

A Descriptive Study Exploring the Components of Academic Coaching  
Programs in Nursing Education across the Midwest

A dissertation submitted

by

Angela M. Johnson

to

Bryan College of Health Sciences

in partial fulfillment of the requirement

for the degree of

DOCTOR IN EDUCATION

with an emphasis on

Nursing Education

This dissertation has been accepted for the faculty of

Bryan College of Health Science by:

We hereby certify that this dissertation, submitted by your name, conforms to acceptable standards and fully fulfills the dissertation requirements for the degree of Doctor in Education from Bryan College of Health Sciences

Dr. Marcia Kube, EdD, RN, CNE  
Chair

---

Dr. Marilyn Moore, BS, M  
Ed, EdD  
Committee member

---

Dr. Renee Hathaway, PhD, RVT  
Committee member

---

Copyright © March 24<sup>th</sup> 2021  
Angela M. Johnson

## Acknowledgments

With great love and gratitude, I recognize all those who have assisted in my educational journey. First, my loving husband, Joel, has always encouraged me to pursue my dreams and never hesitates to help with anything I ask of him. My children, Jayden, Julia, Owen, and Emmett, have been my biggest inspiration for my journey. Although you have made sacrifices at times, you have witnessed the fruits of hard labor. My parents, Darell and Joyce, for instilling in me the values and discipline needed to complete this journey. And finally, my colleague and best friend, Cathy. I could not have asked for a better person to complete this journey with. I am so proud of us both, my friend.

## Table of Contents

Abstract.....	xi
CHAPTER I: INTRODUCTION.....	12
Purpose of the Study.....	12
Background and Rationale.....	12
Research Questions.....	14
Assumptions .....	14
Delimitations.....	14
Definition of Terms .....	15
Significance of the Study.....	15
CHAPTER II: LITERATURE REVIEW .....	17
Definition of an academic coaching program.....	17
Background.....	22
Benefits.....	24
Barriers .....	25
Issues in diversity and academic coaching models.....	27
Theoretical Context .....	28
Four Major Stakeholders .....	30
Institutional Roles.....	30
Retention.....	31
Resources .....	33
Faculty Roles .....	34
Program development.....	34
Recognition of students at risk.....	35

Relationships and communication .....	38
Student Roles .....	39
Responsibility .....	39
Experiences and perceptions.....	40
Relationships and communication .....	41
Self-evaluation .....	43
Academic Coach Role .....	44
Relationships and communication .....	44
Development and implementation of programs.....	45
Evaluation of programs.....	46
Summary.....	47
CHAPTER III: METHODS AND PROCEDURES .....	49
Research Design .....	49
Population and Sample .....	49
Demographics.....	50
Description of Setting.....	51
Instrumentation .....	51
Procedure .....	51
Data Collection Procedures.....	52
Analytical Procedures .....	53
Summary.....	53
CHAPTER IV: RESULTS.....	54
Introduction.....	54
Research Questions.....	54
Data Analysis.....	55

Results.....	55
Results Summary .....	68
CHAPTER V: DISCUSSION AND SUMMARY .....	70
Introduction.....	70
Research Questions and Interpretation .....	70
Theoretical Context .....	73
Limitations of the Study .....	74
Small Sample Size .....	74
Newly Developed Survey Tool.....	75
Implications and Recommendations for Education .....	76
Need for Future Research .....	78
Summary.....	79
References.....	81
Appendix A.....	87

## LIST OF TABLES

TABLE	PAGE
1. Table 1 Academic Coaching Program Information .....	57
2. Table 2 Demographic Information .....	59
3. Table 3 Program Perceptions.....	60
4. Table 4 Program Component Frequency.....	64
5. Table 5 Program Component Effectiveness.....	66



## LIST OF FIGURES

FIGURE		PAGE
1.	Figure 1 Length of Academic Coaching Program .....	56
2.	Figure 2 Nursing Degree Types .....	58
3.	Figure 3 Faculty Perceptions .....	61
4.	Figure 4 Student Perceptions .....	62

## **Abstract**

Research supports that academic coaching programs help students succeed in their progression through a nursing education program. Based on the literature, there is a need for further definition and a deeper understanding of academic coaching programs' components and their effectiveness in promoting nursing student success.

This study explores what constitutes best practices for creating and implementing academic coaching programs in nursing education to promote student success. Participants were chosen through the purposeful sampling of Deans, Directors, and Program Chairs of nursing programs in eleven Midwestern States. All participants were sent an invitation to participate that included a link to an author-created survey tool constructed for this study.

This study revealed the most commonly implemented components of academic coaching programs and their level of effectiveness. There were thirty possible components established from the review of the literature. Participants were asked whether their program utilized the component and ranked its level of effectiveness in student success.

This study recommends that implementing academic coaching program components of the highest level of effectiveness would be of the most significant benefit. Further studies are recommended to validate the most common components and those most effective in promoting student success.

**Keywords:** academic coaching, academic success, education, nursing, nursing students, program development, academic achievement, success coaching.

A Descriptive Study Exploring the Components of Academic Coaching Programs in Nursing Education across the Midwest

**CHAPTER I: INTRODUCTION**

**Purpose of the Study**

This descriptive study aimed to explore what constitutes best practices for implementing academic coaching programs in nursing education across the Midwest to promote student success.

**Background and Rationale**

Throughout the literature, academic coaching programs and academic coaches' defined role in colleges and universities vary (Broussard & White-Jefferson, 2018; White-Jefferson, Broussard, & Fox-McCloy, 2020). Academic coaching programs were created to help students succeed with their progression through an academic program of study. There is a need to understand further the most widely implemented components of academic coaching and their effectiveness in assisting with student progression. The limited amount of research specific to the effectiveness and various components of academic coaching programs is likely due to its newer development as a form of student support (Capstick, Harrell-Williams, Cockrum, & West, 2019). Additionally, an organization's varying approaches to developing and implementing an academic coaching program limit the research's depth in any particular context (Capstick et al., 2019). The literature describes how an academic coaching program decreases student attrition and supports students throughout their education (Bryer, 2012; Cox-Davenport, 2017; Deiorio, Carney, Kahl, Bonura, & Juve, 2016). One can conclude that there is an agreement amongst the literature that coaching assists in student retention, but which components of academic coaching programs are most effective needs further study (Fishman, 2013).

The researcher has identified four major stakeholder roles in academic coaching programs. Those stakeholder roles include the institution role, the faculty role, the student role, and the academic coach's role. Institutions are concerned about their numbers regarding student retention. One-way institutions can address this is by providing student support through programs such as academic coaching. The need to retain current students is essential as overall student enrollment declined by half a million students in fall 2020 compared to fall 2019 (Koenig, 2020). In the development of academic coaching programs, the faculty role includes faculty ability to recognize students at risk, provide faculty insight into the academic program development, and foster healthy relationships that promote effective communication among all stakeholders. The student role includes taking personal responsibility for their learning, their experiences and perceptions, their relationships and communication, and self-appraisal. Students must be accountable for their success but at the same time feel comfortable and be knowledgeable about the resources that are available to them. The academic coach's role includes relationships and communication, the development and implementation of coaching programs, and its evaluation. Academic coaches must listen appreciatively, provide applicable insight, continuously assess themselves, have clear goals, discern problems, and have the appropriate resources to solve them (Deiorio et al., 2016).

There is a need for further definition with the ongoing study into academic coaching programs in nursing education. There is a gap in the literature regarding the various components of academic coaching programs in nursing education. There is a need for understanding the level of effectiveness of these components across nursing programs. Understanding the effectiveness of academic coaching programs will provide evidence-based practices to guide future academic coaching programs.

## **Research Questions**

The purpose of this study was to explore what constitutes best practices for the creation and implementation of academic coaching programs in nursing education to promote student success. The research variable was what is best practice for creating and implementing academic coaching programs in nursing education. An author-created survey was derived from the literature for this study.

The following are the research questions addressed by the study.

What are the most widely implemented components of an academic coaching program in nursing education?

What components of academic coaching programs promote student success in nursing education?

## **Assumptions**

All participants met the inclusion criteria for this study and were willing to participate in the study. All participants answered all survey questions honestly and free from distractions.

## **Delimitations**

The study's scope was limited to Deans, Directors, and Program Chairs in nursing education across eleven Midwest states. The researcher intended to explore the most common components of academic coaching programs in nursing programs and those components that were most effective in promoting student success.

The researcher concedes that there could be multiple variations in the components of an academic coaching program that may not have been addressed in the survey tool. This study allowed for written responses to some questions.

## **Definition of Terms**

The following operational definitions were used in this research study:

### **Academic coaching program**

A formal program staffed by academic coaches who assist nursing students with developing the skills, strategies, and tools necessary to achieve success within the nursing curriculum's rigorous expectations. Academic coaching programs provide students with resources to refine their intrinsic skills to improve their ability to collaborate with others. Developing time management skills, developing intellectual and personal qualities, and exploring approaches to address academic challenges they may face (Rutgers School of Nursing, n.d.).

### **Nursing Programs**

Nursing programs are defined as any college or university which provides the following degrees: licensed practical nursing, an associate degree in nursing, a bachelor's degree in nursing, a master's degree in nursing, or a doctorate in nursing.

### **Midwest**

Midwest is defined as the following states: Nebraska, Iowa, Kansas, Missouri, South Dakota, North Dakota, Wyoming, Colorado, Minnesota, Illinois, and Wisconsin. These eleven states were utilized for the research.

## **Significance of the Study**

The need is evident for further definition and ongoing study by the nursing education profession into academic coaching programs. Insight into the most common components of academic coaching programs across nursing programs and understanding academic coaching programs' effectiveness will provide evidence-based practices to guide future academic coaching

programs. Equipped with scientific evidence, nursing programs can then use the data to create best-practice academic coaching programs to assist in student progression and academic success.

Implementation of academic coaching programs in nursing can positively affect student retention and success. Institutions are negatively affected by student attrition when students withdraw or are unsuccessful in programs of nursing. Implementation of academic coaching programs is a successful strategy for the retention of students in a nursing program. Strategies that focus on increasing the number of students whom complete nursing programs need to be the top priority. This study supports academic coaching as an appropriate nursing program strategy to assist students at risk for academic failure. This study suggests that implementing academic coaching program components with the highest level of effectiveness would be of the most significant benefit.

## **CHAPTER II: LITERATURE REVIEW**

A review of the literature was conducted related to the topic of academic coaching and student academic success. The databases used in the search included CINAHL (Cumulative Index to Nursing and Allied Health Literature), MEDLINE (Medical Literature Online) via PubMed, ERIC (Education Resources Information Center), Scopus, Embase, and Taylor and Francis Group online. Keywords used in the search included academic coaching, academic success, academic achievement, academic performance, student success, nursing education, nursing student, and mentoring.

Chapter two will discuss the historical context of academic coaching and the various definitions of academic coaching, as found in the literature. This chapter will discuss the benefits, barriers, and multiple components of academic coaching programs. It will review Watson's Theory of Human Caring and how it applies to academic coaching programs. The literature review will discuss the four key stakeholder roles identified by the researcher from within the literature and their involvement in the academic coaching process. These stakeholder roles include institutions, faculty, students, and academic coaches.

### **Definition of an academic coaching program**

Several variations were noted in the literature regarding the definition of academic coaching programs and academic coaches' role in colleges and universities (Broussard & White-Jefferson, 2018; Capstick, Harrell-Williams, Cockrum, & West, 2019; Robinson & Niemer, 2010; Scott, 2017). The terms academic coaching, mentoring, and tutoring appear to be used somewhat interchangeably in the literature. Coaching, mentoring, and tutoring programs in the academic setting are all focused on assisting students in successfully progressing through an academic program. According to the National Academic Advising Association (2017), academic coaching



is defined as a collaborative relationship between an individual acting as an academic coach and a student. This relationship focuses on the student's professional and personal goals by developing self-awareness by using academic planning and defining the students' purpose, interests, and values to complete a degree successfully.

For this research, academic coaching is defined as a formal program staffed by academic coaches who help nursing students develop the skills, strategies, and tools necessary to achieve success within the nursing curriculum's rigorous expectations. Academic coaching programs provide students with resources to refine their intrinsic skills to improve their ability to collaborate with others. The development of time management skills, intellectual and personal qualities, and exploring approaches to address academic challenges they may face (Rutgers School of Nursing, n.d.).

A difference between a mentor and a coach could be that mentors are typically experts in a specific area and pass their knowledge in a "one-way flow of information" (Hayes & Kalamakis, 2007, p. 557). Hayes & Kalamakis (2007) completed a review of the literature exploring coaching strategies to improve patient health outcomes and validate coaching benefits. Their literature review examines the success of coaching in psychology, sports, business, and nursing to assist people in achieving goals. Hayes & Kalamakis (2007) found that interpersonal communication skills were vitally important to facilitate client learning and growth and expand knowledge on coaching processes. They also concluded that consciously implementing coaching communication during encounters may result in measurable outcomes that demonstrate coaching effectiveness (Hayes & Kalamakis, 2017). Coaches do not need to be an expert in a field. Instead, they focus on encouraging, supporting, providing feedback, allowing for growth and

building on strengths, developing accountability, and obtaining goals (Hayes & Kalamakis, 2007).

As a result, coaching is not the same as tutoring or mentoring and should be delineated as a separate academic coaching resource to assist students. Although academic coaching, tutoring, and mentoring all focus on obtaining many of the same outcomes, they often have different objectives. For example, tutoring often focuses on academic instruction and content review, which is completed outside of the allotted classroom time. Tutoring typically focuses on giving a student extra assistance with certain materials on a specific subject (Bryer, 2012; Robinson & Niemer, 2010). Although academic coaching can also provide content review and academic instruction, it typically encompasses increasing student retention and academic success. This type of coaching can be accomplished by developing students' communication and time management skills, their intellectual and personal qualities, and exploring approaches that assist them with additional academic challenges they may be experiencing. Therefore, some aspects of tutoring programs can be incorporated into academic coaching programs, but academic coaching programs should encompass more than just tutoring.

Bryer (2012) reviewed the results from a pilot peer tutoring program of eleven associate degree nursing students who previously failed or withdrew from a nursing course before enrolling in the peer tutoring program. Student assessment was evaluated through peer tutoring sessions, scores on unit exams, and end-of-semester grades. Of the eleven participants, one withdrew six weeks into the semester, one was a clinical failure, and one failed the course with less than 75%, and eight were successful. Bryer (2012) found that peer tutoring can benefit returning nursing students and improve retention rates.

Robinson & Niemer (2010) describes the implementation and outcomes of a Peer-based Mentor Tutor Program (PMTP) for nursing students at risk academically. The PMTP involved 21 peer mentor-tutor groups with 97 at-risk students participating. Students were encouraged to meet weekly for tutoring and mentoring guidance for the entire semester using a collaborative team approach. The program's effectiveness was evaluated through the students' academic success and their grade attainments. Non-participants were divided into two groups: the control group, who qualified for the program but did not participate. The rest of the cohort did not qualify for participation. It was found that the mentees earned significantly higher test scores throughout the year in the program than the control group. The researchers found that the overall attrition rate in the course decreased from six to four percent. Robinson & Niemer (2010) found that a PMTP model can improve academic performance among nursing students when academic success and student attrition are a concern.

The limited amount of research specific to the effectiveness and standard practices of academic coaching is probably due to its newer development as a form of student support (Capstick et al., 2019). By reviewing archival data of 1,434 undergraduate students, Capstick et al. (2019) conducted repeated ANOVA measures to compare the effects of student's participation in academic coaching on their grade point averages. The results indicated that full and part-time students that participated in academic coaching had significantly higher grade point averages (Capstick et al., 2019). Capstick et al. (2019) stated that a consistent framework is needed to allow for cross-comparison programs. They suggested establishing a professional community regarding academic coaching to create best practices for future academic coaching programs (p. 228).

Additionally, there are varying approaches an institution can take in the development and implementation of an academic coaching program limiting the depth of the research available in any one particular context (Capstick, et al., 2019). As noted above, academic coaching programs can and should include aspects of tutoring and mentoring. Still, as a whole, these programs encompass much more than a typical coaching or mentoring program.

There is a vast variation in the literature on the definition of the role of an academic coach. Their capacity to assist faculty and work closely with students ranges widely. This study discussed how some academic coaches also grade papers, lead student discussion forums, proctor exams, provide study skills, time management instruction, give students feedback on their work, and facilitate course content instruction (Cox-Davenport, 2017). Cox-Davenport (2017) completed a descriptive analysis of 22 first-semester nursing students through an online survey addressing their perceptions of an early intervention academic coaching program. The five-week-long, five-minute check-ins coached students on time management, study skills, access to resources, stress management, upcoming assignments, course work, and grades. The researchers found that students who attended four to five of the weekly visits had higher first test scores and higher overall course grades. The majority of the students reported the check-ins beneficial (Cox-Davenport, 2017).

According to Corrigan-Magaldi, Colalillo, & Molloy (2014), ensuring student success is dependent on a combination of variables that assist learners in becoming confident students and critical thinkers. They provided 11 at-risk students who voluntarily enrolled in their remediation program with multiple learning strategies promoting student engagement, a supportive learning environment, and weekly follow-up with faculty members. They found that 91% of participants passed the course and graduated. Participants unanimously rated the program as very helpful.

Their strategies, involving early student engagement with course content, creating a supportive learning environment, and enforcing weekly follow-ups by students with their faculty coach, helped students' progression, retention, and NCLEX success (Corrigan-Magaldi et al., 2014).

## **Background**

Academic coaching has evolved as more positive findings regarding coaching experiences have been noted throughout the research. Academic coaching is not specific only to nursing programs as historically, and it has been used in multiple educational disciplines such as medical school, law schools, and allied health programs. Academic coaching programs can be available to all students. Only those students deemed at-risk based on specific criteria set forth by the organization can range from being mandatory to optional. The way academic coaching programs are developed and implemented in colleges and universities can vary vastly.

In addition to variations in the implementation of academic coaching programs, the idea that there may be a disconnect between faculty and student perceptions of the student's ability to succeed in a program can also be concerning (Freeman & Lazenby, 2012). Many factors can come into account when addressing the ability of a student to be successful. A variety of factors can be used to determine whether students are deemed at risk for failure. A few of the parameters could include overall course grade, failing score on one or more exams, failure to progress in any course, a grade of "C" or below on more than two assignments, and a perceived lack of student preparation (Hopkins, 2008).

The limited amount of research specific to academic coaching practices' effectiveness is probably due to its newer development as a form of student support (Capstick, Harrell-Williams, Cockrum, & West, 2019). Additionally, there are varying approaches an organization can take in

the development and implementation of an academic coaching program limiting the depth of the research available in any one context (Capstick, et al., 2019).

There is a vast variation in the literature on the definition of the role of an academic coach. Their capacity to assist faculty and work closely with students ranges widely. Some organizations use academic coaches to grade papers, lead student discussion forums, proctor exams, provide feedback to students, and facilitate course content instruction in its entirety or any given combination (Cox-Davenport, 2017).

To provide academic coaching programs, some organizations use third-party vendors. According to Broussard and White-Jefferson (2018), with ongoing challenges of hiring enough qualified nursing faculty, academic coaching programs whose coaches are hired through third-party vendors to have provided them with an avenue to meet the needs of their students. The majority of nursing programs noted in the research used their faculty as designated coaches. In these instances, the program can be designed various ways. For example, faculty may be automatically assigned a coaching role or only those who volunteer to serve in that role.

The research noted other organizations that utilize student peers as academic coaches. There are overall positive academic outcomes for students and students acting as peer coaches (Bryer, 2012; Latino & Unite, 2012). Their peer program's purpose was to increase nursing students' retention and academic performance (Breyer, 2012). Through peer education, academic support can bring forth experiences and perceptions on various campus resources and offer students the most current information coming directly for a peer within itself can prove beneficial (Latino & Unite, 2012). Peers can often be less intimidating than professors, and students are often much more open and willing to talk about concerns with a peer than with a faculty member.

Warner, Neater, Clark, & Lee (2018) provided their students academic coaching support at a lower cost than using a third-party vendor by hiring students from within the university to serve as peer academic coaches. Their study found that peer coaches viewed themselves as facilitators of change who cultivated basic motivation levels through their ability to formulate meaningful relationships with those they coached (Warner et al., 2018). The development of a solid coaching framework with a delivery method tailored to the services needed by the student it served was crucial in its success.

The literature review shows that there is little consistency across higher education regarding academic coaching programs. There is a gap in the literature regarding consistency across campuses in developing and implementing academic coaches in nursing programs to promote student success.

### **Benefits**

The concept of academic coaching as an educational tool that improves students' academic performance is well known. How one measures a student's academic performance can be debated in various ways. If the focus is on testing and performance, one could define success in terms of the students' performance on examinations and the clinical or simulation setting (Corrigan-Magaldi et al., 2014). Psychological factors, looking beyond intellectual ability, may define success as the students' satisfaction with their learning experiences, students' personal development, and goals (Cachia, Lynam, & Stock, 2018).

A more holistic view of academic success would address the qualitative aspects of a student's abilities to achieve set goals, a students' satisfaction with the higher learning experience, feeling comfortable and included in the learning environments, and personal development and growth (Burger & Naude, 2019). Student success is a complex myriad of factors in which measuring

student success is difficult—broadening academic success measures to encompass qualitative and quantitative measures to truly understand the impact of academic coaching on students' academic success.

In reviewing the literature, much of the focus was on remediation strategies that use multiple interventions, including teaching study skills, stress management techniques, practice examinations, advising, peer mentoring, and goal development (Corrigan-Magaldi et al., 2014; Cox-Davenport, 2017; Pitt, Powis, Levett-Jones, & Hunter, 2012; Schlairet & Rubenstein, 2019). The literature described how an academic coaching program decreases student attrition and supports students throughout their education (Bryer, 2012; Cox-Davenport, 2017; Deiorio, Carney, Kahl, Bonura, & Juve, 2016). Capstick et al. (2019) consider implementing academic coaching in the first semester of college enrollments as a preventative measure. Rather than implementing reactive measures after a student receives a low-grade point average or has already failed a course or exam. Being reactive to the poor outcome after the fact can prove too late for students to recover. In conclusion, there was an agreement amongst the literature that academic coaching assists in student retention, but those academic coaching strategies that are most effective need further study.

## **Barriers**

Student retention needs are a well-documented issue in nursing programs. The need to maintain student enrollment and retain students in the program is an area of focus for any institution.

Nursing programs that wish to implement academic coaching programs can provide data to their administration to be considered for approval in creating new roles in their department and allowing for academic coaches' hiring. Faculty can also apply for grants which focus on the



improvement of student retention and success. These grants could be used to fund the creation of such a program. Again, this can be a barrier as applying for grants is time-consuming, very competitive, and funding may not be granted.

The creation of academic coaching programs such as the one developed by Connelly et al. (2019) utilized a grant to form an academic coaching program and provide financial support to students to promote student success in their BSN program. The grant's utilization provided academic coaching services and scholarships to students who engaged in the program. They found that of the students enrolled in the program, twenty-four of the twenty-seven were successful.

Nursing faculty shortages are a well-known issue plaguing nursing programs. With a lack of qualified faculty to meet students' needs, some programs cannot expand and grow to address the nursing workforce shortage plaguing our nation. To properly prepare the next generation of nurses and use every available spot in nursing programs efficiently, there is a need to promote each current student's successful completion and promotion through their program. Finding qualified applicants to staff an academic coaching program can prove challenging. Broussard and White-Jefferson (2018) developed an academic coaching program for their program by securing academic coaches through a third-party vendor who maintained all their academic coaches' hiring and employment. In this model, the coach's resume was sent to the registered nursing program coordinator for vetting and approval before beginning working with the program's students. This model proved especially helpful because using a third-party vendor diminished the staff's strain for an academic coaching program in the nursing department.

Bettinger and Baker (2013) examined 17 institutions' academic coaching programs, all of which used the third-party vendor Inside Track to provide their students with coaching services.

Students were randomly selected as to whether they would receive coaching services or not through the study. Bettinger and Baker (2013) found that the “retention rates and completion rates were greater in the coached group, which held steady for the length of time following enrollment” (p.2). Another important finding to note was the phenomena in which the researcher found that most of the coach’s conversations focused on life issues outside of school-related topics. Many of them created a school-life balance and their other responsibilities such as work and dependent children and family members.

### **Issues in diversity and academic coaching models**

The need to improve the nursing workforce’s diversity is well known and has been a profession’s goal for many years. Attrition rates for minority nursing students are much higher than that of traditional nursing students. The same strategies for academic success through coaching may not work as effectively in minority students. Culturally specific interventions may need to be developed based on the student’s unique needs (Connelly et al., 2019; Schoofs, 2012). The basis of Connelly’s (2019) research was that racially diverse and educationally disadvantaged students could be more successful in their program of study if they received financial support and academic coaching services.

According to Denham et al. (2018), diverse students may cluster with other students who speak their native languages and be hesitant to interact with others in their courses constructively. Lack of integration can negatively impact students’ growth as they will lack knowledge gained from meaningful interactive learning assignments. Providing culturally diverse students with the necessary strategies to promote social interaction and inclusivity with other students will help their academic success (Denham et al., 2018). Not only is this true for interaction amongst students but also interaction among faculty. In instances where

communication is hindered between diverse students and faculty, the development of students' clinical skills and academic success can be impeded (Denham et al., 2018). The creation of academic coaching programs that also address the cultural needs of students should be explored.

McLain et al. (2017) designed and implemented an academic coaching program to increase the number of bachelor's prepared registered nurses from diverse backgrounds in their region. The academic coaching program was designed to provide academic preparation, cultural enrichment, and social and financial support to increase students' academic success, as evidenced by their completion of the program and successful passing on the National Council Licensure Examination for Registered Nurses (McLain et al., 2017). A total of 23 students completed the Student Success Survey. Seventy-eight percent of participants were female; the ages ranged from 19 to 24 years old. Fifty-six percent of the students were African American, 26% were white, 23% Hispanic, and 4% Asian. The survey results were subjected to rigorous analysis using a factor analytic approach to each of the ten sections of the self-assessment. Using the self-assessment tool, faculty advisors determined their culturally diverse students' individualized academic needs to promote student success.

Study findings suggested that the survey tool was a viable resource for assessing students at risk for academic failure. There is a need to explore this tool in other programs as a resource for all students—the survey tool allowed faculty to recognize students at risk early and provide them resources as necessary. The survey tool also indicated if the student had academic deficits in reading, writing, critical thinking, and personal life issues that may interfere with their success.

### **Theoretical Context**

Jean Watson developed the Theory of Human Caring in 1979. The original ten Caritas processes are (a) formation of a humanistic-altruistic system of values; (b) installation of faith-

hope; (c) cultivation of sensitivity to one's self and others; (d) development of a helping-trusting, human caring relationship; (e) promotion and acceptance of the expression of positive and negative feelings; (f) systematic use of a creative problem-solving, caring process; (g) promotion of transpersonal teaching-learning; (h) provision for a supportive, protective, and corrective mental, physical, societal, and spiritual environment; (i) assistance with the gratification of human needs; and (j) allowance for existential-phenomenological-spiritual forces (Watson, 2005). According to Watson (2005), the original theory has since evolved into the term Caritas processes, the caring moment, and the transpersonal caring relationship, which are considered critical components of the theory.

Caring is a fundamental element in the education and development of a student into a nurse's role. Caring supports positive human interaction. It is a behavior that supports and promotes the universal belief that caring is essential for nursing students to meet their clients' needs.

According to Watson (1979), "mentoring nursing students and new nurses is the real form of caring, providing for experienced nurses to support and to nurture the next generation of nurses" (p. 51). Academic coaching is utilized as a support method that effectively promotes nursing students' progression through a nursing program.

A study by ten Hoeve, Castelein, Jansen, & Roodbol (2017) found that one of the main reasons students want to become nurses was the caring aspect and past personal experiences with healthcare, role models, and job opportunities. Providing a caring and nurturing environment for students enrolled in nursing programs will hopefully make a lasting impression. They will later model that example in the classroom with their behavior in the clinical setting and again once they are in the nursing workforce setting.

Black (2017) approached the question as to whether students who participated in a Student Nurse Achievement Program (SNAP) have a lower attrition rate than those who did not participate. The project results built on existing strategies found in the research that are known to decrease nursing schools' attrition rates. The study's framework was guided by Watson's Theory of Human Caring and relationship ontology, applying the framework's relevance as providing intentional, authentic presence and caring moments. This is especially important for meaningful teaching-learning experiences, building trust, and creating healing environments that correlate with the project's goals. Watson's Theory of Human Caring is significant in its capacity to provide enrichment of faculty-student relationships and support a healthy learning environment.

#### **Four Major Stakeholders**

This study will discuss the four major stakeholder roles in academic coaching programs identified by the researcher from within the literature. Of those stakeholder roles, there are key components specific to each role. The following sections will elaborate on each of the four stakeholder roles noted within the literature, including institutional roles, faculty roles, student roles, and the academic coach's role. The various stakeholders have common goals that include graduating competent nurse generalists while maintaining student satisfaction and being a lucrative institution (Bakker et al., 2019, Hopkins, 2008, White-Jefferson, Broussard, & Fox-McCloy, 2020).

#### **Institutional Roles**

Institutions focus on creating an environment that prepares students for career and life successes. Institutions must embrace a culture that cultivates the goals and dreams of all the major stakeholders. Institutions must ensure they make financially responsible decisions that help them remain competitive among other institutions while enticing students to attend their

facility over another. Institutions must manage student needs while maintaining engagement and providing high-quality education. To do this effectively, they must explore ways that best support student needs (White-Jefferson, Broussard, & Fox-McCloy, 2020)

### **Retention**

Across higher education, the need for academic coaching programs has grown exponentially. The demand for student retention, degree completion, and student support has risen to the forefront of institutional concerns (Capstick et al., 2019; Hopkins, 2008). A student's decision to withdrawal from a program can result in loss of revenue for an institution and adversely impact nursing program accreditation (Freeman & All, 2017). Accrediting bodies view institutions' retention and attrition rates, and potential students often seek out data concerning success rates for previous students in completing the program when looking at prospective institutions (Freeman & All, 2017). The Higher Learning Commission (n.d.) assumed practices policy states that institutions must assure that all data are made public, are accurate, and complete, including those reporting on student achievement of learning and students persistence, retention, and completion.

A review of the literature by Freeman & All (2017) evaluated and discussed the various types of academic support programs used for at-risk nursing students to identify those that are most effective. The review of the literature included 13 articles spanning from 1990 to 2015. The study found that replacing a student lost to an academic failure is difficult. Prevention of student failures and withdrawal is a priority concern and should be addressed by all institutions. Although utilized in different manners, academic coaching programs are an effective retention strategy (Freeman & All, 2017).

Withdrawal from the program by a student makes for one less graduating nurse by that program that could have been filled by another student who may have completed the program. Lower enrollment numbers cause a loss of funding for the institution and affect the number of qualified nursing applicants in the nursing workforce (Bakker et al., 2019). It is exponentially important that institutions seek to admit students who are the most likely to be successful in reaching their program outcomes (Hadenfeldt, 2012). It is also exponentially crucial that students admitted to the institution are provided with the necessary tools to be successful. The Higher Learning Commission Policy (n.d) included accreditation criteria, which states institutions must provide learning support and preparatory instruction to address their students' academic needs.

Bakker (2019) explored nursing students' experiences and reasons for a late dropout in their nursing program through an exploratory qualitative study using in-depth face-to-face interviews. Eleven former nursing students who voluntarily dropped out in their third year of a bachelor of science in the nursing program were interviewed. The study found that there were two distinct groups: one, students who felt that the training and future profession did not match their expectations, and the second, who found the training and clinical placements too challenging and ended up in a downward spiral of problems ultimately leading to their dropping out (Bakker, 2019). Those in the latter group consistently felt that they were losing their grip on the learning process. A lack of support from the program's organization had character traits that impeded the learning process. Increased physical, psychological, and social problems contributed to their late drop out in the nursing program (Bakker, 2019). Limitations of the study include difficulty generalizing the findings to diverse populations of nursing students. Their sample included no more than one male, only one interviewee over the age of 23, and no participants with a migrant background.

Bakker (2019) suggests that to increase nursing student retention, offering academic coaching and including psychological support as necessary will help prevent student attrition. The researcher addresses the need for further research to develop and evaluate programs that provide student support and coaching.

Establishing strict guidelines for admission that require good reading, writing, comprehension, math skills, and a high level of achievement in biological and behavior science courses are essential criteria to admit students with the highest potential of success (Dante, Valoppi, Saiani, & Palese, 2011; Hadenfeldt, 2011; Hopkins, 2008; Jeffreys, 2004; Lancia, Petrucci, Giorgi, Dante, & Cifone, 2013). By admitting a student who has previously achieved superior scholastic aptitudes as evidenced by high-grade point averages, high final grades, and high scores on standardized admission tests, the literature link these with a greater likelihood of academic success (Dante et al., 2011; Hadenfeldt, 2011).

Academic coaching programs can encompass many aspects of the criteria discussed above, with the primary focus being on student retention and success (Bryer, 2012; Capstick et al., 2019; Corrigan-Magaldi et al., 2014; Freeman & All, 2017; Robinson & Niemer, 2020). It is essential to admit the students with the highest potential and provide all students with resources and tools found in the literature to promote student success. Capstick et al. (2019) call for further research to broaden the understanding of the most effective elements of academic coaching programs. Capstick et al.'s (2019) findings showed positive results in providing on-campus academic coaching to further support student academic potential and retention.

### **Resources**

Potential obstacles that prevent nursing programs from the implementation of academic coaching programs need exploring. Lack of funding, scheduling conflicts, the time commitment



required, inadequate numbers of faculty to implement academic coaching programs, and the issue of whether to make the program mandatory or voluntary may plague organizations working to create and maintain academic coaching programs (Capstick et al., 2019; Freeman & All, 2017).

The financial strain of implementing an academic coaching program may be a barrier for some nursing programs in the creation and implementation of such programs. One can assume that creating an academic coaching program would require a considerable amount of time and resources. Capstick et al. (2019) utilized graduate assistantships as their academic coaches to save costs when compared to hiring full-time employees, which would mean higher salaries and benefit costs. The graduate assistants employed for the academic coaching program sought degrees in counseling, higher education, and similar professionals explicitly trained in academic coaching by the program supervisor before beginning the role (Capstick et al., 2019).

Connelly et al. (2019) utilized a grant to fund the development, implementation, and evaluation of a Generation Link to Learn program that used an academic coach combined with financial assistance as an effective strategy to assist educationally disadvantaged students.

### **Faculty Roles**

The second stakeholder role to be addressed is the faculty role. Faculty roles include developing an academic coaching program, recognizing students at risk, and the relationships and communication role they have with students in the academic coaching program.

#### **Program development**

For faculty to best assist in developing academic coaching programs for their organization, they need to be up to date on current practice models and well versed in the recent research. Reynolds (2019) introduced 12 tips for developing academic coaching skills, which he created

by drawing upon relevant literature about academic coaching across many disciplines. The 12 tips promote lifelong learning habits in the context of one-on-one coaching encounters and encompassing some aspects of the broader learning and teaching environment. Reynolds (2019) discussed the shift towards competency-based education for medical school students and the need to find a balance encompassing coaching for improved academic performance, primarily due to the implication of high stakes standardized testing. According to Reynolds (2019), to successfully execute such a program, all those involved must closely collaborate.

Faculty are an integral part of the development and implementation of these types of programs in their curriculum. Faculty must be on board with the development from the beginning and share their ideas as stakeholders in nursing programs' successful student progression. According to the Higher Learning Commission Policy Criteria for Accreditation, institutions must promote and support collaborative processes with administration, faculty, staff, and students that enable the institution to fulfill its mission. Using evidence-based practices in the development and maintenance of such programs will help faculty ensure they provide the best resources for promoting student success. All faculty should receive continuing education deemed from evidenced-based research about the importance of faculty support to implementing academic coaching programs and student success (Hadenfeldt, 2012). According to White-Jefferson, Broussard, & Fox-McCloy, 2020 overall expectations need to be addressed by both the faculty and the academic coaching to establish best practices as it is foundational in the utilization evaluation of the role of the academic coach.

### **Recognition of students at risk**

Various factors determine whether a student may be at risk for academic failure or attrition. Recognizing students who are at risk for academic failure early is vital in ensuring their success.

Actively assessing students at risk and enrolling them in an academic coaching program will promote student success and retention.

Elder, Jacobs, & Fast (2015) developed a comprehensive evaluation model that has been crucial in identifying students at risk for failure. Their sample included 183 of 240 potential BSN students, 83 determined as at-risk by the evaluation model. Indicators for students at risk that are addressed by the tool include prerequisite course grades, beginning nursing course grades, standardized testing scores, and a student self-assessment. The model uses an evidence-based approach to determine which factors are essential in student success (Elder et al., 2015). Once students were recognized as at risk, they were sent a letter encouraging them to meet with an At-Risk Task Force instructor. An individual evaluation was completed to identify methods to improve their performance. Some topics include study skills, technology needs, time management, test-taking strategies, clinical decision-making skills. The program evaluation occurred by comparing students deemed at-risk to non-at-risk using a Motivated-Strategies for Learning Questionnaire, course grades, NCLEX-RN outcomes, and the program's completion. At-risk students rated their nursing courses' performance higher in every area than the non-at-risk group and significantly higher for self-efficacy and metacognition. The graduation rate was 100 percent. Through their development and evaluation of the case management model, they provided an assessment for those at-risk, provided support seminars, and cognitive activities to help students improve their performance and be successful in their nursing program progression (Elder et al., 2015).

It is vital to create evidence-based models using factors found in the literature to standardize admission criteria, as well as assess and diagnose students at risk, including pre-requisite grades, science grades, standardized testing, and early nursing class grades (Elder et al., 2015; Hopkins,

2008; Warner et al., 2018). Hopkins (2008) used a logistic regression model looking at retrospective data from prior students to explain the cognitive and non-cognitive variables that contribute to success in first-semester nursing students in a fundamentals course. A total of 383 associate degrees in nursing students participated in the study. The researcher examined how students would complete the fundamentals course based on 19 predictor variables such as SAT, ACT, and grade point average. The analysis used simple correlation in Statistical Product and Service Solution (SPSS) software. The study's predictive validity was 82.5%, as measured by the percentage of students who were correctly identified as successful or not successful in completing the Fundamentals course (Hopkins, 2008).

This model provides for early identification of students who are at risk for failure in the course. According to Hopkins (2008), after identifying students at risk, the student's referral to resources and academic support systems should occur. The researcher addresses the need for further study into student retention. The low variance was accounted for in predicting student success with this model, and other possible variables may not have been identified in this study (Hopkins, 2008).

Jeffreys (2004) assessed the retention and progression of 112 associate degree in nursing prospective students in a retrospective evaluation study. The study identified several important trends and statistically significant correlations that may influence nursing students' successful progression in a program (Jeffreys, 2008). Jeffreys (2008) recommends that individualized assessment followed by individualized teaching and support interventions tailored to the students' needs will most benefit students recognized as being at risk.

## **Relationships and communication**

Fostering healthy relationships between students and faculty early on is essential to promote student engagement in the academic environment and encourages students to take the initiative and reach out for help when needed. Faculty can support their relationship with students by learning students' names, providing positive classroom and clinical environments, providing timely feedback and grading, and directing students to resources as applicable (Hadenfeldt, 2012). Fostering relationships with students by communicating a willingness to assist them and being available and willing to answer their questions and meet with them outside of the classroom improves students' help-seeking behaviors (Fishman, 2013).

Hadenfeldt (2012) completed a retrospective study on 384 student records to determine an intervention plan's success at risk for failure compared to outcomes from years without the intervention plan. The intervention plan was used to identify students at risk based on criteria around not meeting course objectives and recommending resources to assist students. Interventions implemented included tutoring, advising, and using technology. Students were required to write a brief action plan about what they perceived needed to change regarding their academic work, behavior, or attendance (Hadenfeldt, 2012). The study found that replication with data collection on the instructor's actual usage of recommended resources and the students' perceptions of faculty support would help determine whether the interaction was beneficial or not (Hadenfeldt, 2012). The study suggests that student success policies should be created with mandatory tutoring, and academic advisement should be enforced for students deemed at risk for failure (Hadenfeldt, 2012).

Student-faculty relationships are essential to cultivate early in the program to ensure students feel comfortable reaching out for assistance. Ensuring these relationships are open for

communication, faculty can provide students with the guidance and resources needed to succeed. Faculty should recognize students at risk, likely through utilizing an evidence-based tool found in the literature and implemented by their institution and refer them on for further assistance.

### **Student Roles**

The third stakeholder role to be discussed is the role of the student in the academic coaching program. Students must take responsibility for their success in a nursing program. The following sections will address various concepts around the student's role in their success in an academic coaching program to promote student success.

#### **Responsibility**

Students may not fully comprehend how academically challenging the nursing curriculum can be. Undergraduate nursing students are faced with overwhelming amounts of information in short periods (Connelly et al., 2019). College students often approach tasks haphazardly and can become easily overwhelmed with large amounts of data to learn (Cascoe, Stanley, Stennett, & Allen, 2017). Gaps in a student's reading comprehension, note-taking skills, critical thinking, and time management can harm a student's ability to succeed (Freeman & All, 2017). Students admitted to nursing programs are often accustomed to being academically successful and can experience loss of confidence and disorientation when they suddenly experience lower than average grades (Freeman & Lazendy, 2012). Hopkins (2008) noted that these students typically do not reach out for academic assistance until they are too late to recover. Waiting to seek assistance is often related to feelings of embarrassment and shame (Jeffreys, 2007).

Cachia et al. (2018) completed a qualitative study with 16 graduate psychology students using inductive thematic analysis of the data transcripts addressing the question "How do University students define academic success?" The study found three main commonalities, with one of them

being that “students are aware of their responsibility to take charge of their independent learning but also acknowledge the need for support to develop the required skills” (Cachia et al., 2018). The study recommends that institutions incorporate personal skill development, including communication, self-presentation, organization, time management, and stress management opportunities to identify and deal with challenging situations, all as student support methods (Cachia et al., 2018).

Academic coaches provide resources to nursing students that help them develop skills, strategies, and tools necessary to achieve success within the nursing curriculum’s rigorous expectations. Academic coaching programs provide students with resources to refine their intrinsic skills to improve their ability to collaborate with others. Developing time management skills, intellectual and personal qualities, and exploring approaches to address academic challenges they may face (Rutgers School of Nursing, n.d.)

Students should be accountable for their success but feel comfortable and be knowledgeable about the resources that are available to them. Institutions should have programs to guide faculty on how to provide students with resources available and assist in the early recognition of students at risk through assessments. It is a dual responsibility and a unique relationship that faculty and students possess that can be quite positive if both parties take responsibility in their roles. According to Reynolds (2019), utilizing self-assessment tools helps learners discover their learning approaches, informing personal learning goals. Studying resources and strategies will work best for them.

### **Experiences and perceptions**

Students can have negative perceptions about the use of academic coaching. They may believe it means they are not as likely to be successful or struggle to maintain their grades if they

work with an academic coach. Any negative stigma from working with an academic coach can be reduced if all students receive academic coaching (Freeman & All, 2017). This idea is essential to explore through future research.

Brown-O'Hara (2013) completed a descriptive comparative correlational study that addressed students' perceptions of the coaching relationship after participating in mandatory academic coaching and found that they reported a positive perception of the coaching relationship.

Allowing students to evaluate their experiences with academic coaching can help coaches and faculty make adjustments to programs and meet their students' needs. Providing the students with a way to assess the program's effectiveness while working with an academic coaching program may be most effective, which will be important to explore through future research.

### **Relationships and communication**

The student's role in communication is essential. Proper communication will provide the means for sharing information amongst all four stakeholders. Critical features for an academic coaching program's success must include clear expectations for the student coaching relationships with trust, clear boundaries, credibility, expectations, engagement, and interdependence between the learner and the coach (Deiorio et al., 2016). An exploratory mixed-methods study by Fishman (2013) with 20 face-to-face interviews and 112 online surveys explored the student nurses' perceptions and significance of mentoring experiences. The study found that students perceived the program as beneficial and useful and that the coaching and encouragement from a professional positively impacted the program outcomes and retention of students.

When a student is an English as a second language learner, the literature suggested this can prove even more detrimental to the student's success. According to Kelton (2014), a culturally



diverse student's number one reason for referral to an academic coaching program was communication issues. Kelton's (2014) study included data from 188 students collected over nine semesters on at-risk students, including outcomes achieved and coaching strategies used to support nursing students. The study found that high numbers of students involved in coaching sessions completed the program. The study was limited to only nine semesters of data and recommended longitudinal research and evaluation of qualitative data to provide a more effective way to gather further evidence of the coaching strategies and practices that may impact a coach's effectiveness (Kelton, 2014).

Denham et al. (2018) completed a mixed-methods study on English as a Second Language (ESL) student's perceptions of academic success, exploring the relationship between language use and classroom or clinical interactions, associated social interactions perceived academic success. The study found several factors that influenced student success, including students' comfort communicating, English speaking level, speech used in the school setting, students' prior degree, and students' educational level (Denham et al., 2018). Denham et al. (2018) found that English as a second language nursing students self-reported academic success more positively when they felt they communicated adequately. English as a second language students who perceived themselves as poor English speakers were intimidated by faculty and had lower levels of self-confidence and negative perceptions about their ability to be successful (Denham et al., 2018).

Developing and maintaining avenues for healthy communication is vital for the development of relationships that promote student success. Having clear communication expectations in place is critical for the success of an academic coaching program. Students need to feel they can trust and be comfortable when reaching out to promote their success in a program.

## **Self-evaluation**

Academic coaching programs could be considered individualized learning plans or instruction tailored to a student's specific needs. Students should be involved in the development and implementation of interventions specific to their needs. Students should prioritize goals and evaluate their ability to reach those goals throughout their nursing program. Cachia et al. (2018) recommend providing opportunities for enhanced self-awareness, identifying specific learning styles, creating plans, and dealing with challenging situations as they arise, all as ways to foster academic success and student support.

Elder et al. (2015) recommends creating personalized methods for student self-evaluation, which provides students with the knowledge and understanding needed to improve their areas of weakness.

Knowlton (2017) completed a descriptive pilot study to explore student stressors and the impact of monthly coaching sessions on six fourth-year nursing students. Eight monthly coaching sessions were held, some of which covered topics such as self-care, stress management, and empowerment, and the others were dictated by the students' request as the need arose. Content analysis was completed, and critical stressors were academic workload, professional awareness, role, transition, time management, and other obligations outside of school (Knowlton, 2017). Participants found the coaching sessions beneficial, and the researcher recommends educators be cognizant of the student experiences (Knowlton, 2017). Providing self-evaluation to students to complete regarding their needs will allow for increased transparency in the students' needs amongst all stakeholders.

## **Academic Coach Role**

The final stakeholder role to be addressed is the academic coach's role. Academic coaches have various roles in developing, maintaining the program, and evaluating the programs' success. The following sections will address those concepts around the academic coach's role.

### **Relationships and communication**

Deiorio et al. (2016), identifies four steps for clarifying the coaching relationship and process. First, these include establishing the relationships' principles by setting goals and parameters during the initial meetings. Second, conducting a personal and systemic assessment to encourage self-monitoring and setting of goals. Third, developing and implementing an action plan, including goal setting, actions to attain the goals, and reflection on what is or is not working. Fourth, assess the action plan results and revise as necessary (Deiorio et al. 2016). Coaches must be able to listen appreciatively, provide applicable insight, be continuously assessing themselves, have clear goals, and discern problems and the appropriate resources needed to solve them (Deiorio et al., 2016).

Early intervention and consistency are essential for the success of the student coach relationship. The academic coach can introduce the student to test-taking strategies, time management skills, and study aids to improve students' confidence and provide them with resources for success (Freeman & All, 2017).

The academic coaches need to have a relationship with students, but their relationship with faculty is essential to provide consistency in the coaching provided. Broussard and White-Jefferson (2018) provide a descriptive review of their experience using a third-party vendor to provide academic coaching to promote student success in an online program. The study found that one challenge noted with their model was consistency in grading. Rubrics were developed

and used to evaluate student work. The rubrics were revised annually by the coaches and faculty as needed.

Faculty should act as a bridge between the relationship of coaches and students. They can help foster the relationship and support the process but should not interfere and cause confusion on the role of the academic coach (Broussard & White-Jefferson, 2018). Broussard and Jefferson (2018) found that obtaining ongoing systematic feedback from all parties involved in their academic coaching model was key in maintaining program success.

### **Development and implementation of programs**

The first step in creating an academic coaching program is to systematically review the nursing program's current situation, including student profile and characteristics, retention rates, attrition, graduation rates, and successful completion of licensure rates (Jeffreys, 2004). It is essential to establish criteria used to classify students, systematically assessing the risk for academic failure. A specific policy can be unique to each program, focusing on early identification to best serve the students deemed at risk (Freeman & All, 2017).

In a review of the literature by Freeman & All, (2017), the researchers created a list of the five best-case scenarios for the development, implementation, and sustainability of an academic coaching program, including evaluation and interventions at several levels. First, students taking lower-level coursework need more opportunities and support with developing critical thinking skills. Second, academic coaching programs could serve as a bridge between the lower-level and upper-level courses. Third, determinants for who is at risk for academic failure should be grounded on a uniform policy defined by the nursing school so each faculty member can work in collaboration with the academic coach. Fourth, there must be academic coaching components incorporated into each course to provide regular contact between the coach and the students, not

just those at risk. Fifth, participation in the program must be mandatory as students are not suited to make this choice for themselves (Freeman & All, 2017)

A successful academic program includes not only the assessment of competency level and performance but strategies that are purposefully designed to instill confidence, develop a deeper understanding, and increase the student's ability to demonstrate the core elements of practice and apply them in practice (Jeffreys, 2004; Kelton, 2014). Having clear expectations on when to implement such a program, what types of resources it will include, and how to assist students in creating goals and obtaining them are all areas that need to be made by the stakeholders closest to the students.

Academic coaching programs should allow students to use more or fewer resources as deemed appropriate by the various stakeholders. They are thus providing the student resources tailored to their specific needs. This will prevent the student from feeling like being involved in the program is too cumbersome or time-consuming and will keep their interest in engaging. Students who are found to require further support or wish to have more extensive coaching could receive more in-depth, one-on-one, or small group meetings. They may provide a more comprehensive focus on time management techniques, communication skills, study skills, or various things to help the student succeed. Consideration must be considered for the student and faculty availability, faculty commitment, student willingness to participate, and substantial funding required to maintain such a program (Freeman & All, 2017).

### **Evaluation of programs**

There is a wide variety of ways to develop and implement academic coaching programs. It is essential to recognize the need to establish a consistent framework to allow for cross-comparisons of programs (Capstick et al., 2019). The idea that developing a professional

community or organizational association specific to academic coaching whose focus could be on creating best practices and ethical considerations would be beneficial for students' future success at academic risk (Capstick et al., 2019). Hadenfeldt 2012, recommended replication of his study with evaluation of the intervention in other programs of nursing with data collection on the usage of resources and student perceptions of support to determine whether the student perceived interactions as beneficial to their success or not.

Robinson & Niemer (2010) described the implementation and outcomes of a peer-based mentor program for at-risk students compiling data from 97 participants measuring students' academic success effectiveness. Robinson & Niemer (2010) recommend that further research derived from the program tracking students' success rates and exploring qualitative aspects of the relationships will evaluate programs to promote student success.

### **Summary**

The four stakeholder roles, institutions, faculty, students, and academic coaches, need to invest in developing programs to help students succeed through their nursing program. Institutions are negatively affected by student attrition when students withdraw from programs of nursing. Strategies that focus on increasing the number of students whom complete nursing programs need to be the top priority. Students are required to put in a lot of effort and time into making it into a nursing program, and faculty and academic coaches need to provide them with the tools they need to be most successful. The literature supports academic coaching as an appropriate supportive strategy for nursing programs to assist students at risk for academic failure (Corrigan-Magaldi et al., 2014; Cox-Davenport, 2017; Pitt, Powis, Levett-Jones, & Hunter, 2012; Schlairet & Rubenstein, 2019). Academic coaching is a successful strategy for the retention of students in a nursing program.

Academic coaching programs can look different from one institution to the next. There is a need for further definition with an ongoing study into academic coaching programs by the nursing profession. There is a gap in the literature regarding understanding if there is consistency in academic coaching programs' components across nursing programs. Understanding the similarities and differences in academic coaching programs across nursing programs today is a noted literature gap. Understanding the effectiveness of academic coaching programs will provide evidence-based practices to guide future academic coaching programs. Without programs in place, such as an academic coaching program, students are more likely to be unsuccessful in a program of study.

## **CHAPTER III: METHODS AND PROCEDURES**

This chapter presents the methods and procedures that were used in this study. The sample size, data collection procedures, author-created survey tool, and the statistical tests used to analyze the data are discussed in this chapter. The purpose of this descriptive study was to explore what constitutes best practices for the creation and implementation of academic coaching programs in nursing education programs across the Midwest, to promote student success. Nursing programs Deans, Directors, and Program Chairs across the Midwest were invited to complete the author-created survey.

### **Research Design**

A descriptive survey design was chosen because it supports the research question. The nonexperimental design provided the researcher with descriptions of the relationships between and among the survey tool variables. This design provided the researcher with narratives surrounding the various components utilized in academic coaching programs in the Midwest and their effectiveness as ranked by the participants.

### **Population and Sample**

Purposive sampling included Deans, Directors, and Program Chairs of nursing programs in eleven Midwest States. The nursing program sample included licensed practical nursing, associate degree, undergraduate, and graduate degree programs.

There were 284 possible nursing programs within the eleven-state region. An invitation to participate was emailed to each nursing program, addressed to the Dean, Director, or Program Chair of their nursing program. The first round of invitations were sent to a total of 180 possible participants in eight midwestern states. After sending reminders to all potential participants every three days for the three-week time limit, the researcher determined that the number of completed



surveys was insufficient for analysis. A second round of invitations to participate were sent to an additional 104 possible participants. These participants were within three other Midwestern states and followed the same procedures as the first round. After completing both rounds, the researcher obtained 76 respondents to the request; of those, 36 had current academic coaching programs and completed the survey in its entirety.

Inclusion criteria included: (1) the organization had an academic coaching program specific to nursing education, (2) participant completing the survey were acting in the role of nursing program Dean, Director, or Program Chair, (3) participant completing the survey have a self-reported routine working knowledge of the organizations academic coaching program.

Exclusion criteria included: (1) Deans, Directors, Program Chairs not directly involved with the nursing program, (2) nursing faculty were excluded from this study. Although participants self-reported the length of time they have acted in their current roles, a minimum length of time was not required.

### **Demographics**

The anticipated age range of the individuals responding to the survey was 30 years of age and over. Generally, Deans, Director, or Program Chairs of nursing programs have a terminal degree and a few years of experience before obtaining their positions. According to the National League for Nursing Nurse Educator Demographics, 2014-2015, the age of full-time nurse educators in the rank of Chief Administrator under the age of 30 represents 0.2% (NLN, 2015).

The anticipated ethnicity of the sample was 80% Caucasian. According to the National Council of State Boards of Nursing and The Forum of State Nursing Workforce Centers, nurses from minority backgrounds represent 19.2% of registered nurses (NCSBN, 2017).

## **Description of Setting**

The study's setting was eleven Midwest states Deans, Directors, and Program Chairs of Nursing Programs. These include licensed practical nursing, associate degree, undergraduate, and graduate degree programs in Nebraska, Iowa, Kansas, Missouri, South Dakota, North Dakota, Wyoming, Colorado, Minnesota, Illinois, and Wisconsin. There were 284 possible participants for completion of the author-created survey tool for data collection.

## **Instrumentation**

The author-created survey tool was constructed for this study. The items were written based on the components of academic coaching programs found during an extensive review of the literature, and therefore, is considered rooted in the evidence. The survey tool consisted of 46 items, seven of which were demographical information. The survey tool was sent to a panel of 12 experts in the field of academics. Six of the experts were doctorally prepared, and all work closely with students in undergraduate and graduate-level nursing programs. The expert panel reviewed the tool for understandability and provided feedback around academic coaching and to tool's depth. Completion of the survey was estimated to take participants approximately 10 minutes. Thirty questions asked the participant to rate how successful an academic coaching program feature was on a scale of 1-10, with 10 being the highest level of effectiveness.

Participants were free to complete the survey in full or quit at any time without negative consequences. Completion of the survey indicated consent to participate.

## **Procedure**

Upon IRB approval, all prospective participants were emailed an Invitation to Participate (See Appendix A). The principal investigator (PI) established a personal Google Drive account that housed the research data. The survey tool was uploaded into Google Forms, with a link to access

the survey within the invitation. Responses were monitored with the Google Forms survey within the Google Drive account. The PI had exclusive access to the Google Drive account. The PI de-identified and coded the research data before exporting the data into Excel spreadsheets and emailing the psychometrician and research team members as needed. All email correspondences used bryanhealthcollege.edu or bryanhealth.org; both options were encrypted. An email reminder was sent to all possible participants two times per week until the three-week time limit was reached.

### **Data Collection Procedures**

All responses received were kept within a Google Drive account. After the final day to participate passed, the data was de-identified and coded. The data was exported into an Excel spreadsheet and emailed to the psychometrician.

The risk to participants included the possibility of a breach of confidentiality within the Google Drive account. Although the risk was minimal, there is always a risk of data being hacked when housing data in a cloud-based system.

Protecting against risk was mitigated by the PI's sole ownership of the Google Drive account, which uses two-step authentication to access. The password was not shared. According to Google policy, they do not claim ownership of any content, including any text, data, information, and files uploaded, transferred, or stored in a drive account. Files in an individual's drive are private unless the owner decides to share them. The research data were de-identified and coded by the PI before shared with the research team's psychometrician or members. All data was stored in the researcher's Google Drive, with the researcher being the only one with access.

Confidentiality was maintained by adhering to the steps in the Protection against Risk. Additionally, demographic data were analyzed and reported as aggregate data. Therefore, the

demographic data could not be linked with survey responses. Furthermore, survey scores were analyzed as aggregate data using total scores.

### **Analytical Procedures**

The PI prepared the data to be analyzed, and the psychometrician analyzed the data using SPSS software. The data were analyzed using descriptive analysis (means and standard deviations if parametric or median if the data are non-parametric). Descriptive data were also analyzed as percentages. Demographic data were analyzed and presented as aggregated data only.

### **Summary**

This descriptive study was designed to explore the best practices for creating and implementing academic coaching programs in nursing education programs across the Midwest to promote student success. Purposive sampling of Deans, Directors, and Program Chairs of nursing programs from eleven Midwest States was utilized for this study. Data collection included an author created online survey. Statistical analyses conducted on the data included descriptive analysis. Completion of the survey indicated consent to participate. See Appendix A for the Invitation to Participate.

## CHAPTER IV: RESULTS

### Introduction

This chapter presents this descriptive study's findings, exploring what constitutes best practice for creating and implementing academic coaching programs in nursing education to promote student success. Analysis of the data from the sample (N=36) is summarized and presented. The researcher's survey tool used is discussed, and the findings from the survey are presented. This chapter presents the four sections of the survey tool. These include academic coaching program information, demographics, and possible academic coaching program components that include their effectiveness based on their opinions and academic coaching program perceptions.

### Research Questions

The purpose of this study was to explore what constitutes best practice for the creation and implementation of academic coaching programs in nursing education to promote student success. The research variables included the best practices for creating and implementing academic coaching programs in nursing education.

The study addressed the following research questions:

What are the most widely implemented components of an academic coaching program in nursing education?

What components of academic coaching programs promote student success in nursing education?

Of the thirty possible components of academic coaching programs addressed in the survey, all thirty of them were incorporated in at least eight, or 22% of the respondents' academic coaching programs. All thirty of the possible components were then rated by the participant on a scale of 1-10, with 10 being the highest level of effectiveness in promoting student success.

## **Data Analysis**

Frequency tables present the program information, program demographics, and program perceptions. Frequency tables for each of the three sections of the survey provide both the frequency and percentage of the responses.

Descriptive statistics analyzed the research variables of academic coaching program components and their effectiveness level. Two descriptive statistics tables organize the data from the participant's responses to this survey tool section. The number of programs that offer the component equals  $n$ . The percentage of the programs that offer the component equals  $\%$ . The average response rating the effectiveness of the program component equals effectiveness. The amount of dispersion from the mean effectiveness equals the standard deviation. A total of thirty-six participants completed the survey in its entirety. The number of programs that offer each academic coaching program component ranged from eight to thirty-six, with a percentage from 22% - 100%. The average response rating of the program component effectiveness ranged from 4.38 to 9.47. The amount of dispersion from the mean ranged from 0.577 to 3.34.

## **Results**

Program information obtained through the survey tool's responses is organized in the first frequency table (Table 1). First, participants responded to if their nursing program had an academic coaching program. Of the total seventy-six respondents, thirty-six answered yes. Those that responded no were then asked to please exit the survey. The thirty-six who responded yes were asked to continue. Full-time equivalent FTE's staff in academic coaching programs ranged from sixteen programs having 0-1 FTE, nine had 1.2-2, two had 2.1-3, one had 3.1-4, four had 4.1 or greater, and four responded unsure. The number of students assigned to an academic coach

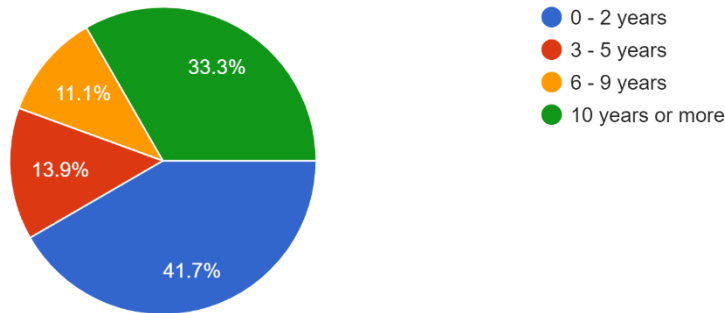
at one time ranged from nine between 0-10, eight 50 or greater, four between 11–20, two between 21–30, and two between 41–50, and ten responded unsure.

Funding of academic coaching programs was primarily through general student fees, with a response of eleven. Nine were funded through their nursing department budget, five as part of the faculty load, four through grants, four through student services budget, two through a mix of federal funding and general budget, and one as a fee-only to students who use the program.

The program's length in which it utilized an academic coaching program can be found below (Figure 1). Responses included fifteen between 0-2 years, twelve 10 years or greater, five between 3-5 years, and four between 6-9 years.

*Figure 1. Length of Academic Coaching Program*

How long has your nursing program utilized an academic coaching program?  
36 responses



Regarding the level of working knowledge around their organization's academic coaching program, twenty-two responded considerable, twelve responded some, and two responded little.

Table 1. Academic Coaching Program Information

<b>Academic Coaching Program Information</b>	<b>#</b>	<b>Total</b>
<b>Presence of academic coaching program</b>		
No	40	
Yes	36	
		76
<b>Nursing only</b>		
Yes	22	
No	14	
		36
<b>Full-time equivalent (FTE's) staffing</b>		
0 - 1	16	
1.1 - 2	9	
2.1 - 3	2	
3.1 - 4	1	
4.1 or greater	4	
Unsure	4	36
<b>Number of students assigned to each academic coach</b>		
Unsure	10	
0 -10	9	
50 or greater	8	
11- 20.	4	
21-30	2	
41-50	2	
		35
<b>Funding for the program</b>		
General student fees	11	
Nursing department budget	9	
Faculty load	5	
Grant	4	
Student Services Budget	4	
Mix of federal funding and budget	2	
Fee only to student using program	1	36
<b>Length of program</b>		
0 -2 years	15	
10 years or more	12	
3 - 5 years	5	
6 -9 years	4	36
<b>Knowledge of the program</b>		
Considerable	22	
Some	12	
Little	2	36

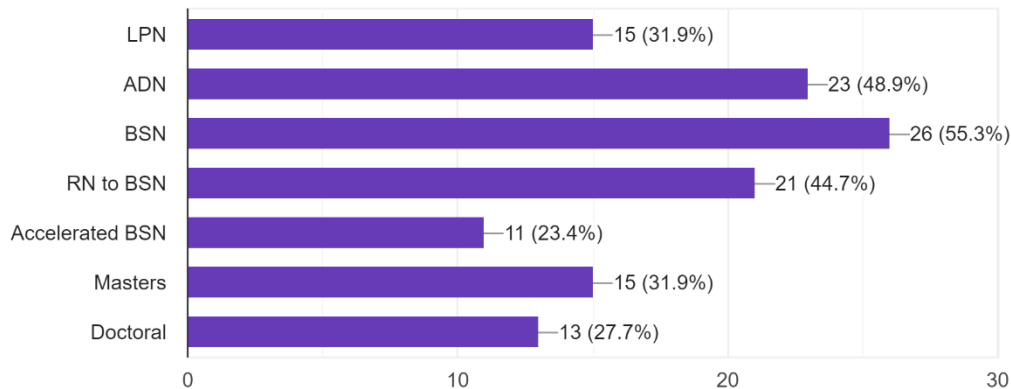


The second frequency table presents the demographic information section (Table 2). Thirteen of the institutions were public, eleven not-for-profit public, seven not-for-profit private, three not-for-profit, two private, and one for-profit private.

The number of new students admitted into the nursing program each year included eleven between 51-100, nine between 101-150, six between 0-50, six between 151-200, and five 201 or greater, in distinguishing the type of nursing degrees offered in their institution see (Figure 2). Participants were able to choose more than one response. There were a total of one-hundred and twenty-four response combinations reflected in (Figure 2). Participants were not asked to indicate if academic coaching was utilized in each program offered.

*Figure 2. Nursing Degree Types*

What nursing degrees do you offer in your institution? (select all that apply)  
47 responses



How many years the participant has worked in their current role as Dean, Director, or Program chair with their institution reflected thirteen answering 0-2 years, ten 6-9 years, seven 3-5 years, and seven 10 or more years.

Table 2. Demographic Information

<b>Demographic Information</b>	<b>#</b>	<b>Total</b>
<b>Type of institution</b>		
Public	13	
Not for Profit Public	11	
Not for Profit Private	7	
Not for Profit	3	
Private	2	
For-Profit Private	1	
		37
<b>New students admitted each year</b>		
51 -100	11	
101 -150	9	
0 - 50	6	
151 - 200	6	
201 and greater	5	
		37
<b>Type of nursing degrees offered</b>		
LPN	15	
ADN	23	
BSN	26	
RN to BSN	21	
Accelerated BSN	11	
Masters	15	
Doctoral	13	
*Participants were able to choose more than one		
		*124
<b>Years in current role</b>		
0 - 2 years	13	
6 - 9 years	10	
3 - 5 years	7	
10 or more	7	
		37
*see explanation in the narrative		

The final frequency table organizes the program perceptions section (Table 3).

Table 3. Program Perceptions

<b>4. Program Perceptions</b>	<b>#</b>	<b>Total</b>
<b>Negative effects from the program?</b>		
No	10	
NA	2	
Time	3	
*Comments, see narrative	7	
		19
<b>Program is vital for student success.</b>		
5 - strongly agree	26	
3 - neutral	5	
4 - agree	4	
3 - disagree	1	
		36
<b>Student's perception is positive.</b>		
5 - strongly agree	16	
4 - agree	16	
3 - neutral	3	
		35

Participants were offered the opportunity to narrate any perceived adverse effects noted from having an academic coaching program. Ten responded “no,” three “it takes a lot of time,” two “not applicable,” and seven free responses, which were the following:

- 1) This is only our second year, so still evaluating this program.
- 2) A few students can demand more time than expected.
- 3) It takes up a lot of faculty time.
- 4) Students may not always respond to an appointment request by a coach.
- 5) None, other than to realize this is a growing need among our student body.
- 6) Need to make sure that coaches know limitations and have clear boundaries regarding students' mental health issues.

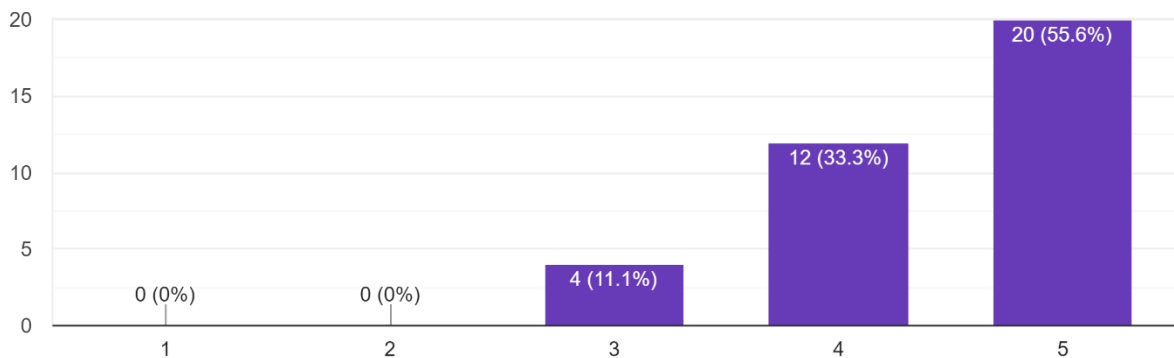
7) The faculty took time to warm up to the position, as they felt they were doing something wrong.

Agreement with the statement “offering an academic coaching program is vital for nursing students' success” yielded twenty-six strongly agree, five neutral, four agree, and one disagrees.

Participants’ perceptions about the positive nature of academic coaching programs were rated on a 5 point Likert scale. Twenty strongly agreed that faculty perception of the academic coaching program was positive, twelve agreed, and four were neutral. See (Figure 3).

Figure 3.

The faculty’s perception of the academic coaching program is positive.  
36 responses



1.Strongly Disagree 2. Disagree 3. Neutral 4. Agree 5. Strongly Agree

Figure 3. Faculty Perceptions

Agreement with the statement “students’ perception of the academic coaching program is positive” yielded sixteen strongly agreed, sixteen agreed, and three neutral. See (Figure 4).

Figure 4

Student's perception of the academic coaching program is positive.

35 responses

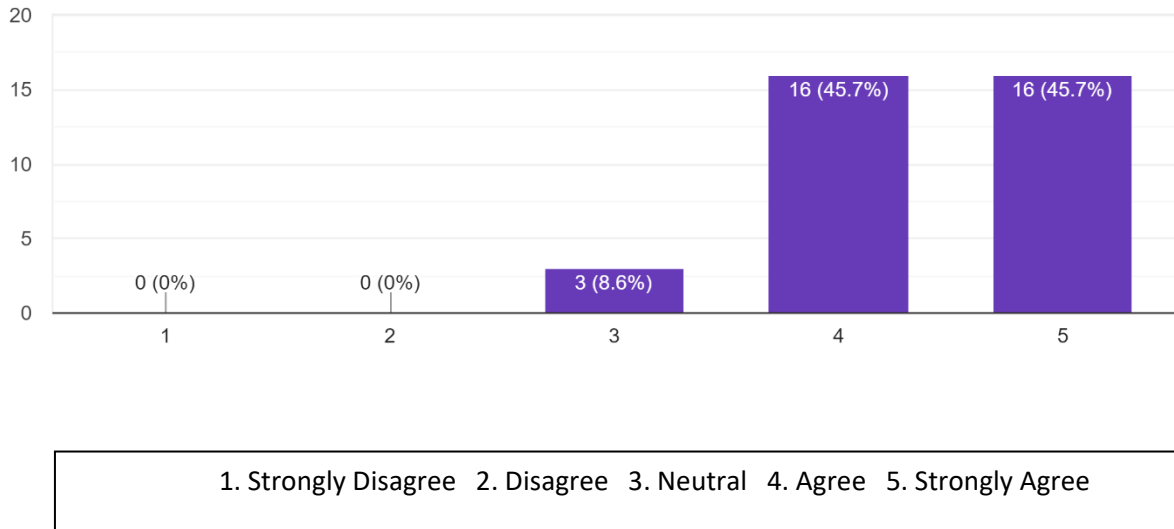


Figure 4. Student Perceptions

The final section of the survey identified thirty possible components of academic coaching programs. It also measured participants' perceptions of how effective the component is in promoting student success. The following descriptive statistics table (Table 4) organizes the data from participants' responses presented according to the frequency of inclusion from highest to lowest. The number of programs that offer the component equals n. The percentage of the programs that offered the component equals the percentage. The mean number on a scale of 1 - 10 rating the effectiveness of the component equals the effectiveness. The amount of dispersion from the mean effectiveness equals the standard deviation.

There were thirty possible program components in the survey. Participants were able to mark NA if their program did not contain the feature. To what extent the component promotes student success was rated 1-10, with 10 being the highest. Of the thirty possible program components, all received a rating, with the lowest number of programs containing the component being 8. This

tells the researcher that of the thirty possible components, all thirty had components included in at least some of the participant's academic coaching programs. The thirty possible components used in the survey were chosen based on an extensive literature review around academic coaching programs.

The five highest-ranking questions regarding the number of programs with the said component are discussed. The highest-ranking question, with thirty-six or 100% of participants having this component, was question two. This question stated that faculty or advisors might request a student meet with an academic coach at any time. All thirty-six participants answered this question, meaning they all offered this component. The mean effectiveness of the responses on a scale of 1-10, with ten being the highest possible, was 9.69. The amount of dispersion from the mean, or the standard deviation, was 0.577. Next, question one stated students might request help from an academic coach at any time. All thirty-six participants answered this question as well. The mean effectiveness was 9.47. The amount of dispersion from the mean or the standard deviation was 0.878. Question nineteen stated that academic coaches coach students on study skills and tips. Thirty-four of the respondents or 94% of programs offer this component; the mean effectiveness was 9.62. The amount of dispersion from the mean or the standard deviation was 0.888. Question four stated an early alert system alerts academic coaches of students in need of academic coaching. Thirty-four of the respondents, or 94% of the participants, offer this component. The mean effectiveness was 9.06. The amount of dispersion from the mean or the standard deviation was 1.774. Lastly, question five stated that specific issues, such as failing an exam, may automatically alert the academic coach to students in need. Thirty-three or 92% of participants offer this component. The mean effectiveness was 9.06. The amount of dispersion from the mean or the standard deviation was 1.345.

Table 4. Program Component Frequency

Program Component Frequency	N	Percentage	Effectiveness	St Deviation
Q.2 Faculty or advisors requests students' participation.	36	100	9.69	0.577
Q1. Students request being in the program.	36	100	9.47	0.878
Q.4 Early alert system alerts need.	34	94	9.06	1.774
Q.19 Academic coaches address study skills and tips.	34	94	9.62	0.888
Q.5 Certain issues may automatically alert concerning need.	33	92	8.94	1.345
Q.13 Coaching occurs as frequently as the student wants.	33	92	8.91	1.156
Q. 20 Academic coaches address life skills.	33	92	8.88	1.949
Q.30 Rate your academic coaching program success overall?	32	89	8.81	0.931
Q.11 Students may also have access to peer tutoring.	31	86	9.06	1.948
Q.3 Academic coaching may be required.	30	83	8.7	1.489
Q.22 Academic coaches address mental health needs.	29	81	8.62	1.374
Q 24 Evaluation of the academic coaching program occurs yearly.	29	81	8.41	2.027
Q.17 Academic coaches coach on course content.	28	78	8.82	1.611
Q.29 Changes to academic coaching is based on evaluations.	28	78	8.64	1.726
Q. 12 Students may also have access to professional tutors.	27	75	9	1.797
Q.28 Effectiveness of the program is based on student progression rates.	27	75	8.63	1.757
Q.6 The coach is a nursing faculty member.	26	72	8.19	2.94
Q.7 The coach is hired specifically for the role.	25	69	8.76	1.786
Q.21 Coaching includes advising needs.	24	67	8.46	2.359
Q.25 Evaluation of the effectiveness of the program occurs by surveying the students.	24	67	8.54	1.841
Q.14 Academic coaches meet with students weekly.	22	61	7.82	2.108
Q.18 Academic coaches address clinical skills.	22	61	7.64	2.381

Q.26 Evaluation of the effectiveness of the program occurs by surveying the coaches.	22	61	8.32	2.102
Q.16 Academic coaches meet with students monthly.	21	58	7.57	1.938
Q.27 Evaluation of the effectiveness of the program occurs by surveying the faculty.	21	58	7.76	2.468
Q.15 Academic coaches meet with students bi-weekly.	20	56	7.45	1.877
Q.23 Evaluation of the program occurs after each semester.	20	56	8.1	2.15
Q.9 The academic coach is a nursing student peer.	12	33	4.83	2.48
Q.8 The academic coach is a graduate nursing student.	9	25	5.22	3.346
Q.10 The academic coach is staffed by a third-party vendor.	8	22	4.38	2.973

The following descriptive statistics table (Table 5) organizes the data received from participants' responses to the same 30 program component questions seen in table 4. The possible academic coaching program components are organized by their effectiveness based on the participants' perception of their success level on a scale of 1 -10. The program's components effectiveness were ranked 1 -10, with 10 being the highest. The level of effectiveness can be seen in the column titled effectiveness. The amount of dispersion from the mean effectiveness equals the standard deviation. The number of programs that offer the component equals n. The percentage of the programs that offer the component equals the percentage.

The five highest-ranking questions regarding the components' level with the highest-ranking question with mean effectiveness of 9.69 out of a scale of 1 -10 was question two. This question stated that faculty or advisors may request a student meet with an academic coach at any time. The amount of dispersion from the mean, or the standard deviation, was 0.57. All thirty-six participants offered his component or 100% percent of the participants. Next, question nineteen was the second-highest effective ranked question with mean effectiveness of 9.62. This question



stated that academic coaches coach students on study skills and tips. The amount of dispersion from the mean or the standard deviation was 0.888. Thirty-four of the respondents or 94% of programs offer this component.

Question one was the third-highest effective question with mean effectiveness of 9.47. This question stated students may request help from an academic coach at any time. The amount of dispersion from the mean or the standard deviation was 0.878. All thirty-six participants or 100% of programs offer this component. The fourth highest-ranking question was question four, with mean effectiveness of 9.06. This question stated that an early alert system alerts academic coaches of students in need of academic coaching. The amount of dispersion from the mean or the standard deviation was 1.774. Thirty-four of the respondents, or 94% of the participants, offer this component. The fifth highest-ranking question was question eleven, with mean effectiveness of 9.06. This question stated that students may also have access to peer tutoring. The amount of dispersion from the mean or the standard deviation was 1.948. Thirty-one of the respondents, or 86% of the participants, offer this component.

*Table 5. Program Component Effectiveness*

<b>Program Component Effectiveness</b>	<b>Effectiveness</b>	<b>St Deviation</b>	<b>N</b>	<b>Percentage</b>
Q.2 Faculty or advisors requests students' participation.	9.69	0.577	36	100%
Q.19 Academic coaches address study skills and tips.	9.62	0.888	34	94%
Q.1 Students request being in the program.	9.47	0.878	36	100%
Q.4 Early alert system alerts need.	9.06	1.774	34	94%
Q.11 Students may also have access to peer tutoring.	9.06	1.948	31	86%
Q. 12 Students may also have access to professional tutors.	9	1.797	27	75%
Q.5 Certain issues may automatically alert concerning need.	8.94	1.345	33	92%

Q.13 Coaching occurs as frequently as the student wants.	8.91	1.156	33	92%
Q. 20 Academic coaches address life skills.	8.88	1.949	33	92%
Q.17 Academic coaches coach on course content.	8.82	1.611	28	78%
Q.30 Rate your academic coaching program success overall?	8.81	0.931	32	89%
Q.7 The coach is hired specifically for the role.	8.76	1.786	25	69%
Q.3 Academic coaching may be required.	8.7	1.489	30	83%
Q.29 Changes to academic coaching is based on evaluations.	8.64	1.726	28	78%
Q.28 Effectiveness of the program is based on student progression rates.	8.63	1.757	27	75%
Q.22 Academic coaches address mental health needs.	8.62	1.374	29	81%
Q.25 Evaluation of the effectiveness of the program occurs by surveying the students.	8.54	1.841	24	67%
Q.21 Coaching includes advising needs.	8.46	2.359	24	67%
Q 24 Evaluation of the academic coaching program occurs yearly.	8.41	2.027	29	81%
Q.26 Evaluation of the effectiveness of the program occurs by surveying the coaches.	8.32	2.102	22	61%
Q.6 The coach is a nursing faculty member.	8.19	2.94	26	72%
Q.23 Evaluation of the program occurs after each semester.	8.1	2.15	20	56%
Q.14 Academic coaches meet with students weekly.	7.82	2.108	22	61%
Q.27 Evaluation of the effectiveness of the program occurs by surveying the faculty.	7.76	2.468	21	58%
Q.18 Academic coaches address clinical skills.	7.64	2.381	22	61%
Q.16 Academic coaches meet with students monthly.	7.57	1.938	21	58%
Q.15 Academic coaches meet with students bi-weekly.	7.45	1.877	20	56%
Q.8 The academic coach is a graduate nursing student.	5.22	3.346	9	25%
Q.9 The academic coach is a nursing student peer.	4.83	2.48	12	33%
Q.10 The academic coach is staffed by a third-party vendor.	4.38	2.973	8	22%

## Results Summary

The analysis of the data for this study is presented in this chapter. The study's purpose was to explore what constitutes best practice for creating and implementing academic coaching programs in nursing education to promote student success. Descriptive statistical analysis of the data was completed. The data was discussed, summarized, and presented.

The survey tool developed by the researcher was discussed, and the findings from the survey were presented. This chapter presented the findings from the four sections of the survey tool. These included academic coaching program information, demographics, possible academic coaching program components, the mean level of effectiveness, the standard deviation, and academic coaching program perceptions. The research variable included the best practices for creating and implementing academic coaching programs in nursing education. The results indicate the level of effectiveness of the program components identified in the survey tool.

The research questions focused on the most widely implemented components of an academic coaching program and how effective they are at promoting student success. The study found that the most frequent and effective components of academic coaching programs include the following:

Allowing faculty, advisors, or the student to voluntarily request involvement in the program.

The focus of academic coaching programs should be on study skills and tips.

Utilization of an early alert system that has defined parameters to alert to student needs.

Including peer tutoring in the program.

The findings of the study will be discussed in further detail in chapter five. In conclusion, the data's descriptive analysis helps the reader understand the components most commonly

implemented in the academic coaching program and their level of effectiveness as ranked by the study participants.

## **CHAPTER V: DISCUSSION AND SUMMARY**

### **Introduction**

This chapter summarizes the study and important conclusions drawn from the data presented within the previous chapters. An extensive review of the literature found limited studies are examining the role of academic coaching in nursing education. There is a need for further definition and ongoing study by the nursing education profession into academic coaching programs and their role in promoting student success. Insight into the most common components of academic coaching programs across nursing programs and understanding academic coaching programs' effectiveness will provide evidence-based practices to guide future academic coaching programs. Nursing programs could use this information to create best-practice academic coaching programs to assist in student progression and academic success.

The following includes a discussion on the findings in relation to the research questions and interpretation and the study's limitations. It will include the implications and recommendations for future education and the need for further research.

### **Research Questions and Interpretation**

The study addressed the following research questions,

What are the most widely implemented components of an academic coaching program in nursing education?

What components of academic coaching programs promote student success in nursing education?

The findings from the study give insight into the most widely implemented components of an academic coaching program. The following are the top five most commonly implemented components as found by this study. The first component that all thirty-six participants had as part

of their academic coaching programs allows for faculty and advisors to request when students should be enrolled in the academic coaching program. The second component that all thirty-six participants also had as part of their academic coaching program is that students can voluntarily request being included in the academic coaching program. The third component that thirty-four participants had as part of their academic coaching program is the inclusion of an early alert system that alerts faculty when a need is recognized regarding a student needing to be included in the academic coaching program. The fourth component, which thirty-four participants had as part of their academic coaching program, is that academic coaches address study skills and tips to studying as part of the academic coaching program. The fifth and final component that thirty-three participants had as part of their academic coaching program is that certain issues, such as failing an exam, alert the faculty to students possibly needing to enroll in an academic coaching program.

Understanding the top five most widely implemented components of academic coaching are important. It can guide those looking to either create a new academic coaching program or modify an existing program. Knowing which components are most widely implemented provides insight into evidence-based practices to guide future academic coaching programs. This is important for any program looking to improve on or create a new academic coaching program for their nursing program. The literature review concluded that academic coaching programs assist in student retention, but which components of academic coaching are most widely implemented was not evident (Brown-O'Hara, 2013, Cachia et al., 2018, White-Jefferson, Broussard, & Fox-McCloy, 2020). While all thirty components in the study were deemed to have some degree of effectiveness, five were most predominantly noted.

The study's findings also gave insight into the components of an academic coaching program that were rated as most effective in promoting student success. The following will discuss the five components rated as most effective in academic coaching programs in promoting student success as found by this study. The first component rated as the most effective in promoting student success was also the most widely implemented. This component allowed faculty and advisors to request when students should be enrolled in the academic coaching program. This component received a mean effectiveness rating of 9.69. The second-highest ranked component in promoting student success is that academic coaches address study skills and tips to studying as part of the academic coaching program. This received a mean effectiveness rating of 9.62. The third highest ranked component in promoting student success was that students could voluntarily request being included in the academic coaching program. This received a mean effectiveness rating of 9.47. The fourth highest-ranked component in promoting student success is the inclusion of an early alert system that alerts faculty when a need is recognized regarding a student needing to be included in the academic coaching program. This received a mean effectiveness rating of 9.06. Furthermore, the fifth-ranked component in promoting student success was students having access to peer tutoring and being enrolled in an academic coaching program. This received a mean effectiveness rating of 9.06.

Knowing the top five ranked components of an academic coaching program in promoting student success from this study gives insight into academic coaching program components and their effectiveness in promoting student success. It is important to note that twenty-two of the thirty possible academic coaching program components received a mean effectiveness rating greater than eight. Only two components received a mean effectiveness rating of less than five. No component received a mean effectiveness rating lower than 4.38. The high level of

effectiveness noted provides further insight into the idea that academic coaching programs are essential in promoting student success.

Understanding components that promote student success is essential to maintaining student retention and promote academic success for colleges and universities. Demonstrating academic coaching programs' effectiveness will provide evidence-based practices to guide future academic coaching programs. This study has helped organize possible components and provide evidence-based practice on the most common components and how effective those components are.

Results of this study suggest that utilizing an academic coaching program promotes nursing student success. Participants were presented with the statement, “Offering an academic coaching program is vital for nursing students’ success.” Of the thirty-six participants, twenty-seven respondents strongly agreed, four agreed, six responded neutral, and one disagreed. The study results suggest that implementing and creating academic coaching programs in all nursing education levels should be explored to promote student success. This study supports the findings of previous studies. The use of academic coaching programs decreases student attrition and supports them throughout their education, assisting with completing a nursing degree (Bryer, 2012; Cox-Davenport, 2017, White-Jefferson, Broussard, & Fox-McCloy, 2020). This study’s findings support the continued need for further exploration into the various academic coaching programs' components, how they are implemented, and the best practices for further development in the role.

### **Theoretical Context**

Caring is a fundamental element in the education and development of a student into a nurse's role. By embracing positive energy through the integration of mind, body, and spirit into the student role, caring supports the positive human interactions. Watson’s theory promotes behavior



that supports the universal belief that caring is essential for nursing students to meet their clients' needs. According to Watson (1979), “mentoring nursing students and new nurses is the real form of caring, providing for experienced nurses to support and to nurture the next generation of nurses” (p. 51). Academic coaching is utilized as a support method that effectively promotes nursing students' progression through a nursing program.

Admission into a nursing program can prove to be a stressful and challenging transition for many students. Academic coaching programs can provide a caring and nurturing environment for students enrolled in nursing programs. Their involvement in such programs can make lasting impressions students will carry on into the workforce. Students can then model the examples seen in the classroom with their behavior in the clinical setting and again once they are in the nursing workforce setting.

### **Limitations of the Study**

There were two main limitations of the study noted. These include a small sample size as well as a newly developed survey tool.

#### **Small Sample Size**

Purposive sampling was used, which was limited to one sample. A total of 284 invitations to participants were sent out. There was a total of one-hundred and eighty in the first round and one-hundred and four in the second. It should be noted that during the data collection period, there was a devastating global pandemic. There was a need for complete program redesign as social distancing guidelines were strictly enforced across the nation during this time. Classes were quickly shifted to an online format, simulations were moved mostly to remote, and clinical settings were turning away from allowing students. Widespread fear and many unknowns caused high levels of stress that were significantly impacting everyday life.

The survey asked participants if their nursing program had an academic coaching program. Of the total seventy-six respondents, thirty-six, or 47% of the participants, had an academic coaching program in their organization. Those thirty-six respondents met the criteria for participation and were able to complete the survey in its entirety. The researcher's perception that likely 50% or greater of possible participants would have an academic coaching program in their organization was the researcher's perception. It is significant to note that the study findings indicate less than 50% of participants had an academic coaching program.

A power analysis was conducted to determine the minimum number, or the ideal target, of the number of participants to detect significant differences or relationships. A power analysis was calculated for this study, although the number was not reached. The study was conducted with 36 participants. The current state of the global pandemic likely had some effect on the lack of responses obtained due to the increased workload many nursing faculty saw as they re-worked their curriculum to maintain social distancing protocols both in the classroom and clinical setting.

### **Newly Developed Survey Tool**

An author-created survey tool was constructed for this study. The items were written based on the components of academic coaching programs found during an extensive review of the literature, and therefore, is considered rooted in the evidence. It should be known that any newly developed tool will have deficits.

The survey tool was sent to a panel of 12 experts in the field of academics. Six of the experts were doctorally prepared, and all work closely with students in undergraduate and graduate-level nursing programs. The expert panel reviewed the tool for face validity and provided feedback around academic coaching and the tool's depth. A psychometrician also assisted in creating the

tool and provided insight and feedback on the tool's creation. Further refinement of the tool can be achieved through the continued use, which would also add to the tool's validity.

The survey tool effectively collected information regarding various academic coaching program components and their level of effectiveness. Of the possible thirty academic coaching program components on the survey tool, all thirty were utilized in a minimum of eight of the thirty-six participating programs. Seven of the thirty academic coaching components were utilized in thirty-three or more of the thirty-six academic coaching programs.

### **Implications and Recommendations for Education**

Implementation of academic coaching programs in nursing can positively affect student retention and success, significantly impacting all of the four major stakeholder roles in education. As discussed previously, these roles include the institution, faculty, student, and academic coaches. Of the 76 responses to the invitation to participate, 36 of those currently had an academic coaching program for their nursing students. This number is disappointingly low considering the mounting evidence around the positive impact academic coaching programs have on student success. Academic coaching programs help students succeed with their progression through an academic program of study by providing various support throughout their education.

As identified by the literature review, the four major stakeholder roles include the institution role, the faculty role, the student role, and the academic coach's role. All four major stakeholders have a shared interest in nursing students' successful education (Bakker et al., 2019, Hopkins, 2008, White-Jefferson, Broussard, & Fox-McCloy, 2020). The following will briefly describe how the results of this study affect the four major stakeholders.

The first major stakeholder is the institution. Implementation of an academic coaching program can positively impact both the retention rates and student perceptions of an institution.

Student retention is critical for institutions' funding and growth and their ability to maintain accreditation. The Higher Learning Commission holds institutions accountable through practice policies that assure accurate data regarding student achievement, retention, and completion within a program.

The second major stakeholder is the faculty. Implementation of academic coaching programs can positively impact the role of faculty in student success. An academic coaching program provides faculty with a platform to develop an evidence-based program that best meets their students' needs. It gives them the ability to provide input on defining characteristics of the program and used evidence-based practices to create guidelines that help recognize students at risk and provide an opportunity for open communication among students and faculty.

Communication between the faculty and the coach and the faculty and the students will provide clear expectations and assist the students in the best possible utilization of the academic coaching program.

The third major stakeholder is the student. Implementation of academic coaching programs can positively impact the student's role in their education. Students take on an essential role in their ability to be successful. An academic coaching program works as a bridge to assist students with navigating the challenges that nursing programs can create. Nursing programs can overwhelm students quickly with large amounts of information in short periods. It is a challenging program that often requires different skill sets that students may not be familiar with before their admission into a program. An academic coaching program can provide students with specified tools and resources to promote student success.

The final major stakeholder is the academic coach. Academic coaches have various roles in developing, maintaining the program, and evaluating the program's success. Being involved in

the development and the implementation of the program will help promote student success within a nursing program. It will provide the academic coach with the ability to provide input on defining characteristics of the program and incorporate evidence-based practices in creating a program that will help recognize students who may benefit from enrollment in the program. It will also provide coaches an opportunity for open communication among all four major stakeholders.

### **Need for Future Research**

It is recommended that replicating this study with further data collection, including additional nursing programs, would prove beneficial. The lower than expected percentage of academic coaching programs being implemented in nursing schools is concerning. The literature review reinforces the idea that academic coaching programs provide nursing students with resources necessary to improve their academic successes. The lack of programs could be due to a couple of factors. For one, the current global pandemic likely negatively influenced the number of participants who responded to the survey. The actual number of academic coaching programs may be higher than the study findings suggest.

Further study into the number of academic coaching programs would help clarify this. Secondly, factors previously recognized as possible barriers to implementing academic coaching programs could be holding back institutions from developing such programs. These include lack of funding, scheduling conflicts, the time commitment required, and inadequate faculty numbers to implement the academic coaching programs.

The financial strain of implementing an academic coaching program may be a barrier for some nursing programs in whether they implement such a program. It would be necessary for these institutions to explore the cost vs. benefit of implementing such a program. This is

especially important if the organization sees student attrition as an issue in which academic coaching programs are known to increase student retention. Nursing faculty shortages affect many institutions placing a strain on existing faculty time. According to a report by AACN in 2018, there were 1715 nursing faculty vacancies across the United States. For institutions experiencing faculty shortages, exploring using a third-party vendor to provide academic coaching services can also help support their faculty and alleviate some of their time constraints.

To further understand the effectiveness of academic coaching program components, one could implement any of the components recognized in this study as part of a new study. Following that component and then compiling data regarding the level of effectiveness seen in their program would add to the depth and breadth of understanding how the program's components are most successful in promoting student success.

Another level of continued research could include exploring students' lived experiences while participating in an academic coaching program. This may lead to a greater understanding of the role of academic coaching in promoting student success. This study was unique in exploring the components and their effectiveness in academic coaching programs and thus lays a foundation for further research in academic coaching programs.

## **Summary**

The four major stakeholders, the institution role, the faculty role, the student role, and the academic coach's role, need to invest in developing programs that assist students in the successful progression through nursing programs. Strategies that focus on retention of students and successful completion of programs should be the top priority. Providing students with the necessary tools to be successful is essential. This study supports academic coaching as a strategy that nursing programs may implement to help students be successful.

Further study into academic coaching programs would provide educators with insight into how to effectively manage students' needs and promote student success while providing evidence-based practices to guide future academic coaching program development. This study's goal was to increase the understanding of the various components being implemented and how effective those components promote student success.

This study found that the most frequent and effective components of academic coaching programs include allowing faculty, advisors, or the student to request involvement in the program, the focus of the program be on study skills and tips, using an early alert system with defined parameters to alert to student needs, and including peer tutoring in the program.

## References

- American Association of Colleges of Nursing (2019). *Special survey on vacant faculty positions for academic year 2018-2019*. <https://www.aacnnursing.org/Portals/42/News/Surveys-Data/Vacancy18.pdf>.
- Bakker, E. J., Verhaegh, K. J., Kox, J. H., van der Beek, A. J., Boot, C. R., Roelofs, P. D., & Francke, A. L. (2019). Late dropout from nursing education: An interview study of nursing students' experiences and reasons. *Nurse Education in Practice, 39*(39), 17-25.  
doi:10.1016/j.nepr.2019.07.005
- Bettinger, E., & Baker, R. (2013). The effects of student coaching: An evaluation of a randomized experiment in student advising. *Educational Evaluation and Policy Analysis, 36*(1), 3–19.
- Black, A. H. (2017). *Effect of a student success program on the academic success of first-semester junior BSN students*. Nursing Theses and Capstone Projects. 272.  
[https://digitalcommons.gardner-webb.edu/nursing\\_etd/272](https://digitalcommons.gardner-webb.edu/nursing_etd/272)
- Broussard, L., & White-Jefferson, D. (2018). *Use of academic coaches to promote student success in online nursing programs*. *Teaching and Learning in Nursing, 13*(4), 223-225.  
doi://doi-org.library1.unmc.edu/10.1016/j.teln.2018.05.007
- Bryer, J. (2012). Peer tutoring program for academic success of returning nursing students. *Journal of the New York State Nurses Association, 43*(1), 20-22.
- Burger, A., & Naude, L. (2019). In their own words - students' perceptions and experiences of academic success in higher education. *Educational Studies, 1*-16.  
doi:10.1080/03055698.2019.1626699



- Cachia, M., Lynam, S., & Stock, R. (2018). Academic success: Is it just about the grades? *Higher Education Pedagogies*, 3(1), 434-439. doi:10.1080/23752696.2018.1462096
- Capstick, M. K., Harrell-Williams, L. M., Cockrum, C. D., & West, S. L. (2019). Exploring the effectiveness of academic coaching for academically at-risk college students. *Innovative Higher Education*, 44(3), 219-231. doi:10.1007/s10755-019-9459-1
- Cascoe, K., Stanley, S., Stennett, R., & Allen, C. (2017). Undergraduate nursing students at risk of failure. *Nurse Education Today*, 52, 121-122.
- Connelly, L., Kathol, L., Truksa, V. P., Miller, J., Stover, A., & Otto, E. L. (2019). The academic coach: A program for nursing student success. *Journal of Nursing Education*, 58(11), 661-664. doi:10.3928/01484834-20191021-09
- Corrigan-Magaldi, M., Colalillo, G., & Molloy, J. (2014). Faculty-facilitated remediation: A model to transform at-risk students. *Nurse Educator*, 39(4), 155-157.  
doi:10.1097/NNE.0000000000000043
- Cox-Davenport, R. A. (2017). "The five-minute check-in" intervention to ease the transition into professional education: A descriptive analysis. *Nurse Education Today*, 50, 25-28.  
doi:10.1016/j.nedt.2016.12.014
- Dante, A., Valoppi, G., Saiani, L., & Palese, A. (2011). Factors associated with nursing students' academic success or failure: A retrospective italian multicenter study. *Nurse Education Today*, 31(1), 59-64. doi:10.1016/j.nedt.2010.03.016
- Deiorio, N. M., Carney, P. A., Kahl, L. E., Bonura, E. M., & Juve, A. M. (2016). Coaching: A new model for academic and career achievement. *Medical Education Online*, 21(1), 33480.  
doi:10.3402/meo.v21.33480

- Denham, S. A., Tietze, M., Allam, Z., Talleff, J., Schrum, N., & Wang, T. (2018). Academic success of undergraduate nursing students. *Nurse Education in Practice*, *33*, 172-177.  
doi:10.1016/j.nepr.2018.08.013
- Elder, B. L., Jacobs, P., & Fast, Y. J. (2015). Identification and support of at-risk students using a case management model. *Journal of Professional Nursing*, *31*(3), 247-253.  
doi:10.1016/j.profnurs.2014.10.003
- Fishman, D. C. (2013). *Mentoring in associate degree nursing: A mixed-methods study for student success*. Retrieved from <https://search.proquest.com/docview/1464789040>
- Freeman, J. C., & All, A. (2017). Academic support programs utilized for nursing students at risk of academic failure: A review of the literature. *Nursing Education*, *38*(2), 69-74.  
doi:10.1097/01.NEP.0000000000000089
- Freeman, J. C., & Lazenby, R. B. (2012). Using the transformative process for student success. In A. H. Morris & D. R. Faulk (eds.), *Transformative learning in nursing: A guide for nurse educators*. New York, NY: Springer.
- Gray, J.R., Grove, S.K. & Sutherland, S. (2017). *The practice of nursing research: Appraisal, synthesis, and generation of evidence* (8th ed.). St. Louis: Elsevier. ISBN: 978-0-32337758-4
- Hadenfeldt, C. J. (2012). Effects of an intervention plan on nursing student success. *The Journal of Nursing Education*, *51*(2), 89-94. doi:10.3928/01484834-20111216-01
- Hayes, E., & Kalmimakis, K. (2007). From the sidelines: Coaching as a nurse practitioner strategy for improving health outcomes. *Journal of the Academy of Nurse Practitioners*, *19*, 555-562.
- Higher Learning Commission. (n.d). Higher Learning Commission Policy Title: Assumed Practices. Retrieved from <https://www.hlcommission.org/Policies/assumed-practices.html>

- Higher Learning Commission. (n.d). Higher Learning Commission Policy Title: Criteria for Accreditation. Retrieved from <https://www.hlcommission.org/Policies/criteria-and-core-components.html>
- Hopkins, T. H. (2008). Early identification of at-risk nursing students: A student support model. *The Journal of Nursing Education, 47*(6), 254-259. doi:10.3928/01484834-20080601-05
- Jeffreys, M.R., 2004. *Nursing student retention: Understanding the process and making a difference.*, New York, NY: Springer.
- Jeffreys, M. R. (2007). Tracking students through program entry, progression, graduation, and licensure: Assessing undergraduate nursing student retention and success. *Nurse Education Today, 27*(5), 406-419. doi:10.1016/j.nedt.2006.07.003
- Kelton, M. F. (2014). Clinical coaching – an innovative role to improve marginal nursing students' clinical practice. *Nurse Education in Practice, 14*(6), 709-713. doi:10.1016/j.nepr.2014.06.010
- Knowlton, M. (2017). Student perceptions of stressors and the value of coaching in a baccalaureate nursing articulation program. *Nursing Education Perspectives, 38*(5), 277-278. doi:10.1097/01.NEP.0000000000000170
- Koenig, R. (2020, December 17) *Colleges Lost Nearly Half a Million Student Enrollments This Fall. Ed Surge.* <https://www.edsurge.com/new/2020-12-17-colleges-lost-nearly-half-a-million-student-enrollments-this-fall>
- Lancia, L., Petrucci, C., Giorgi, F., Dante, A., & Cifone, M. G. (2013). Academic success or failure in nursing students: Results of a retrospective observational study. *Nurse Education Today, 33*(12), 1501-1505. doi:10.1016/j.nedt.2013.05.001

- Latino, J. A., & Unite, C. M. (2012). Providing academic support through peer education. *New Directions for Higher Education*, 2012(157), 31-43. doi:10.1002/he.20004
- National Academic Advising Association (2017). *Academic Coaching Advising Community*. Retrieved from <https://nacada.ksu.edu/Community/Advising-Communities/Academic-Coaching/resources.aspx>
- Pitt, V., Powis, D., Levett-Jones, T., & Hunter, S. (2012). Factors influencing nursing students' academic and clinical performance and attrition: An integrative literature review. *Nurse Education Today*, 32(8), 903-913. doi:10.1016/j.nedt.2012.04.011
- Reynolds, A. K. (2019). Academic coaching for learners in medical education: Twelve tips for the learning specialist. *Medical Teacher*, 1-6. doi:10.1080/0142159X.2019.1607271
- Robinson, E., & Niemer, L. (2010). A peer mentor tutor program for academic success in nursing. *Nursing Education Perspectives*, 31(5), 286. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/21086865>
- Rutgers School of Nursing. (n.d.). *Academic Coaching for Nursing*. Retrieved from <https://nursing.rutgers.edu/students/success/academic-coaching-for-nursing/>
- Schlairet, M., & Rubenstein, C. (2019). Senior NCLEX-RN coaching model: Development and implementation. *Nurse Educator*, 44(5), 250-254. doi:10.1097/NNE.0000000000000644
- Schoofs, N, C. (2012). How can we help minority nursing students? *Journal of Nursing education and Practice*, 2, 154.
- Scott, A. N. (2017). *Effectiveness of academic coaching and early intervention on underserved online learner populations at a private, not-for-profit, midwestern university: A mixed methods study* Available from ProQuest Dissertations & Theses Full Text: The Humanities

and Social Sciences Collection. Retrieved

from <https://search.proquest.com/docview/2128023461>

ten Hoeve, Y., Castelein, S., Jansen, G., & Roodbol, P. (2017). Dreams and disappointments regarding nursing: Student nurses' reasons for attrition and retention. A qualitative study design. *Nurse Education Today*, *54*, 28-36. doi:10.1016/j.nedt.2017.04.013

Warner, Z., Neaer, W., Clark, L., & Lee, J. (2018). Peer coaching and motivational interviewing in postsecondary settings: Connecting retention theory with practice. *Journal of College Reading and Learning*, *48*(3), 159-174. doi:10.1080/10790195.2018.1472940

Watson, J. (1979). *Nursing: The philosophy and source of caring*. Boston, MA: Little Brown and Company.

Watson, J. (2005). *Caring science as a sacred science*. Philadelphia, PA: F.A. Davis.

White-Jefferson, D., Broussard, L., & Fox-McCloy, H. (2020). Determining roles and best practices when using academic coaches in online learning. *Teaching and Learning in Nursing*, *15*(4), 210-214. doi:10.1016/j.teln.2020.04.008

## Appendix A

### Academic Coaching Programs and their Effectiveness

An academic coaching program is staffed by academic coaches who assist nursing students with developing the skills, strategies, and tools necessary to achieve success within the rigorous expectations of a nursing curriculum. Academic coaching programs provide nursing students with resources to refine their intrinsic skills to improve their ability to collaborate with others, develop time management skills, develop intellectual and personal qualities, and explore approaches to address academic challenges they may face (Rutgers School of Nursing, n.d.).

#### 1). Academic Coaching Program Information

Does your nursing program have an academic coaching program?

Yes

No

If No, thank you for your time. Please continue by clicking the NEXT below until you reach the end of the survey and SUBMIT.

Does your academic coaching program serve only the nursing program?

Yes

No

How many full-time equivalent (FTE's) routinely staff the nursing academic coaching program?

0 - 1

1.1 - 2

2.1 - 3

3.1 - 4

4.1 or greater

unsure

Approximately how many students are assigned to an academic coach at one time?

1-10

11-20

21-30

31-40

41 or greater

unsure

How does your organization fund your academic coaching program?

Through general student fees

Fee only to students using the program

Student Services Department budget

Nursing Department budget

Other (Please specify)

How long has your nursing program utilized an academic coaching program?

- 0 – 2 years
- 3 – 5 years
- 6 – 9 years
- 10 years or more

Please rate your working knowledge of your organization's academic coaching program?

- No knowledge
- Little knowledge
- Some knowledge
- Considerable knowledge

2). Demographic information

(A) Type of institution (select all that apply)

- For profit
- Not for profit
- Private
- Public
- For Profit Private
- Not for Profit Public
- Not for Profit Private

(B) Number of new students admitted in your nursing program each year.

- 0-50
- 51-100
- 101-150
- 150 and greater

(C) What nursing degrees do you offer in your institution? (select all that apply)

- LPN
- ADN
- BSN
- RN to BSN
- Accelerated BSN
- Masters
- Doctoral

How many years have you worked in your current role as Dean, Director, or Program chair with your institution?

- 0 – 2 years
- 3 – 5 years
- 6 – 9 years
- 10 years or more

3). Academic Coaching Program Features

	For each of the following possible academic coaching program features mark NA if your center does not contain that feature. If your center does have the feature, rate to what extent the feature promotes student success on a scale of 1 - 10 with 10 being the highest.		<b>To what extent the feature promotes student success, with 10 being the highest</b>									
	<b>Possible Academic Coaching Program Features</b>	<b>NA</b>	<b>10</b>	<b>9</b>	<b>8</b>	<b>7</b>	<b>6</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
1	Students may request help from an academic coach at any time.											
2	Faculty or advisors may request for a student to meet with an academic coach.											
3	Students may be required to go to an academic coach.											
4	An early alert system alerts academic coaches of students in need of academic coaching.											
5	Certain issues, such as failing an exam, may automatically alert the academic coach to students in need.											
6	The academic coach is a nursing faculty member.											
7	The academic coach is hired specifically for the role of academic coach.											
8	The academic coach is a graduate nursing student.											
9	The academic coach is a nursing student peer.											
10	The academic coach is staffed by a third-party vendor.											
11	In conjunction with academic coaching, students may also have access to peer tutoring.											
12	In conjunction with academic coaching, students may also have access to professional tutors.											
13	Academic coaches meet with students in the academic coaching program as frequently as the student wants.											



14	Academic coaches meet with students in the academic coaching program weekly.																		
15	Academic coaches meet with students in the academic coaching program bi-weekly.																		
16	Academic coaches meet with students in the academic coaching program monthly.																		
17	Academic coaches coach students on course content/materials.																		
18	Academic coaches coach students on clinical skills.																		
19	Academic coaches coach students on study skills and tips.																		
20	Academic coaches coach students on life skills.																		
21	Academic coaches coach students on advising needs.																		
22	Academic coaches coach students on mental health needs.																		
23	Your organization evaluates the academic coaching program after each semester.																		
24	Your organization evaluates the academic coaching program yearly.																		
25	Your organization evaluates the effectiveness of the academic coaching program by surveying the students.																		
26	Your organization evaluates the effectiveness of the academic coaching program by surveying the coaches.																		
27	Your organization evaluates the effectiveness of the academic coaching program by surveying the faculty.																		
28	Your organization evaluates the effectiveness of the academic coaching program by student progression rates.																		
29	Your organization makes changes to academic coaching based on the evaluations.																		
30	How successful would you rate your academic coaching program overall?																		

#### 4). Academic Coaching Program Perceptions

Have you found any negative effects from having an academic coaching program?

Yes

No

If yes, please describe

Please complete the following questions using the scale below

1- strongly disagree

2- disagree

3- neutral

4- agree

5- strongly agree

Offering an academic coaching program is vital for nursing student's success.

1 -2 -3 - 4 -5

Faculty's perception of the academic coaching program is positive.

1 -2 -3 - 4 -5

Student's perception of the academic coaching program is positive.

1 -2 -3 - 4 - 5