and they don't consider them, it is like a masters don't exist in government, so yeah, that's why people don't intend to do masters, yeah!”*

Cohen (2011) suggests that the provision of financial assistance in the form of a scholarship, employer assistance and/or educational leave of absence for the pursuit of postgraduate education to counter the need to reduce working hours would encourage more nurses to pursue postgraduate education. According to the study, limited access to study leaves has been identified as an issue for nurses internationally and nationally, as availability is dependent on staffing levels and workload demands, (Brown, & Watson, 2010). Anecdotal evidence indicates the use of annual leave for PGS is very common and is comparable with the findings from other research, (Barnhill, McKillop, & Aspinall, 2012).

Sub-theme 2.3 Lack of management support after acquiring a masters degree leads to a lack of interest in registration.

The findings pointed out that lack of management support after acquiring a masters degree lead to a lack of interest towards registration. During the interviews, participants pointed out that the management does not support them at all while they are studying. Those who can put forward a convincing argument for masters studies appeared to receive positive support from their managers. The management has a responsibility to encourage nurse's participation in masters studies. Discourage them by blocking them not giving them study leaves or not understanding at all that they are studying wanting them at work.

What matters to most managers it's the work and most of them don't have the understanding of masters thus blocking nurses not supporting them. This finding was confirmed by the participant who said:

"Ummm, the other thing is within our management when we are about to study we use our leave days, when you study you will not enjoy your leave , you won't enjoy off ,mina I remember when I was studying in Pretoria Tech I did not have leaves for 2 years off because they say it is not for everybody to get study leave so in the unit they give one, so you think of wait until so, you dedicate to do it on your own, even if you go for exams you are on leave you are not granted leaves."

According to the study, Wang, Andre, and Greenwood, (2015) describe support from peers as an essential component of the experience of postgraduate students, which enables them to solidify relationships with peers on both a personal and professional level. However, Kalman, Wells, and Gavan, (2009) describe the challenges experienced when support is not present and that lack of support can be a harmful influence on the completion of postgraduate. Even though the pursuit of masters studies rests ultimately with the individual nurse, the employer's support can play a significant role in contributing to a highly educated nursing workforce (Richards & Portgieter, 2010).

Sub-theme 2.4 Lack of recognition incentives (especially for self-funded studies) after completion of qualification leads to a lack of interest towards registration.

The findings pointed out that there is a lack of recognition incentives after completion of qualification and recruitment must include existing benefits after completion of the degree to make nurses have an interest in registration. The study revealed that most nurses don't see a need of studying or upgrading to a master because there are no incentives given after completion to be more motivated to study further. The employer should make a concerted effort to recognize and remunerate staff with graduate qualifications. A new pay grading or incentives might address this issue. Most nurses indicated that during the interviews that they don't see a need for having a masters because it does not have benefits. This finding was confirmed by the participant who said:

"Maybe make them understand what these qualifications are because our qualification as nurse they just see if you have many things why do you have to go further like the person who does bridging she passes go for midwifery, does post besides like community they think you have got a lot of qualifications so they cannot afford to give incentives for everything that you undergo whereas those things are important like midwifery when you come, let them give incentives for those who have degree the money may not be equal but motivate these people to study further"

Furthermore, another participants indicated that: *"Money then we will be able to apply for the post, we can't say go for masters automatically when comeback we give you a post what if the post is not there but if I go for masters come back and give me a little bit of the cash bonus it's the way of motivating the more you study the more incentives you get, even when post comes you are able to attempt with your masters"*

In support, another participant indicated that: *"If maybe there is somebody who comes to me showing all the possibilities. That when continuing with my education, it will encourage me to learn more because the other thing it doesn't help me. I get the masters but still at the same level at my employment, so moving with your qualification going up it means your positions are going to go up because really you can't expect to occupy a higher position whereas you don't have that higher post-qualification, so the other motivation, if you want to go up in your position you also have to improve in your education and that master, is one of the levels where you can go."*

According to the study, external motivation such as monetary awards and tangible recognition may inspire more nurses to pursue postgraduate education (McKinney, 2010). Financial compensation through the nurse's salary could encourage him/her to pursue postgraduate education. Nurses in this study in both cohorts (with or without postgraduate qualification) wanted their efforts to be rewarded specifically by increased salary (Bahn, 2007). Masters degree in nursing will send you to the top for better jobs outside your organization and teaching and management position within it. Doors open to leading roles such as chief nursing officer, nurse administrator, and director of education. Masters prevents you from becoming stuck in a position in which there is little room for advancement. Postgraduate education enhances their technical skills and builds non-technical skills such as communication and leadership.

Nurses who are skilled in leadership roles can delegate effectively and manage complex situations to completion, which enhances the quality of care (Kaddoura, 2010).

Sub-theme 2.5 Work, financial and social burdens result in a lack of interest to register for masters in nursing.

The findings pointed out that work, financial and social burdens result in a lack of interest to register for masters. Participants complained of not having money to register yet some of them are looking after their families and it has been a major barrier for most nurses not to register for masters studies. Nurses in the study needed to remain employed because of financial, professional and family commitments. Many nurses are working parents and married and must juggle studies and work to support their families. Participants noted that lack of financial support in a form of scholarships and bursaries was a barrier to masters studies. The participants reported difficulty in accessing scholarships, as they had no knowledge about funding opportunities and were certain how to access this information. This finding was confirmed by the participant who said:

"The other thing is because our background differs, so you will find that I am qualified and working and also that I got many responsibilities at home, social problems and when you register you need a lot of money and a lot of work doesn't need that stress."

Furthermore, another participant indicated that: *"Yoh with time the framework it depends where you take your money and then you will register according to you. Subjects, how much can you afford per year so depending on looking at your social background your family, your responsibility so you cannot take money for kids then you register for yourself where you will take little for yourself just to upgrade, so the kids cannot be stacked because of your educational standard."*

In support another participant indicated that: *"This year I'm not going to study because I'm not financially stable and again I know that I can get financial assistant, loan or something else but the fact that I don't see a masters as a main priority for me now because I'm not financially stable, I need finance to study, again I told myself that I have to study. I have to do specialty first so when I get money for a specialty that's when I can study masters."*

Nurses who persist in their studies usually struggle financially and find it difficult to balance their studies with their job. Cohen (2011) suggests that the provision of financial assistance in the form of a scholarship, employer assistance and educational leave of absence for the pursuit of postgraduate education to counter the need to reduce working hours would encourage more nurses to pursue postgraduate education.

Sub-theme 2.6 Lack of knowledge related to master in nursing lead to less interest in enrolment in the degree.

The findings pointed out that poor knowledge related to masters in nursing leads to less interest in enrolment in the degree. This factor has contributed to most nurses because most of them indicated during the interviews that they don't know anything or have information about masters studies.

This finding was confirmed by the participant who said: *"It's I think the best thing is going into the institution because most of the people especially when they start working they are no longer interested of studying. Furthermore, another participant indicated that: "Ayi! I think is a lack of knowledge and a lack of interest."*

In support, another participant indicated that: *"Since I said if there is no information, there will be the interest and where will be the knowledge but if the information can be given to professional nurses I think they will develop an interest."*

Studies indicate that undergraduate and postgraduate students have negativism in research related courses institutions of higher learning. Lack of recognition and valuable, meaningful research related to clinical practice contributes to poor knowledge and enrolment related to masters in nursing degree. As a result, many nurses graduate and enter into clinical practice with little value and knowledge of research, (DeBruyn, Ochoa-Marín, & Semenic, 2014).

Sub-theme 2.7 Lack of financial support by DoH and the University is blamed for fewer numbers enrolment in the degree.

The findings pointed out that lack of financial support from the university is blamed for fewer numbers enrolment in the degree. During the interviews, most participants blamed the University for not providing bursaries as a department of nursing because

most nurses are interested yet most of them have a financial crisis and the unwillingness of employers to fully fund postgraduate education disadvantages those nurses who are on lower incomes. This finding was confirmed by the participant who said: *"I think the best way if the campus maybe, what can I say if the University may be offers bursaries,"* Furthermore, another participant indicated that: *"Okay I think if they can make basics and sponsorship and yeh cause some of the nurses to fail to sponsor themselves in terms of education, so if the university can make bursaries and sponsorship I think most nurses will be motivated to study because they will be knowing that they won't be paying from their pockets."*

In support, another participant indicated that: *"By providing us with bursaries yeah bursaries and provide us with lectures who are more knowledgeable about this and who have mastered."*

The lack of funding to offset the cost of masters studies or practicing nurses have long been recognized as a significant barrier within Australia (Pelletier, Duffield, Gallagher, Soars, Donoghue, & Adams, 1994)

Sub-theme 2.8 Fear of research amongst nurses pointed out that it leads to a lack of enrolment to the master of nursing.

The findings pointed out that fear of research amongst nurses pointed out that this leads to a lack of enrolment for a masters in nursing. Participants indicated that they are afraid of doing a masters due to too much work done when doing a masters. Most of the fears were raised at a degree level. This finding was confirmed by the participant who said: *"Like you have come to me like this, I feel I want to do it but if I'm far from you I keep on having a fear but after this you can tell me more about it I think I can be motivated then I will be recruited."*

Furthermore, another participant indicated that: *"What will I say; I think maybe some people are afraid of doing research. They just want to read books and write exams they are afraid of doing research methodology because if in our course in diploma everybody was complaining of research methodology. I think they are afraid of research because most of the masters are about research."*

In support, another participant indicated that: *“So I think it’s a good thing but if that fear can be addressed and if I can get someone who can just tell me that there is nothing, you can conquer everything. I think it will be the best.”*

Studies have shown that both undergraduate and postgraduate students have negative attitudes toward research courses taught in the nursing curricula (Stichler, Fields Kim, & Brown, 2011). Students often do not appreciate and value research due to the lack of a meaningful connection to clinical practice (Rojjanasrirat, & Rice, 2017). As a result, many nurses graduate and enter into clinical practice with little value and knowledge of research.

Theme 3: Perceived benefits for acquiring a master of nursing qualification.

The findings present information about the benefits of acquiring masters of nursing qualification. The information has emerged in the four sub-themes of the above-presented theme.

Sub-theme 3.1 Master of nursing qualification viewed as providing nurses with knowledge power.

The findings pointed out those masters of nursing qualification are viewed as providing nurses with knowledge power. Most participants indicated during the interviews that having a masters makes you more knowledgeable about research and viewing issues in a professional manner. This finding was confirmed by the participant who said: *“To know knowledge is the power because there are things which I know just to have a degree in the ward, there are things I know which others don’t know but for masters Knowledge is power.”*

Furthermore, another participant indicated that: *“I think because it might increase my knowledge, regarding nursing, increase my performance, eeh! By making or decision making or providing good quality services yeah.”*

In support another participant indicated that: *“It’s very much important to have a masters in my profession because they are new problems every day in the working situation which needs to be researched and be resolved.”* As the national voice for graduate nursing, the American Association of Colleges of Nursing (2011) believes “education has a significant impact on the knowledge and competencies of the nurse clinician”. Increased knowledge and skills are outcomes of postgraduate education,

and there is professional support for the importance of postgraduate education (Schofield & McComiskey, 2015).

Sub-theme 3.2 Master of nursing lead nurses to adjust to new advancements in the health care environment.

The findings pointed out that a master of nursing leads to nurses to adjust to new advancement in the health care environment. The study pointed out that most nurses who have masters can adjust to every kind of new environment. This finding was confirmed by the participant who said: *“Is it something that also makes people admire to undergo certain programs they will be looking at the type of work that is intended after finishing the program the monetary reinvestment and environment.”*

As technology continues to advance and the status of hospitalized patients becomes increasingly complex, nurses are challenged to adapt rapidly to an ever-changing health care environment (Stevenson, 2003). The results here echo earlier research showing that older nurses value a stable and merit-based work environment (Delobelle, Rawlinson, Ntuli, Malatsi, Decock, & Depoorter, 2011) and thus tend to stay in nursing longer; this warrants further research.

Sub-theme 3.3 Master of nursing leads to improvement of patients' care due to its research evidence-based characteristics.

The findings pointed out that a master of nursing leads to improvement of patient's care due to its research evidence-based characteristics. Participants have indicated during interviews that having a masters will increase research skills and decision making will be based on evidence. This finding was confirmed by the participant who said: *“Masters qualification is very much important because you can identify whatever is wrong, for instance when you are working in a labor ward if there is a problem that is receiving you can easily identify and do a study on it and then that will put more impact on the treatment of the patient. So a masters degree is very important, it has to do with researching, researching, so the results of the research will put more impact on the treatment of the patient.”*

Furthermore, another participant indicated that: *“You having a masters working in a ward doing the same work, the motivation will be just you are helping the community with diseases that people defaulted if I'm inward level. I think my work is just to see*

these diseases for the whole year or month is the disease defaulter, defaulter then follow up relatives, you follow up the clinics, you follow up until you get the root cause then you can help the community even if that disease is from the same community or different part of the world then you can help them, you can do it maybe at the ward without being in the managerial position."

In support, another participant indicated that: *"For the development of many things like the standard of care especially in the managerial position, you can be able to change old things just to modifying them to be easy and simple."* According to a study by Richards and Potgieter (2010) with registered nurses, they found that the reasons nurses engaged in continuing formal education to improve the quality of nursing care to patients. Nurses were prompted to engage in continuing formal education to develop the competency to meet their patients' expectations and attain advanced knowledge and skills.

According to the study conducted, it reveals that postgraduate education provides registered nurses with the opportunity to acquire the theory and skills in critical thinking, leadership, case management, and health promotion, and to practice these across a variety of inpatient and outpatient settings relevant to their role as a specialist nurse in a variety of settings (Goemaes, Decoene, Beeckman, Verhaeghe, & Van Hecke, 2019)

Sub-theme 3.4 Master of nursing qualification leads to great work opportunities and monetary gains.

The findings pointed out that the master of nursing qualification leads to great work opportunities and monetary gain. Having a master in nursing opens greater opportunities like a better post at managerial positions and also salary increments. Most participants stated the benefits during the interviews. This finding was confirmed by the participant who said: *"I don't know how much it is but I think that will be some of the things and another thing after completing this you can get a better post so that you can go and teach others or work getting a better post and salary, I mean it must be something different from what I'm doing now is what I'm learning now."*

Furthermore, another participant indicated that: *"It Increases their monthly income and even offer more post, better posts after the masters that will attract nurses."*

In support another participant indicated that: *“You can be CEO, you can be a nursing manager of the hospital, yes you are more than the manager and in nursing masters everything will be easy because when you are professional nurse you are the manager like the unit manager then when you are a unit manager at a big organization like a hospital it will be easier if you have a knowledge to service yes”*. The results revealed in that study by (Richards & Potgieter, 2010) the beneficial aspects of continuing formal education as 1) the financial and promotional prospects, 2) increased the knowledge base, and 3) the development of leadership skills.

The nurses in this study also perceived that postgraduate education increases job opportunities. This perception resonates with an early study by Bahn (2009), who found that increasing employability is a driver for obtaining advanced education. According to Al Maqbali, (2015), professional autonomy, including the ability to make decisions in clinical practice, is ranked as one of the most important factors contributing to nurses’ job satisfaction. Job satisfaction and autonomy were found to be positively correlated with advanced education Al Maqbali, (2015).

4.4 INTEGRATION OF THEORY OF CHANGE AND STUDY RESULTS

Theory of change is a theory-based approach to planning, implementing or evaluating change at an organization. The theory of change is chosen to support and guide the data analysis. A theory of change articulates explicitly how a project or initiative is intended to achieve outcomes through actions while taking into account its context (Connell, & Klem, 2000). Developing strategies is regarded as a project, which took into account what currently exists about the postgraduate studies in the University of Limpopo. Figure 4.4 explains the steps considered when bringing a change in the university and the mentioned steps were considered when collecting and analyzing data from professional nurses. Connell and Klem, (2000) stated that theories of change may be articulated in different ways and using different methods. An inductive approach was followed by, observing phenomena in action rather than relying on what is already known or assumed about how it works (Connell, & Klem, 2000). In using this approach, professional nurses’ views were explored and described, and the findings using the steps stated were used to develop strategies.

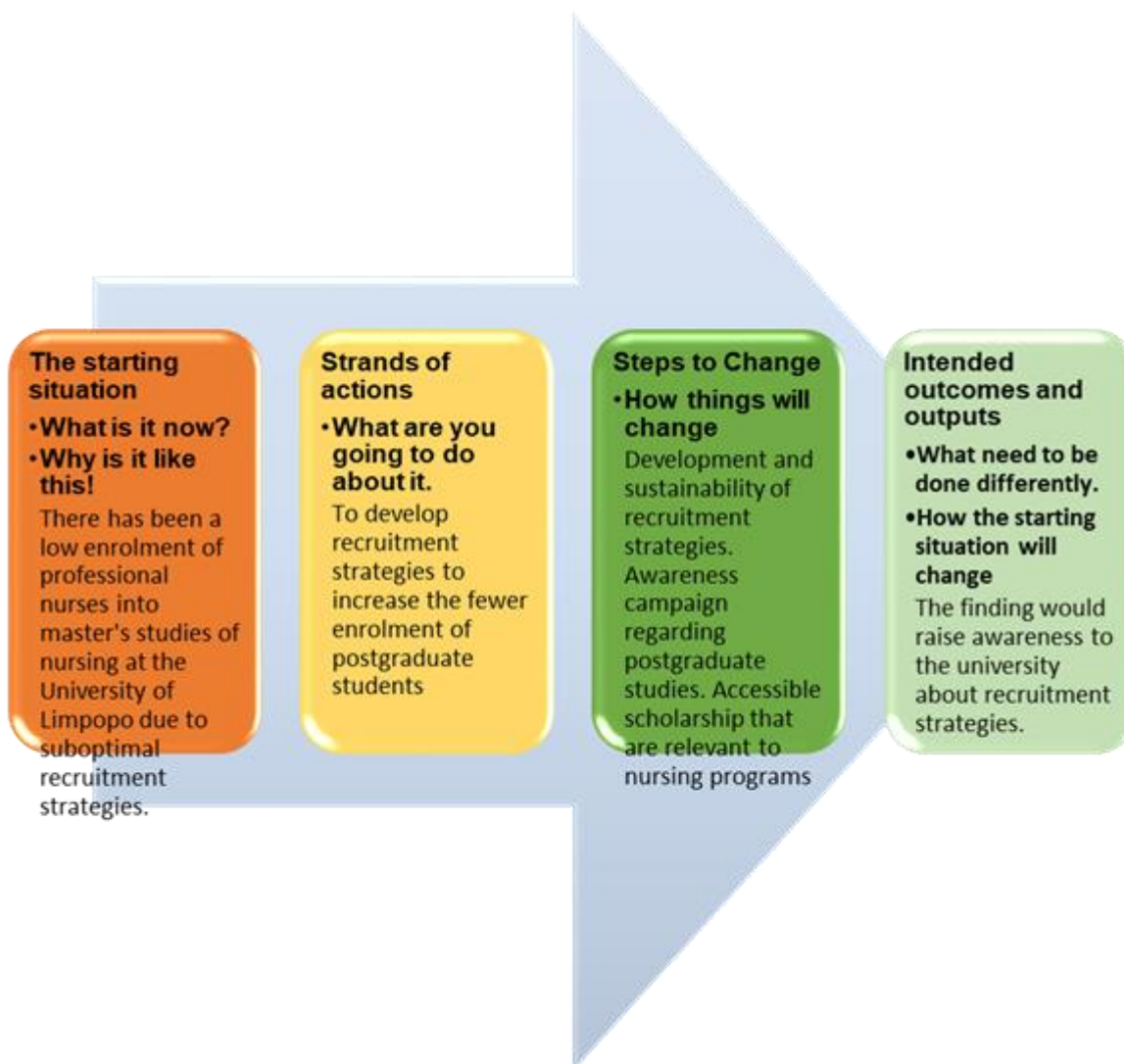


Figure 4.1 Integration of Theory of Change and study finding

4.5 CONCLUSION

The findings of the study revealed that the professional nurses shared similar knowledge on the development of recruitment strategies for professional nurses in masters studies of nursing. However, the study suggested the importance and need for support from Government and Universities as vital to professional nurses interested in, and those engaging in masters studies.

CHAPTER 5: RECRUITMENT STRATEGIES OF PROFESSIONAL NURSES INTO MASTERS STUDIES OF NURSING

5.1 INTRODUCTION

Research findings revealed the suggested strategies towards improvement in master's degree uptake by professional nurses. This chapter discusses the suggested recruitment strategies, the purpose and possible benefits of such strategies in the higher educational institutions, the Department of Health, and to professional nurses.

5.2 PURPOSES OF RECRUITMENT STRATEGIES

As the study was grounded by the theory of change, the following purposes are anticipated benefits and outcomes of the strategies in the institution of higher learning:

- The purpose of recruitment strategies is to increase the university intake of professional nurses to study master's studies in nursing.
- To raise awareness to the department of health, University, and professional nurses about the importance and challenges of masters studies in nursing.

5.3 RECRUITMENT STRATEGIES OF PROFESSIONAL NURSES INTO MASTERS STUDIES OF NURSING.

The strategies that are discussed below are based on the suggestions of professional nurses:

5.3.1 Development or Improvement of recruitment strategies by the university could lead to improved uptake for a master's degree.

The research findings outlined that the involvement of the university on the recruitment strategies might increase the master's studies intake of professional nurses. Most of the professional nurses during the interviews indicated that they lack financial support for them to be able to study for masters studies of nursing. Availability of information must be provided by the university in the form of workshops to educate professional nurses on the benefits of acquiring masters studies in nursing and brochures made available.

Furthermore, clear admission criteria into masters studies in nursing must be documented and made available to the professional nurses for them to see if they met the requirements or not. Cohen (2011) suggests that the provision of financial assistance in the form of a scholarship, employer assistance and/or educational leave of absence for the pursuit of postgraduate education to counter the need to reduce working hours would encourage more nurses to pursue postgraduate education.

5.3.2 Drawing seniority list in hospital towards the provision of scholarship by Government.

The Government providing scholarships to professional nurses could lead to most nurses registering for masters studies. The study findings indicated that drawing a seniority list towards scholarships amongst professional nurses interested to study for masters might increase the intake of masters studies in nursing. Professional nurses noted that lack of financial support in the form of scholarship from the Department of Health was a barrier to masters studies, therefore they do not want to add economic burden to their family's finances. The availability of scholarship provided by the government by drawing the seniority list for a professional nurse with an honors degree would stimulate more professional nurses to study masters studies. The barriers to masters studies identified by all professional nurses in both cohorts in this study are congruent with those reported by previous studies: financial costs (Bahn, 2007).

5.3.3 Allocation of fully funded scholarship by tertiary educational institutions.

The availability of scholarships to all registered masters students in the university would increase the intake of nurses into postgraduate studies. Many professional nurses are working parents and spouses and must study, and work to support their families. Professional nurses in this study who do persist in their studies usually struggle financially and find it difficult to balance their studies with their jobs and family responsibilities. Professional nurses noted that lack of financial support in the form of scholarships disadvantaged them from studying masters studies in nursing. Lack of funding to offset the cost of postgraduate education or practicing nurses have long been recognized as a significant barrier within Australia (Ng, Eley, & Tuckett, 2016).

5.3.4 The allocation of research mentors.

The Department of Nursing Science should have a mentor to assist professional nurses regarding research matters. The mentor should be a fully employed person that is skilled in research matters. This is because professional nurses indicated fear of research as a barrier for them not studying towards a masters qualification. Most professional nurses fear research due to their past experiences in undergraduate research. Universities must train and workshop mentors on how to supervise masters students to ally anxiety to professional nurses for them to consider study for masters. Mullins, 2017) concur with the importance of support by identifying someone that can coach and assist in research can provide.

5.3.5 Dissemination of information related to the registration opportunities pointed out as an option.

Lack of information about masters studies in nursing was a major barrier that was indicated on why professional nurses are not registering for masters studies in nursing. Availability of information in the form of workshops, awareness complain, brochures and documented criteria for admission would increase the intake of master's studies in higher institutions of learning. The information should be disseminated on the university website and regular hospital meetings. Increasing awareness of the master's course and its benefits to professional nurses might motivate them to enroll for the course. The University can conduct an awareness campaign in different hospitals to spread the knowledge about and benefits of master's studies. Most of the professional nurses interviewed appeared not to be motivated by obtaining masters qualification. Research findings from this study indicated that the two categories of motivation drive the uptake of master's studies in nursing: firstly, personal motivation, which includes the desire for personal stimulation and the intrinsic importance of masters studies and secondly, professional motivation, which includes career progression and extrinsic professional expectation. Many of the professional nurses in this study perceived that master's studies would offer additional benefits, such as job security and being recognized as a professional. Recognizing that nursing offers security in a career choice provided them an incentive to exert the effort needed to complete the masters.

This finding concurs with research showing that internal and external factors are important to an adult learner (Grabowski, Rush, Ragen, Fayard, & Watkins-Lewis, 2016).

On a professional level, nurses are motivated to obtain higher qualifications as they enable them to progress to more senior positions, enhances their occupational status, improves working conditions, decreases the likelihood of unemployment and enables salary increases and higher lifetime earnings (Low, H., Meghir, C. & Pistaferri, L., 2010,). Personal and professional values and attitudes are often reflected in an individual's behavior and motives for action (Altmann, 2011). Attitude plays a significant role in motivation because attitude influences a person's ability to question life's complexities or underlying assumptions in specific situations (Altmann, 2011). Attitudes and motives are linked to actions: a strong attitude can motivate one to participate (Altmann, 2011).

5.4 CONCLUSION

Suggested strategies towards the improvement of masters degree uptake by professional nurses and the purpose of recruitment strategies were discussed. The chapter also highlighted the target group for the suggested strategies. The researcher believes that the implementation of the suggested strategies by the target group might increase the uptake of professional nurses into masters studies of nursing.

CHAPTER 6: SUMMARY, LIMITATIONS, RECOMMENDATIONS AND CONCLUSION

6.1 INTRODUCTION

This chapter provides a summary of the whole study. The study discussed limitations by only using a tertiary hospital, professional nurses and qualitative research approach in the study. The chapter further discussed the recommendations that are based on the study themes and sub-themes to mainly three groups; universities, departments of health and professional nurses.

6.2 SUMMARY OF THE STUDY

6.2.1 Aim of the Study

- The study aimed to develop recruitment strategies for professional nurses into Masters Studies of Nursing at the University of Limpopo.

6.2.2 Objectives of the Study

The objectives of the study were:

- **To explore and describe views of professional nurses regarding recruitment strategies of enrolling into masters studies of nursing at the University of Limpopo.**

The use of exploratory and descriptive of a qualitative research approach method was used in the study and semi-structured interviews were conducted with professional nurses.

- **To explore and describe reasons for professional nurses not enrolling for masters nursing qualification at the University of Limpopo.**

The use of exploratory and descriptive design assisted the researcher to obtain reasons for professional nurses not enrolling for masters studies. The use of reflective skills during semi-structured interviews made it possible to achieve the objectives.

- **To develop recruitment strategies for professional nurses into Master's studies of Nursing at the University of Limpopo.**

During the individual semi-structured interview, professional nurses were asked for their suggestions on the recruitment strategies for enrolling professional nurses into masters studies.

6.2.3 Research questions

The research aimed to answer the following questions:

- **Why are professional nurses not enrolling for Masters Studies of Nursing at the University of Limpopo?**
- **How can professional nurses be recruited into Masters Studies of Nursing at the University of Limpopo?**

The researcher has managed to answer the research question by discussing the views and reasons why professional nurses are not enrolling for masters studies. The findings have been addressed in chapter 4.

6.2.4 Research methodology

Exploratory and descriptive designs of a qualitative research approach were used in the study to help the researcher regarding reasons for professional nurses not enrolling for a masters qualification. Research designs were used to explore and describe views of professional nurses regarding enrolling for masters studies. Data collection was done using semi-structured interviews. Data analysis was done according to Tech's open coding method of analysis (Creswell, 2017).

6.2.5 Findings of the study

The findings of the study revealed that professional nurses shared similar knowledge to develop recruitment strategies for masters studies in nursing. The strategies were developed and described in chapter 5. The following themes emerged from the data analysis, using Tech's inductive, descriptive coding technique of qualitative data analysis.

Theme 1: Expressed views related to the recruitment of nurses to enroll for a masters in nursing.

Increased confidence is thought to greatly influence a person's ability to perform satisfactorily at work (Pelletier, 1994). Wood (1998) also reported increased

confidence and nurses' perception that they were better able to challenge practice. Several other studies have also reported that postgraduate education enables nurses to challenge and accept challenges in practice (Spence, Barnett, Barriball, Reynolds, Jowett, & Ryrie, 2013).

Theme 2: Identified challenges related to the professional nurse's registration towards obtaining a masters degree.

The challenges experienced by the graduates in the study of McDonald (2009) about their education were time management. Most of the participants found it difficult to balance work, study and life stresses (McDonald, 2010), which resonates with earlier studies (McCarthy, Evans, Nicholl, Timmims, Penz, Spencer, 2011) that reported disruptions to family and work life.

Theme 3: Perceived Benefits of acquiring a master of nursing qualification.

According to, Pelletier, (2014) over half the nurses enrolled in graduate-level nursing courses perceived an increase in their self-esteem and confidence as a consequence of undertaking these types of courses. Increased confidence, self-esteem, and motivation attributed to postgraduate studies have also been reported to lead to improved clinical practice (Porter, 2010).

Theme 4: Strategies towards improvement in masters degree uptake by professional nurses.

Recognition is an important factor in employee motivation (Tourangeau & Cranley, 2009). Brun and Dugas (2008) suggest that employees will approach their work more positively if they are provided with 'proper' recognition. For nurses, this may include acknowledgment of their role and qualifications. Strategies such as establishing recognition programs that promote praise and recognition of nurses' contributions as well as qualifications within organizations may lead to increased intention to stay. Programs such as career pathways, scholarships, awards and appreciation events are examples of nurse-recognition programs. Recognizing individuals for their achievements should increase their job satisfaction, which may improve participation in postgraduate education and, importantly, help provide excellent care to patients.

6.3 LIMITATIONS OF THE STUDY

The study was conducted to professional nurses with degrees only and therefore cannot be generalized to other professional nurses with a diploma. The study was done to only professional nurses at a tertiary hospital, therefore it cannot be generalized from other professional nurses in secondary and district hospitals.

6.4 RECOMMENDATIONS

6.4.1 Recommendations to the Universities

- The researcher recommends that a documented clear admission criteria into masters study nursing.
- The research recommends that the university should conduct workshops that will teach professional nurses about the requirements and benefits of masters studies of nursing.
- Furthermore, the university should emphasize more on the availability on assess of bursaries and scholarship relating to masters of nursing.

6.4.2 Recommendation to the Department of Health

- The researcher recommends that the department of health must recognise all professional nurses who have masters studies of nursing by giving them better posts and salary increments.
- The researcher recommends that the department of health must provide availability of scholarships to professional nurses to study towards their masters.
- The researcher recommends that the department of health must ensure the availability of study leaves to professional nurses who wants to study for masters studies of nursing
- The researcher recommends that the department of health needs to be consistent in providing incentive to all professional nurses who have studied masters and completed on record time.
- The researcher recommends that the department of health must make it a requirement that nursing managers must have master's qualification.
- The researcher recommends that the department of health must hire more nurses so that professional nurses will be able to study for masters in nursing.

6.4.3 Recommendations to professional nurses

- The researcher recommends that the professional nurses must apply for study leaves when they are studying for masters in nursing.
- The researcher recommends that the professional nurses must apply for scholarships when they are studying for masters in nursing.
- The researcher recommends that professional nurses must register for masters to pursue their studies in order to allay anxiety of master's studies and be able to choose supervisors of their choice.

6.5 CONCLUSION

In conclusion, this research set out to explore and describe views of professional nurses regarding recruitment strategies of enrolling into masters studies in nursing at University of Limpopo. It accomplished its aim by developing recruitment strategies for professional nurses into master's studies in nursing. The findings identified included availability of study leaves, scholarships, motivation, incentives and recognition of masters can improve the intake of more professional nurses registering for masters studies in nursing. In addition to the recommendations described above, the findings in this study provide a starting point for future research in this area.

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Appendix A: Interview guide

What are your views regarding the recruitment strategies of professional nurses into University for masters studies

How can professional nurses be recruited to master's qualification studies at the University of Limpopo?

How important is having a Master's qualification in your profession?

Do you ever consider registering for masters studies at the university?

Why are professional nurses not registering for Masters Studies of Nursing at the University of Limpopo?

Appendix B: Example of a Transcript

Title: Development of recruitment strategies for professional nurses in Masters' of Nursing at the University of Limpopo in Mankweng Hospital

Date of the interview: 05 March 2018

Place of the interview: Mankweng Hospital

Time of the interview: 10h40

Interviewer: Nsibande K F

Participant: Participant no.13

Researcher: What are your qualifications?

Participant: Professional nurses Diploma in Nursing, Midwifery, Community nursing Science and BCUR in administration and Education.

Researcher: How many years of experience?

Participant : professional nursing since 1993. Operational manager from 2007.

Researcher: What are your postgraduate course?

Participant: No

Researcher: What are your views regarding the recruitment strategies of professional nurses into Masters Studies?

Participant: I am the one also an example I want to do masters but the easy year I keep on postponing.

Researcher: Why are you postponing?

Participant: I am not sure like you said, somebody can help me. With a topic that choice I am not sure what do I want, I wanted geriatric something to do

with old people the next thing I wanted something to do with youth. But since I talked with you, think I will apply and let the supervisor guide me on what I want to do.

Researcher: So what views the

Participant: I think if you have it you have some opportunities to have the higher post of a manager in a hospital and you can be higher in a college and University to help other students in learning.

Researcher: what is it that you understand about masters?

Participant: What I understand is its research you have a topic and your research about it you get you wanted to and at the end you to help the community regarding what you have researched about.

Researcher: What are the strategies that we can formulate for more nurses to do Masters?

Participant : Maybe by identifying the need of the Community talking to professional nurses involves them in the topics like as we work at medical wards, I can see how we have more of defaulters maybe it can be one of our topic many diseases the patient doesn't drink medication if we research maybe about the at the end if we are studying, we can have more knowledge about it that we have acquired from the books, internet from people who have already qualified they will help the community by learning.

Researcher: How can we identify the need of the community?

Participant: As I said now NEH, we identify most of the treatments that are not taken. We admit people. They go home, we admit the same patients they go home like people with epilepsy. They do not drink treatment, people with TB/HIV they come back being defaulters so if we try maybe to get information from relatives maybe then involve nurse at the clinic then follow it up, maybe we can help them.

Researcher: What other strategies that we can use to recruit more nurses to do Masters.

Participant: Like young people in the ward can be encouraged because people just learn and after that, they don't want to go further to their studies. We can talk to the professional nurses some are still young. They passed a long time ago they don't have an idea of going to further their studies.

Researcher: In which way can we encourage them?

Participant: I think by sharing knowledge with them and showing them the advantages because as we get old we are going home and positions for young people can bring change to the community.

Researcher: What do you think can make the young generation not to go to school?

Participant: It is because now they look at the money they want to specialize maybe the reason is being able to moonlight in the private hospitals.

Researcher: So, which means they want money than education?

Participant: But even though they go for specialty

Researcher: why do you think they go for specialty instead of masters?

Participant: What will I say; I think maybe some people are afraid of doing research. They just want to read books and write exams they are afraid of doing research methodology because if in our course in diploma everybody was complaining of research methodology. I think they are afraid of research because of most of the Masters in about research.

Researcher: How can they deal with that fear?

Participant: You know like people who have done Masters I think they are the ones who can motivate us. Motivation from people who have passed and who are in that position maybe they can persuade us.

Researcher: So how can they do the motivation because nurses are all over so which strategy can we do?

Participant: Let's say maybe you are given a chance from the management then you call only the professional nurses maybe they give you an hour or so so that you can come and motivate people. People will be motivated. Some they just passed and they are professional nurses in the ward they do the same work every day and go home. But if we are encouraged maybe it will motivate us. Somebody prepares and shows you how do you do in research methodology encourages you that you are going to get a higher managerial position maybe it will encourage them.

Researcher: I heard you talking about salary. How is the salary of people who have a Masters?

Participant: I don't know how much they get but since they get the managerial position I think they have a better salary.

Researcher: How can you be recruited into masters?

Participant: Me by who?

Researcher: By the university how can we recruit you if we want you to do masters?

Participant: Like you have come to me like this I feel I want to do it but if I'm far from you I keep on having fear but after this, you can tell me more about it I think I can be motivated then I will be recruited.

Researcher: So other nurses how can we recruit them.

Participant: Like I say if you can come to the management you ask for an hour for professional nurses then you come and motivate them then showing them how you studied what you get at the end maybe there will be motivated.

Researcher: How important is having masters in your profession?

Participant: You having a masters working in a ward doing the same work motivation of it will be just y helping the community with diseases that people defaulted if I'm I award level. I think my work is to see just to see these diseases for the whole year or mouth is the disease defaulter, defaulter then follow up relatives, you follow up the clinics, you follow up until you get the root cause then you can help the community even if that disease is from the same community or different part of the world then you can help them, you can do it maybe at the ward without being in the managerial position.

Researcher: Do you think the government is doing enough for professional nurses to study masters?

Participant: I don't think the government is involved it's from a person within.

Researcher: Why is it like that?

Participant: I never heard people encouraging people it's from an individual.

Researcher: How can we involve the government what strategy can we formulate to involve the government?

Participant: I think maybe like this thing that just happened that no fee for people who go to university even if they can take a chance people can come and study masters maybe they subsidize them are most people of masters are working maybe less are not working we can motivate them by meeting them halfway with money.

Researcher: So I heard you saying the government or institution what is it can do to motivate Mankweng and the University of Limpopo?

Participant: I think now what we have started last year there is a program for CPD for nursing council they have given us some forms though it seems as if it's what I forgot the word pilot we took our hospital and the other one in Limpopo, so we are starting to prepare lectures we give any category, Professional nurses, enrolled nurses and enrolled assistant we are starting to revive what we have been doing by giving them a lecture or demonstration something for them so that we revive them, the hospital is doing that nearly every week, Professional nurses are preparing lectures to teach the college and with people of lower categories just to update them or remind them how we work.

Researcher: How can a lot be created for nurses to know better regarding masters?

Participant: I think somebody who has it can organize through the management like you have asked we were told as operational managers that somebody will come to the ward talking to professional nurses about this even if it arrange t a person to put them together in a hall and talking to us like that we would be motivated.

Researcher: What role can be played by the University of Limpopo regarding sensitization?

Participant: I think a delegate can be sent through a letter the way they write to management when they want to send nurses that person can be known to come through on this date look for professional nurses and give us what she has prepared and it will motivate us all.

Researcher: Why are you not registering for masters?

Participant: I think I will know though is the education you study until I think I will now.

Researcher: So what causes the other nurses not studying masters or registering for masters?

Participant: I think its a lack of motivation.

Researcher: What else can be the reason?

Participant: I don't know its right to say they are lazy to study or what?

Researcher: What is it that we can do to make them not to be lazy?

Participant: Encouragement from people who have passed, people who have already have masters.

Researcher: Thank you for participating in the study.

Appendix C: Consent form

UNIVERSITY OF LIMPOPO CONSENT FORM

Statement concerning participation in clinical research.

Name of the study: **Development of Recruitment Strategies for professional nurses in Master's studies of Nursing at the University of Limpopo in Mankweng Hospital**

I have read the information on the aim and objectives of the study proposal and was provided the opportunity to ask questions and given adequate time to rethink about the participation in the study. The aim and objectives of the study are sufficiently clear to me. I am not pressurized to participate in any way.

I understand that participation in this clinical study is completely voluntary and that I may withdraw at any time.

The study has been approved by the Chairperson of the Turfloop Research Ethical Committee at the University of Limpopo. The Department of Health has permitted for the study to be conducted in the hospital. I am fully aware that the results of this study will be used for scientific purposes and may be published. I agree with this, provided my privacy.

I hereby give consent to participate in this study

Name of the participant

Signature

Appendix D: Ethical Clearance



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/265/2017: PG

PROJECT:

Title: Development of recruitment strategies for professional nurses
Into a Masters Studies of Nursing at the University of Limpopo in
Mankweng Hospital

Researcher: FK Nsibande
Supervisor: Mr MO Mbombi
Co-Supervisor: Prof ME Lekhuleni
School: Health Care Sciences
Degree: Masters in Nursing Science


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:

- i) Should any departure be contemplated from the research procedure as approved, the researcher(s) must re-submit the protocol to the committee.
- ii) The budget for the research will be considered separately from the protocol.
PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES.

Appendix E: Permission Letter Department of Health



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF HEALTH

Enquiries: Stols M.L (015 293 6169)

Ref:4/2/2

Nsibande FK(LP_201712_010)
P.O. Box 913
Hlathikhulu
Swaziland
S004

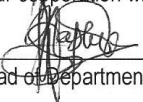
Greetings,

RE: Development of Recruitment Strategies for Recruiting Professional Nurses into a Masters Study of Nursing at University of Limpopo in Mankweng Hospital

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 (<http://nhrd.hst.org.za>) 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


Date

Appendix F: Permission Letter Mankweng Hospital



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF HEALTH

MANKWENG HOSPITAL

Ref: S5/3/1/2

Enq: Makola M.M

From: HR Utilization and Capacity Development

Date: 29 January 2018

TO: NSIBANDE FK
University of Limpopo
Turfloop Campus

REQUEST FOR PERMISSION TO CONDUCT RESEARCH AT MANKWENG HOSPITAL

1. The above matter has reference.
2. This is to confirm that **Nsibande FK** has been granted permission to conduct research on "**Development of Recruitment Strategies for Recruiting Professional Nurses into a Master Study of Nursing at University of Limpopo in Mankweng .**"
3. She will be conducting research as from 01 February 2018 to 31 March 2018.
4. Attached please find her application letter, approval from Provincial Office, Turfloop Research Ethics Committee Clearance Certificate, Research Proposal and Questionnaire.

Thanking you in advance

Chief Executive Officer

2018/01/29
Date

Department Of Health
Mankweng Hospital
Receiver: <i>Nkwe</i>
2018 -01- 29
Office No. 106
Tel: 015 266 1016
LIMPOPO PROVINCE

Appendix G: Independent coder

Qualitative data analysis

Master of Nursing

Nsibande KF

**DEVELOPMENT OF RECRUITMENT STRATEGIES FOR PROFESSIONAL
NURSES IN MASTER'S ON NURSING SCIENCE AT THE UNIVERSITY OF
LIMPOPO IN MANKWENG HOSPITAL**

THIS IS TO CERTIFY THAT:

Professor Maria Sonto Maputle has co-coded qualitative data which was
collected through:

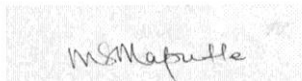
Semi-structured one-to-one interviews

For the study:

**DEVELOPMENT OF RECRUITMENT STRATEGIES FOR PROFESSIONAL
NURSES IN MASTERS' ON NURSING SCIENCE AT THE UNIVERSITY OF
LIMPOPO IN MANKWENG HOSPITAL**

I declare that the candidate and I have reached consensus on the major
theme reflected by the data during a consensus discussion meeting.

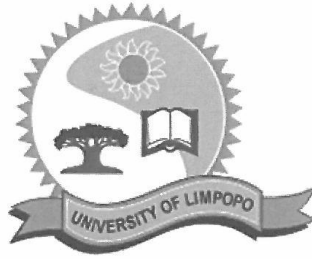
Prof MS Maputle



Prof MS Maputle (PhD)

Date:

Appendix H: Letter to the Editor

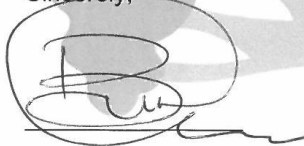


University of Limpopo
School of Languages and Communication Studies
Private Bag X1106, Sovenga, 0727, South Africa
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TO WHOM IT MAY CONCERN

This is to confirm that the **Master of Nursing** dissertation entitled “**DEVELOPMENT OF RECRUITMENT STRATEGIES FOR PROFESSIONAL NURSES IN MANKWENG HOSPITAL INTO A MASTERS STUDIES OF NURSING AT UNIVERSITY OF LIMPOPO, SOUTH AFRICA**” by **Nsibande Fisiwe Khetsiwe** Student Number: **200902696** has been proofread and edited, and to my knowledge I am satisfied with both its current academic and technical layouts.

Sincerely,



Dr TA Makamu

Senior Lecturer: Translation Studies and Linguistics Lecturer

School of Languages and Communication Studies