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LEADERSHIP & PROFESSIONAL DEVELOPMENT

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Partnering With Schools of Nursing: An Effective Recruitment Strategy

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Recruiting competent and passionate oncology nurses is a top priority for oncology nurse leaders. Recruitment is a challenge for many specialty areas (Buerhaus, Staiger, & Auerbach, 2000); however, it is particularly difficult in oncology, an area associated with high levels of stress, toxic agents, complex research protocols, and death and dying. The challenge of nurse recruitment in oncology was underscored by a recent survey that assessed perceptions about the oncology nursing workforce among a sample of oncology nurses and nurse executives pulled from the Oncology Nursing Society membership directory. In the survey, 79% of staff nurses reported an inability to retain experienced nurses in their work settings, and nurse executives reported that a lack of qualified applicants was the most common reason for unfilled positions (Buerhaus, Donelan, Des-Roches, Lamkin, & Mallory, 2001).

In the face of such trends, nurse leaders are called on to develop creative approaches to attract nurses to their institutions. This mandate is more pressing given recent evidence demonstrating an association between adequate nurse staffing and favorable patient outcomes (Aiken, Clarke, Sloane, & International Hospital Outcomes Research Consortium, 2002; Aiken, Clarke, Sloane, Sochalski, & Silber, 2002), a relationship that is especially apparent in oncology, which, because of its complexities, requires a highly skilled and stable nursing workforce.

As oncology nurse leaders in three hospitals affiliated with the same integrated delivery system, we have worked closely with each other to monitor trends in the oncology nursing workforce and to develop creative, sound, long-term strategies to attract qualified oncology nurses. The institutions—Dana-Farber Cancer Institute (DFCI), Brigham and Women's Hospital (BWH), and Massachusetts General Hospital (MGH)—re-

side in an extremely competitive market in Boston, MA, where traditional recruitment strategies, such as maintaining a competitive salary structure and participating in professional conferences and job fairs, are not enough to ensure a robust oncology nursing workforce.

A Multifaceted Recruitment Strategy

Over time, the three institutions have developed a multifaceted approach to attracting and retaining nurses (see Figure 1). The approach has proven effective as evidenced by vacancy rates among oncology nurses in the institutions between 2.04% and 4.2%, well below the average vacancy rate of 8.4% for nurses nationwide ("Telling the hospital story," 2004). Fundamental to each institution's recruitment and retention strategy is a commitment to maintaining an environment that supports the professional development of nurses and ensures the availability of resources necessary to deliver high-quality nursing care. Only when such an environment is in place will efforts to recruit and retain nurses prove successful.

Among the institutions' most effective recruitment strategies are those that strengthen and capitalize on partnerships with schools of nursing. In general, baccalaureate nursing curricula focus on oncology in a very limited way, a factor that may help explain the small number of graduated nurses entering oncology. Recognizing this factor, the authors have worked with several schools of nursing to develop programs designed to increase knowledge about oncology nursing among faculty-knowledge that can then be passed on to students—and to expose students to the dynamic and varied nature of oncology nursing practice. In this article, the authors describe two programs that have been well received by faculty and students and have resulted in a "win-win" situation because they help the hospitals achieve recruitment objectives and help the universities enrich their oncology nursing curricula as well as the experiences of nursing students.

A Community Health Rotation for Senior Nursing Students

During the past two years, DFCI has worked with the University of Massachusetts Boston (UMB), a school that attracts a particularly diverse group of students, to

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- Maintain an environment that supports professional growth and practice.
- Appoint faculty to the organization's nursing research program.
- Offer opportunities for students to observe and experience oncology nursing.
- Clinical oncology rotation for undergraduate nursing students (as described in article)
- Oncology nursing fellowship (as described in article)
- Spend a Day With an Oncology Nurse: a oneday observational experience with an oncology nurse preceptor
- Create opportunities for faculty to develop expertise in oncology nursing.
- Collaborate with faculty from schools of nursing on an oncology conference for nursing professionals.
- Oncology nursing faculty fellowship (as described in article)
- Develop a mentoring program for minority students.
- Maintain an attractive and competitive salary structure.
- Participate in professional conferences and job fairs

Figure 1. Recruitment Strategies

develop programs that help address two of DFCI's recruitment objectives: to attract newly graduated nurses and to develop a more diverse nursing workforce. Nursing leaders at DFCI and UMB recognized that, as a comprehensive cancer center, DFCI offers nursing students a unique learning opportunity. It encompasses a broad range of cancer specialties and has a large ambulatory oncology program that allows students to follow patients and families over time and to witness how cancer affects the lives of patients and families. In addition, DFCI's relationships with community organizations offer students an opportunity to participate in many different community-based health-promotion and cancer-prevention activities.

Several programs have been developed by DFCI and UMB that take advantage of the breadth and depth of DFCI's patient services. The best example is a clinical rotation for senior nursing students, introduced during the fall 2004 semester, designed to fulfill students' community health requirement. Unlike many community health rotations, the DFCI curriculum focuses on a particular population—individuals living with or at risk for developing cancer. Rather than being restrictive, the focus allows students to gain an in-depth appreciation of the impact of cancer on individuals, families, and the community.

The 15-week placement accommodates eight students and consists of three components: clinical rotations, a community outreach activity, and a group community service initiative referred to as the students'

capstone (synthesis) project. The placement begins with a two-day orientation program that introduces students to DFCI and reviews cancer treatment modalities and concepts related to patient safety, infection control, pain and palliative care, and care coordination. For their clinical rotations, students are assigned to two of seven different clinical areas. Working side by side with experienced nurse preceptors from DFCI, students follow patients through the ambulatory clinics, help conduct clinical assessments and patient teaching, and participate in rounds on the inpatient units. They also attend presentations by experienced oncology nurses that address a range of subjects, such as healthcare disparities among minority populations, cancer genetics, and self-care techniques for oncology nurses. For the community outreach activity, students can choose among several options. For example, during the fall 2004 semester, several students worked on a mammography van that visited underserved neighborhoods. Other students participated in a men's health fair sponsored by DFCI and other community organizations or attended a two-day workshop for teachers on the side effects of cancer treatment among school-age children. For the capstone experience, students worked as a group to develop and implement a smoking-prevention and education program at a community club for boys and girls.

Recognizing that schools of nursing have difficulty supporting students in specialized practice settings, DFCI provides the clinical faculty for the community health program. A master's-prepared oncology nurse serves as the program's clinical instructor and works with UMB faculty to ensure that the program is coordinated with the nursing school curriculum. DFCI nurses and nurse practitioners precept students during the clinical rotations, and DFCI's director of patient and family education works with the students on the community outreach projects.

Student and preceptor evaluations of the DFCI program have been very favorable. Students have grown to appreciate the richness and diversity of oncology nursing and have cited the benefits of working with experienced oncology nurses, engaging with patients with cancer and their families, and participating in varied community programs. Since introducing the community health rotation, DFCI also has developed a mentoring program, called SMART (Support Mentorship and Respect Together in Nursing), which is designed to support minority nurses who are new to the organization. The two programs work synergistically to introduce opportunities in oncology to nurses early in their careers and to ensure that nurses are supported throughout their first experiences in oncology nursing.

Oncology Nursing Fellowship

The Carol A. Ghiloni Oncology Nursing Fellowship at MGH is another program that

targets nursing students and faculty and illustrates how a program that enhances a nursing curriculum can be an effective recruitment strategy. The oncology nursing fellowship is a 10-week program open to nursing students between their junior and senior year in college and to baccalaureate nursing faculty. The paid fellowship occurs during the summer months to take advantage of the break in the academic calendar (Gallagher, Agretelis, Coakley, & Somerville, 2003). Information about the fellowship is sent to baccalaureate programs throughout New England, and two student fellows are accepted for participation each session. Selection is based on academic performance (demonstration of a grade point average of 3.0 or higher), previous work experience, and interest in oncology. One or more faculty fellows may participate in each session as well.

The fellowship includes a precepted clinical experience and observational rotations through multiple oncology practice sites. Student fellows also select a topic for intensive study and prepare a presentation for students and faculty in their nursing program. Two doctorally prepared nurses serve as program coordinators. Working together, they oversee the logistics associated with the fellows' experiences and ensure that the fellows are supported throughout their time at MGH.

During the first days of the fellowship, the participants meet with a program coordinator, who serves as their learning coach and works with them to develop individualized learning plans. Over the next five to six weeks, the student fellows work with preceptors on an adult oncology inpatient unit and attend clinical conferences and seminars. Once the inpatient rotation is complete, the students begin a series of observational experiences that introduce them to other dimensions of oncology care and opportunities in oncology nursing. Throughout this time, they meet weekly with their learning coach to reflect on their clinical experiences and discuss questions about oncology nursing practice. The learning coordinator also helps the students with their special projects by identifying clinical experts whom the students can interview and observe and by guiding them toward resources in the hospital's medical library. One week of the fellowship is reserved to allow students to research their topics and prepare their presentations.

Faculty fellows, who come with professional experience and are accustomed to working autonomously, work with the learning coach to customize fellowships to meet their specific learning objectives. For example, a recent faculty fellow sought participation in the program after learning that she would be responsible for teaching the oncology curriculum during the next academic year. The learning coach worked with the faculty fellow to design a program that built on her cardiac nursing background and allowed her to observe and experience

practice in multiple ambulatory oncology sites. At the end of the fellowship, she wrote an article describing her experience and how it allowed her to enhance her university's oncology nursing curriculum, support students through a clinical rotation in gynecologic oncology, and better represent the professional opportunities offered by oncology nursing practice to her students (Flanagan, Coakley, Gallagher, & Somerville, 2005).

By the end of the 10 weeks, the fellows have developed an appreciation for oncology nursing as a diverse and multifaceted professional subspecialty and have gained insight into the experiences of patients and families who are living with cancer. They also have developed collegial relationships with oncology nurses at all levels of practice and have begun to explore the clinical research that is fundamental to evidence-based oncology nursing practice. The benefits to the MGH oncology nursing program are substantial, particularly in the area of recruitment. To date, seven of the eight students who have completed the fellowship have been hired as nurses in the MGH oncology program.

Discussion

Collaboration among nursing leaders at the hospitals and in the schools of nursing was essential to the success of the programs described in this article. Nurse leaders in both settings worked to encourage creativity among their staff and enthusiasm for introducing oncology into the nursing curriculum. Nurse leaders at each of the hospitals also worked with each other to ensure that the programs were complementary rather than competitive and offered opportunities to students and faculty in multiple schools of nursing.

Collaborating with schools of nursing to develop programs for faculty and students can be a highly effective recruitment strategy. Increasing faculty members' knowledge about oncology nursing practice empowers them to enhance the oncology nursing curriculum and to help students understand the professional opportunities available through oncology nursing. Introducing students to oncology nursing and to a particular hospital, while their professional identities still are being formed, increases the likelihood that students will consider oncology nursing and the organization when selecting a first job experience.

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