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Healthcare Organizations and Succession Planning

by

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Healthcare Organizations and Succession Planning

ABSTRACT

Healthcare organizations have been shown to operate as big business, except for one area. Research has shown that healthcare organizations do not implement succession plans for leadership turnover, director level and above. There is a need for successful healthcare systems to implement a succession plan for these leadership roles. Without a leadership succession plan, a healthcare organization can be caught in a bind and short-staffed. A system without a succession plan can also experience severe turbulence, which can lead to lost revenue and a decrease in customer and employee satisfaction. Nursing has had a successful succession plan in place for years and healthcare organizations can benefit by following the successful path of the nursing leadership succession plan.

The purpose of this qualitative, case-study was to investigate how healthcare systems are planning for vacancies of senior level leadership in their organizations. The case-study addressed the two research questions, and they were: How do hospital directors at three mid-size hospitals describe their succession planning? and What approaches, strategies, and tools do hospital directors describe using in their planning efforts?

Research has shown that succession planning in healthcare is not happening at a high rate, even though healthcare is operating as big business (Trepanier & Crenshaw, 2013). A lack of succession plan can be costly and can increase hospital costs as healthcare systems recruit for

leadership roles (Titzer & Shirey, 2013). One area of healthcare that succession planning is happening, nursing (Waxman & Delucas, 2014). Nursing leaders are critical in healthcare organizations, as they are the liaison between leadership and nurses (Jones, 2019).

The researcher recommends the following, based upon the findings of the study:

- Healthcare organizations should utilize the current nursing succession plan, as this has shown to be successful and in place for many years.
- Healthcare should implement an administrative fellowship program to train future leaders of the system and to help introduce those future leaders to the system and how the system works.

University of New England

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Chapter 1

Introduction

Healthcare organizations potentially can perform and operate as a big business. Operating as a corporate entity, corporate planning can be accomplished by way of having a succession plan in place for administrative healthcare leadership (Amato, 2013). The research that is available shows that healthcare is not incorporating succession planning as the norm in their business operations (Amato, 2013). Amato (2013) stated that succession planning has been used historically by the business world, but succession planning is not an approach used by all industries. Trepanier and Crenshaw (2013) showed that 70% of the healthcare industry leaders reported that there is a lack of succession planning in their healthcare practices. This lack of planning can cause turbulence or staffing problems, especially by not having someone in place to replace a retiring or deceased member of the leadership team.

Retirements of senior leaders and a lack of a succession plan can lead to the healthcare organization having a shortage of healthcare leadership (Denker, Sherman, Hutton-Woodland, Brunell & Medina, 2015). According to the University of Pennsylvania School of Nursing (2018), one area that succession planning in healthcare is working is with primary care roles and the use of nurses in these roles. Currently nursing shortages are being mitigated by planning to train students and current nurses to take on roles in healthcare (University of Pennsylvania School of Nursing, 2018). According to American College of Healthcare Executives, almost 70% of healthcare leaders are expected to retire within the next 10 years and by 2030, over 20% of the US population will be 65 years or older (Don, Wang, Ringen, & Sokas, 2017). This anticipated leadership shortage will create employment gaps at the leadership level due to the executive turnover (Smith, 2018).

Turnover in business and healthcare continues to increase, with more than 40% of federal, state, and local healthcare workers were considering retiring or leaving their jobs by 2020 (Leider, Harper, Shon, Sellers & Castrucci, 2016). The rate of turnover requires strategic planning to fill those upcoming vacancies (American College of Healthcare Executives, 2018). More than 70% of healthcare leaders report a lack of succession planning; this lack of planning has contributed to a shortage of healthcare leadership (Trepanier & Crenshaw, 2013). A healthcare organization can be stuck in a recruiting mode and unable to fill an open leadership position in a timely manner without a proper succession plan in place (Dyess, Sherman, Pratt, & Chiang-Hanisko, 2016). This situation can cost an organization millions of dollars (Titzer & Shirey, 2013). The problem that healthcare fields are facing is the lack of succession planning for healthcare leadership. This lack of planning can impact patient care and increase hospital costs in the area of \$200-500 thousand per year for training and filling open leadership roles (Titzer & Shirey, 2013).

Background of the Study

Many corporations in North America have a plan in place for leadership succession. When leaders decide to leave their positions, the loss of healthcare employees can impact patient care and productivity of the hospital (Holland, 2015). According to Waxman and Delucas (2014), the potential shortage of leadership in all settings provides a catalyst for healthcare systems to strategically plan and come up with a succession plan. Healthcare CEO turnover has increased from 14% in 2001 to 18% in 2017 (American College of Healthcare Executives, 2017). Turnover statistics have held steady at 18-20% for this CEO turnover (American College of Healthcare Executives, 2018). Looking closer at senior leadership, according to the American College of Healthcare Executives (2018), the next likely to leave after the CEO is the Chief

Financial Officer (CFO) at 40%, the Chief Operations Officer (COO) at 35% and the Chief Nursing Officer (CNO) at 26%. Other causes of leadership turnover include accelerating retirements, shortage of management-ready talent, no succession plan in place and a growing need for physician leadership (American College of Healthcare Executives, 2018). This very alarming rate of turnover and other factors mentioned above indicate that succession planning in healthcare is an vital process needed to fill leadership roles (Smith, 2018).

According to Rothwell, Jackson, Ressler, Jones and Brower (2015), the number of new workers entering the healthcare workforce is most likely to be below the amount of working baby boomers going into retirement. More Americans are living longer, especially past the age of 65, which will lead to an increase of 75% of senior citizens between 2010 and 2030 (Daniel & Smith, 2018). Succession plans help to fill the void that is left when positional leaders and nurses move on from the healthcare system. Healthcare system leaders can take advice and adopt leadership guidelines from corporate America, as many of the successful corporations have succession plans in place and collaborate to make new hire decisions (Allen, 2017). Healthcare systems and healthcare administrators, with foresight, could have a plan like this in place that allows identified potential leaders to train and learn how to become the leaders of tomorrow. As healthcare systems evolve over time and move towards a more business-like approach to running a healthcare system, the need for succession planning within the healthcare system reaches an elevated level (Allen 2017). Turnover is inevitable, due to personal factors and other job alternatives; frequent turnover requires a succession plan to prepare for a company's future (Leider, Harper, Shon, Sellers & Castrucci, 2016). Selecting the most qualified and the most prepared employee is a critical decision that impacts the future of a company (Hall-Ellis, 2015).

Statement of the Problem

There is a lack of documentation and few findings about how senior leaders plan for succession in larger, well-known healthcare institutions. The researcher sought to address the lack of documentation about succession planning by identifying leaders who have been in a healthcare leadership role (5+ years of Director level leadership in healthcare) and interviewing them about their experiences in planning for future leadership vacancies. The researcher plans to use the findings of the study to address the gap of succession planning, showing that healthcare organizations are using succession planning, but not always staying with the plan. The findings also showed that nursing has an established succession process in place and healthcare leaders more generally can benefit by emulating the way nursing prepares for leadership changes. Succession planning can be used in all aspects of healthcare succession planning. The focus of the study and problem being encountered is that hospital directors and leadership are not implementing successful succession planning best practices.

Purpose of the Study

The purpose of this research is to determine how succession planning is being used in three well-known healthcare settings in the central Pennsylvania region. The researcher gathered feedback/documentation about how these three healthcare organizations are implementing succession planning and using an administrative fellowship in their succession planning for leadership development in their organizations. Such fellowships are being offered at the Mayo Clinic and other leading healthcare organizations. The Mayo Clinic describes their program as: an administrative fellowship is a two-year program that is designed to fast track top graduate students into operations management positions (The Mayo Clinic, n.d.). The transition from

fellow to a formal leadership role is done through focused mentoring, assignments and leadership experiences throughout the Mayo Clinic and other healthcare organizations, such as Geisinger Health System. The researcher used one-on-one interviewing with three directors from three mid-size hospitals to learn how they are planning for succession in their positions. This one-on-one interview process generated nine one-on-one interviews.

Research Questions

The research was conducted to determine how and if leaders in these three settings are using succession planning for healthcare openings. This research was conducted to determine what tools and resources are being used by nine healthcare leaders in three well-known, central Pennsylvania healthcare systems settings to plan for succession. A descriptive study approach was utilized for this research. This approach is an observational study that helps to pinpoint patterns. The research questions that were answered are as follows:

- How do hospital directors at three mid-size hospitals describe their succession planning?
- What approaches, strategies, and tools do hospital directors describe using in their planning efforts?

Conceptual Framework

S.K. Collins and K.S. Collins (2007) are leading researchers on the topic of healthcare and succession planning. Collins and Collins (2007) have shown that successful planning can lead to leadership development. This type of planning can be critical for leader development in business settings and other organizations. Creating a successful succession plan for healthcare leadership means training programs can be put in place to develop and support the leaders of

tomorrow. The nursing industry may be able to model approaches that other healthcare leaders can use to plan for succession by incorporating practices found in other healthcare departments.

Shapiro and Gross (2017) reported that the elite theory, created by Robert Michels, was originally developed in the early 20th century. His theory is based on leadership research and focuses on the potential ability of a small elite group of any organization. The theory suggests that those individuals who are leadership material will rise to the top and provide needed direction to others. Succession planning can theoretically tap into this small group and help those potential leaders rise to the top and become positional leaders in healthcare.

The strength of the elite theory is that those who ascribe to it may have a plan in place to identify potential leaders to be prepared to replace a leader as the leader decides to move on from the company (Shapiro & Gross, 2017). This approach would allow for the healthcare organization to train for leadership replacement from within, or to grow their own. The small “elite” group that does rise out of the rest of the employees can be earmarked for leadership training and groomed to become leaders in the system.

Elite theory is a way for hospital leadership to look at succession planning in healthcare and the one reason that elite theory is not used more in healthcare is that succession planning and employee training is expensive at the front end (Rothwell, Jackson, Ressler, Jones & Brower 2015). Instead of a company spending money solely on a recruitment process, the organization can create a well-designed succession plan that can help the leadership team avoid a costly recruitment process designed to find a new version of the departing leaders (Hall-Ellis, 2015). The cost can be prohibitive and many non-profit healthcare systems do not have the money to invest in an organizational development department (Rothwell, Jackson, Ressler, Jones & Brower, 2015). The cost to recruit and train new employees can amount to 50%-200% of the

annual salary of the role that is being replaced (Ledier, Harper, Shon, Sellers & Castrucci, 2016). Not only is there a cost involved with setting up an organizational development team, there is a time investment as well. This time and money investment has the potential to prevent an organization from forming an organizational development department (Rothwell, Jackson, Ressler, Jones & Brower, 2015). The conceptual framework of this study is that successful planning for leadership development can help to eliminate excessive costs associated with leadership recruitment (Collins & Collins, 2007).

Assumptions

When looking at the purpose of the study, the researcher sought to determine the impact of succession planning in healthcare. Through personal experience and industry research, the researcher identified concerns about succession planning, such as whether there is funding for a department to develop a plan and if the organization even has a plan in place. When trying to find out whether these healthcare organizations do have a succession plan, an assumption by the researcher was that some would have them, but few of the healthcare organizations would utilize an administrative fellowship in their organization. There are some limitations with this case study. The first one is the directors' willingness to be truthful and willingness to share organizational information. The second limitation would be whether the directors were positioned to address the research questions.

Definitions of Key Terms

The following key concepts will be used for specific purposes of this study and the key concepts used can be defined as:

Administrative Fellowship – An administrative fellowship is a two-year program that is designed to fast track and transition graduate students/employees into operations management positions throughout the system (The Mayo Clinic, n.d.).

Career Ladder – Career advancement idea to enhance professional development. Allows the employee to move from entry-level positions to leadership roles (Nelson & Cook, 2008).

Elite Theory – When looking at large groups, there is a small group of leadership that rises to the top and leads and rules that larger group (Shapiro & Gross, 2017).

Geisinger Health System: A rural non-profit healthcare system that is in Danville, PA (Geisinger Health System, 2019).

Human Capital: Human capital is a term used to describe the value of employees who have skills, knowledge, and work experience to meet the organization's mission (Datt & Rivera, 2013).

Organizational Development (OD): OD is a way to help individuals and organizations improve by helping people function better and grow within an organization (Trepanier & Crenshaw, 2013).

Succession Planning: A strategy that includes the process and management that allows the organization to have the availability of talent to fill openings when needed (Marbury & Mayer, 2013).

Significance of the Study

The significance of the study is that findings from interviews with hospital directors can provide other healthcare leaders with approaches to use in their institutions and refine their role in succession planning. The researcher provided an in-depth description of approaches, strategies and tools used by healthcare leaders in the case study. Those approaches will include

the newly formed administrative fellowship programs that are starting to become available at healthcare systems. According to the Geisinger Health System website, succession planning is a program that is designed to fast track and transition graduate students/employees into leadership positions, such as operations management positions throughout the system (Geisinger Health System, n.d.). The research will look at the impact and the role of an administrative fellow has with succession planning and if the administrative fellow is being used for only operations positions or are, they are using for leadership positions as well. The literature includes research findings that the three healthcare systems are not currently utilizing in their succession plans.

Overall, the study examines how healthcare leaders can take the elite theory and use that theory to inform succession plans for healthcare. Specifically, the study explores the impact of succession planning and what impact that administrative fellowships have on a healthcare organization. Finally, the research will look at what tools can be used in preparing for vacancies in healthcare leadership positions.

Conclusion

Chapter 1 introduced the purpose of the study which is documenting how hospital directors plan for succession of others into their roles. Also included in the chapter is the statement of problem, research questions, conceptual framework, assumptions, significance and this conclusion. Planning is important for an organization and healthcare is no different. Healthcare CEO turnover has increased from 14% in 2001 to an elevated level of 20% in 2013 (American College of Healthcare Executives, 2017). Titzer and Shirey (2013) stated that those leaders who use succession planning strategies, when looking at healthcare leadership shortages, can help reverse the negative impact (financially and in the eyes of the stakeholder). Gray (2014) also stressed that healthcare leaders should address the upcoming retirement of

experienced healthcare leaders by developing programs to develop new leaders to step in and take their spot in the healthcare organization. Having a 10-year plan, healthcare leaders can maximize succession planning efforts by having an improvement strategy (Gray, 2014). This research is important to healthcare organizations as it provides awareness about succession planning and strategies used to develop them.

Chapter 2

Review of the Literature

Succession planning is a structured process that involves the identification and the training of an individual to take over a role once it is vacated (Sverdlik, 2012). A problem healthcare is facing is the lack of succession planning for healthcare leadership. This lack of planning can impact patient care and increase hospital costs in the area of \$200-500 thousand per year for leadership roles (Titzer & Shirey, 2013). The research questions have been addressed in chapter one. The literature review search included peer-reviewed journals, books and organizational websites. Most of the references have a publication date between 2013 and 2018, which satisfies the guideline of publications being within a five-year period.

An exploratory review of the research collected was conducted by the researcher to provide an in-depth description of the literature. The knowledge gained to support the study included the current methods being used in healthcare to combat leadership turnover and inform how the leader is replaced. The literature also helped to develop the research questions and reinforce the importance of healthcare succession planning. This chapter is organized into eleven sections. The sections are: methods and techniques, succession planning, changing landscape of senior leadership, leadership, relationship between workforce planning and succession planning, vacant positions, investing in employees, aging populations and nursing, which includes nursing succession planning and nursing evidence-based succession planning.

Methods and Techniques

A computer search was conducted using the University of New England library, Geisinger Health System's health science library, and the University of Pittsburgh Medical Center (UPMC) library. Keywords used in the search include, succession, succession planning,

collaboration, elite theory, turbulence theory, human capital, signaling theory, administrative fellowship, fellowship, Geisinger Health System, Mayo Clinic, succession planning and collaboration, nursing, and healthcare. More than 250 articles were identified to have at least one of the keywords. Upon further review, more than 200 articles were eliminated that were older than five years, or that did not relate to healthcare, or the goals of the study. The remaining one-hundred articles produced relevant literature regarding the use of succession planning and healthcare, which included nurse succession planning and physician succession planning. These one-hundred articles were then placed in chronological order, and then organized according to a focus on healthcare succession and nurse succession planning.

This chapter represents a summation of topics related to succession planning in healthcare. The following themes will be addressed:

- Changing landscape of senior leadership
- Succession planning
 - Succession planning in business
 - Succession planning in healthcare
 - Succession planning in nursing
- Other theories that may impact succession planning

Changing landscape of senior leadership

The healthcare workforce is growing each day, while the level of baby boomers in the workforce has begun to decrease (Barr, 2014). Barr (2014) examined baby boomers' rapid approach to the retirement age of 65, and how this trend impacts the workforce. According to Barr (2014), about three million baby boomers will reach retirement age every year for the next 20 years. The last generation of baby boomers will reach retirement age, in 2029, and the

number of Americans 65 or older will reach more than 71 million; that is a 73% increase from 2011 (Barr, 2014).

Succession Planning

Healthcare leaders need to remain focused on problems facing healthcare, and not only on industry trends (George, Dahlander, Graffin & Sim, 2016). Leadership should be aware of their employees and the company's turnover, as vacant positions can impede the daily flow business by leaving voids in task completion (Brunson, 2015). Titzer and Shirey (2013) determined that the healthcare industry and its leaders have insufficiently planned for leadership changes. Their findings specifically determined a shortage in nursing leadership, which was reinforced by evidence that limited proactive planning is taking place to meet these demands (Titzer & Shirey, 2013).

Leaders involved in succession planning should recognize the evolving and ongoing nature of the learning process. As such, leaders should have certain characteristics in order to maximize success. (Delmatoff & Lazarus, 2014). Delmatoff and Lazarus (2014) concluded that the most important characteristic of a great leader is emotional intelligence. According to the researchers, emotional intelligence allows the leader to have good self-awareness, which is important when leading a team (Delmatoff & Lazarus, 2014). Further, leaders need to have the ability to motivate others, develop employees and have an influence on those employees (Allio, 2013). These abilities, along with emotional intelligence, can facilitate leadership in determining the most important strategies for successful succession planning (Sherrod & Holland, 2013). A lack of ability on the leader's part to carry out a succession plan threatens the organization's opportunity to achieve a competitive advantage, and potentially limits sustainability in the

marketplace (Toterhi & Recardo, 2013). The next section discusses succession planning and how nursing leadership utilizes this approach.

Relationship between workforce planning and succession planning

Many existing healthcare managers and directors, especially in the facilities departments, will be retiring in the next 10 years. However, it may take more than 17 years of full-time work experience to prepare senior managers for similar roles in healthcare (Call, Sullivan & Smithwick, 2018). The goal of succession planning is to identify critical positions in the healthcare organization and to subsequently prepare and groom employees who can fill these roles (Turner, 2019). Succession planning assists in reducing organizational turbulence often associated with leadership change. Such turbulence can be avoided by proactively developing successors for key healthcare leadership positions over time (Turner, 2019). Succession also has the potential to motivate current employees due to the perceived ability to professionally advance (Turner, 2019). Workforce planning, succession planning, and management in healthcare are closely linked. Thus, building a strategic workforce plan to forecast future leadership demands can provide facilitative and protective mechanisms for the organization's future (Turner, 2019).

Although succession planning allows for an organization to have continuity by filling those critical leadership roles with people who are already committed to the organization (Turner, 2019), succession planning must also have a well-defined process and be used as a way to promote from within (Jones, 2019). While succession planning is a process to deliver and develop leaders that meet organizational needs (Turner, 2019), succession planning and workforce planning can also ensure talent is in full supply for the organization (Turner, 2019).

Vacant positions. Leaders can prepare for potential turbulence by being aware of the organization's environment (Brunnson, 2015). Additionally, leaders can prevent the slowing of

business progression by identifying and training current staff for future leadership positions (Soewignyo & Soewignyo, 2015). This practice can increase opportunities to back-fill leadership positions without interrupting the daily operations of business and can possibly reduce financial concerns (Taj, 2016). Taj (2016) adds there is the potential to limit interruptions to productivity when filling positions with a succession plan in place. Holland (2015) added that retention measures and succession plans can also function as investments in future leadership. The pre-identified shortage of healthcare workers can lead to disruptions of daily hospital operations and prohibit the needs of the community by not being able to deliver high quality care (Waxman & Delucas, 2014).

Investing in employees. U.S. companies spend more than \$356 billion dollars annually on employee training and education (Beer, Finnstrom, & Schrader, 2016). Strategic investment in employee development can help companies solidify their futures by increasing competitiveness of their employees and eliminating the idea of finding the “perfect fit” for leadership roles (Oladapo, 2014). Although succession planning does require time, money and resources, strategic planning allows a business to capitalize on a return in the investments provided to employees and to retain those employees by allowing the employees to grow within the organization (Trepanier & Crenshaw, 2013). An organization can assess its current staff and determine who has the skills, knowledge, experience, character, and motivation to move into a leadership role (Crandell, 2015). Beer, Finnstrom and Schrader (2016) identified six common occurrences that prevent organizations from benefitting from employee education: Unclear direction, lack of teamwork, top down approach, lack of coordination across the business, inadequate leadership time and attention, and employees’ fears of reporting issues to leadership (Beer, Finnstrom & Schrader, 2016). Gray (2014) adds the components of successful succession

planning to include: successor identification, ability to compete for the job, capabilities, talent and the ability to be trained. Leadership can invest in current employees and build their capabilities for the future (Oladapo, 2014).

The negative side of this approach to leadership development is that succession planning and employee training is expensive (Beer, Finnstrom, & Schrader, 2016). Leadership development, however, is important in planning for the future because companies can increase competitiveness of their employees (Beer, Finnstrom, & Schrader, 2016). Rothwell, Jackson, Ressler, Jones and Brower (2015) found that costs associated with an organizational development (OD) department can be prohibitive to some organizations, and some organizations do not have the money to invest in an organizational development department. Many smaller healthcare organizations may not be able to fund an organizational development department (Rothwell, Jackson, Ressler, Jones & Brower 2015). This creates a need for ways to develop leaders from within healthcare, even among smaller groups. OD departments can determine who in the current staff has the ability and skills to become a leader and reduce the amount of money spent on candidate searching (Crandell, 2015).

Aging population. When looking at succession planning, questions about why an organization needs to plan may occur. With more than a 75% increase in senior citizens by 2030, many of whom are living past the age of 65, creates a demand for more healthcare (Daniel & Smith, 2018). Senior citizens will experience a 75% increase in their population between the years of 2010-2030. Consequently, they will experience an increase of chronic illness (Daniel & Smith, 2018). The increase of baby boomers and their need for healthcare has also contributed to the rate of turnover in healthcare (Cox, Willis, & Coustasse, 2014). Leider, Harper, Shon, Sellers and Castrucci (2016) found that 40% of the current healthcare workforce is expected to

retire or change careers by 2020. Personal factors such as age, education, dependents, and health status also play an important role in turnover (Leider, Harper, Shon, Sellers & Castrucci, 2016). The expectation of expansion in healthcare needs demands that workforces be innovative and entrepreneurial (Nambisan, 2016). This innovation includes preparing for the future and preparing employees for leadership roles to meet the needs of the aging population (Nambisan, 2016).

Succession Planning in Business

A key area to examine in the literature is how the business sector plans for replacement of key individuals in the workforce. Barr (2014), and Durst, Vaduz, Wilhelm, and Liechtenstein (2012), investigated how businesses, outside of healthcare, plan for succession. One approach the authors focused on includes the importance of succession planning to replace key leaders as turnover of leadership positions occur. Trepanier and Crenshaw (2013) found that the growth of the aging population is going to impact healthcare. The findings show that there will be more people retiring from the workforce, thus creating the need to replace leaders who move on from the company (Trepanier & Crenshaw, 2013). Barr (2014) stated that succession planning should have an approach that allows for the organization to be aware and anticipate needs of the organization before a leader decides to retire or quit. When thinking of business and recruitment of talent, organizations must also think of the Human Resources department and employee development. Human resources also include organizational development and the organizational development department which can support leaders to address the upcoming retirement of tenured employees (Gray, 2014). The organizational development department is responsible for the training of employees and developing new leaders with the use of succession planning (Gray, 2014). Healthcare leaders must plan for the turbulence business encounters with turnover, and

they can do this by investing in current employees and developing them to take over vacant leadership roles (Hunt, 2014).

Succession Planning in Healthcare

Kim's (2012) findings regarding effective succession planning in healthcare, and how succession planning enhances the ability to transition from one leader to the next, reinforces previously discussed literature. According to Kim (2012), leadership succession planning is defined as the deliberate use of mentoring and coaching of employees. Kim (2012) also found that it is important to groom individuals inside the organization who have been identified as having the potential talents and skill sets to advance when openings occur.

A healthcare organization and healthcare leadership must come up with strategies for a succession plan to remain viable and remain sustainable (Marbury, 2012). Titzer, Shirey, and Hauk, 2014 indicated that talent management should offer career development and succession planning to produce positive results in healthcare. DeVos and Dries (2013) found that organizational leadership should recognize and respect the worth and value that an employee brings to the company and the advantage that employee can offer the organization by training that person for internal career advancement. Marbury and Mayer (2013) posit that by the year 2020, any organization that fails to have a succession plan in place will cost the organization up to \$21 million for human resource development. The idea of having a succession plan and fully implementing the plan can help motivate and develop current employees (DeVos & Dries, 2013). Otherwise, without a proper succession plan in place, a healthcare organization can be stuck in recruiting mode and be unable to fill an open leadership position in a timely manner, and can cost an organization millions of dollars, (Dyess, Sherman, Pratt, & Chiang-Hanisko, 2016).

Succession planning in nursing

Nursing leaders are a critical link in healthcare organizations as they are the liaison between positional leadership and nurses (Jones, 2019). Nursing shortages create a need to hire entry-level nurses, which prompts a critical need for strategy around identifying and developing these staff persons into middle management positions (Jones, 2019). Nursing leadership, which falls under the healthcare leadership designation, has been proactively developing ideas about how to plan for future vacancies in nursing (Waxman & Delucas, 2014). Nursing has a history of involvement with succession planning due to the nursing profession's difficulty with hiring nursing leaders in the past (Trepanier & Crenshaw, 2013). Waxman and Delucas (2014) concluded that nursing leaders are leaving healthcare for other professions. Catalysts for this departure include: working conditions, staffing issues and challenges with work-life balance (Waxman & Delucas, 2014). Denker, Sherman, Hutton-Woodland, Brunell, and Medina (2015), Titzer and Hauck (2014), Titzer, Tooley, Hall and Shirey (2013), Trepanier and Crenshaw (2013) each confirm succession planning can be successful in nursing. Additional research by Fibuch and Van Way (2012), Kim (2012) and Shipman (2007), further support the efficacy of succession planning within nursing leadership.

According to Titzer and Shirey (2013), the potential leaders in healthcare organizations are not always readily available and the need for leaders continues to grow. Currently, the lack of development of nurse leaders stems from a lack of focus by hospital leaders (Mensik & Kennedy, 2015). Too often, organizations rely on older methods of searching for leaders instead of growing their own leaders within the institution (Titzer & Shirey, 2013). Correspondingly, Titzer and Shirey (2013) concluded that an organization must be committed to and provide the proper resources for successful succession planning. Holland (2015) found there is a lack of

strategic planning for workforce planning and development and found that there needs to be an investment in future nurse leaders. The development of leadership can be addressed by creating a pipeline of talent that an organization can access as needed. For example, Holland (2015) examined nurses' self-perceptions of the growth and development of their personal leadership and management abilities after participating in a leadership development program. The study concluded that participants indicated significant growth in leadership and management skills as a result of participating in the experience. Post-test evaluations revealed that participants viewed the development experience as beneficial, and at the time of the study 100% of the participants remained employed at the same facility, with 73% of respondents having advanced in leadership roles (Titzer, Shirey & Hauck, 2014). Titzer, Shirey, and Hauck (2014), Mensik & Kennedy (2015), and Holland (2015) found that succession planning and training current nurses for future leadership roles in the healthcare organization is beneficial to the organization. This type of planning and implementation of training has granted nursing leadership an opportunity to cultivate leaders from within the organization (Titzer, Shirey & Hauck 2014). Collaborating the efforts of recruitment and nursing leadership allows a healthcare organization to implement a succession plan to grow their leadership pipeline (Holland, 2015).

Evidence based succession planning

Moreno and Girard (2019) examined nursing leadership and how the healthcare industry faces challenges in retaining a supported professional environment. The Institute of Medicine (IOM) and the Robert Wood Foundation proposed the use of evidence-based leadership as a model for creating a desirable work environment (Moreno & Girard, 2019). Filling positions has been an ongoing challenge for some healthcare organizations. Moreno & Girard (2019) calculated that it requires 215 days to fill patient care manager positions, and 53-110 days to fill

an RN position. Remaining healthcare jobs were found to stay unfilled beyond 90 days (Moreno & Girard, 2019). The researchers also focused on developing leadership competency and implementing customized leadership development plans based on a philosophy that nurses are more than nurses, they are leaders, providers, and scientists who have the optimal potential to drive patient outcomes.

Other theories that may impact succession planning

Shapiro and Gross (2013) found that many organizations experience some degree of turbulence when changes take place in the workforce. Shapiro and Gross (2013) describe turbulence theory as consisting of four stages. Light turbulence deals with ongoing issues that all employees are aware of; Moderate turbulence is when there is a widespread awareness of the issue; Severe turbulence occurs when there is a feeling that a crisis is about to happen; Finally extreme turbulence occurs when there is damage to daily and normal operations of the organization (Shapiro & Gross, 2013).

Turbulence Theory, authored by Igor Ansoff (2013), proposes four stages describing how each organization experiences turbulence in one way or another: Depicted in four stages, Ansoff's (2013), theory Karim, Carroll, and Long (2015) found that organizations tend to postpone structural alignment during times of turbulence. The strength of this theory is that a healthcare system can plan for turbulence when a leadership position is preparing to enter vacancy by having a succession plan in place leadership can look to current employees to fill the anticipated void (Hall-Ellis, 2015).

A potential challenge offered by turbulence theory is that an organization may not fully understand the level of turbulence until turbulence actually occurs (Shapiro & Gross, 2013). Planning and developing succession plans may decrease the level of turbulence seen by the

organization. During times of turbulence, decision makers often delay restructuring and hiring until they can effectively process the information and determine how the changes will affect the company (Karim, Carroll & Long, 2015). Additionally, turbulence is not felt to the same degree by everyone who works in an organization (Karim, Carroll & Long, 2015). This can mean that some experience a degree of crisis and others in the organization feel no crisis at all.

Human capital theory

Human capital theory focuses on skills, knowledge, and the abilities of individuals (De Vos & Dries, 2013). Harris, Pattie and McMahan (2015) describe human capital theory as having the advantage of normally being one-sided, either from the perspective of the individual, or that of the organization. As such leaders can incorporate human capital to maximize effective succession planning. Human capital theory supports the idea of addressing employees' capabilities for an organization to be able to maintain a competitive advantage, such as planning for leadership vacancies (DeVos & Dries, 2013). Since employees are aware of their skills and capabilities, the employee and the organization can catalyze those skills toward progression of the employee's career, such as moving into a leadership role (Clark & Martorell, 2014).

Approaches to succession planning

There are two pathways by which healthcare systems are preparing for leadership changes (Rothwell, Jackson, Ressler, Jones & Brower, 2015 and Trepanier & Crenshaw, 2013). The first is by having leadership development courses offered through the health system (Rothwell, Jackson, Ressler, Jones & Brower, 2015). The availability of leadership development courses allows a healthcare system to design and develop courses that will assist in the preparation of future leaders for their system (Rothwell, Jackson, Ressler, Jones & Brower,

2015). If a system already has potential leaders in place, the organization can train these employees to become future senior leaders.

The second approach that healthcare systems are using for succession planning is preparing for leadership changes. A common approach among business and education sectors is to develop a succession plan that identifies employees who demonstrate leadership qualities (Trepanier & Crenshaw, 2013). A successful succession plan could allow these employees the opportunity to train for a future leadership role within the organization. This allows for a quicker and easier transition of leaders.

The key to succession planning is to have an internal business strategy that helps to identify internal candidates that are available and qualified to assume leadership positions that become available once a vacancy occurs (Trepanier & Crenshaw, 2013). Kim (2012) observed that strategic planning has been in place in healthcare due to the ongoing nursing shortages. Health systems across the country have had to develop succession plans to help fill the need of nurses who decide to leave the system (Kim, 2012).

Nursing shortages that are seen across the country present a crisis and have prompted the need to develop a plan for recruitment. All health systems need nurses. When nurses decide to leave, they take with them the knowledge they have gained throughout their time in the system (Titzer, Shirey, & Hauck, 2014). Having a plan and direction in place, the departing nurse can pass along some of their wealth of knowledge to new and upcoming leaders in nursing. According to Titzer, Shirey, and Hauck (2014), even if there is not a succession plan in place, there should still be leadership development occurring in an organization. Trepanier and Crenshaw (2013) suggest there are benefits to shifting toward a business approach to running a health system. Citing that succession planning and collaboration within the system can lead to

advantageous outcomes. However, there are key considerations that a healthcare system leader must consider when putting together a succession plan. According to Smith (2018), healthcare organizations should routinely seek out competitive information from directors and managers and assess the talent that is currently available within the organization.

Supporting Theories

The following theories of elite theory, signaling theory and turbulence are being utilized to inform this study. The aforementioned theories similarly relate themes of leadership, talent and the premise of using training to advance one's career. To this point, since each organization has specific needs when it comes to succession planning, and each organization can experience some sort of turbulence, understanding elite theory, signaling theory, and turbulence theory contributes to holistic understanding of the strengths and opportunities associated with succession planning.

Human capital theory focuses on the skills, knowledge, and abilities that each employee possesses (DeVos & Dries, 2013). An organization can leverage the development of human capital by increasing the skillset and experience of each employee (Harris, Pattie & McMahan, 2015). This increase of human capital allows the organization to increase the number of capable candidates for future leadership vacancies (Harris, Pattie & McMahan, 2015). Organizations should prepare career-minded employees for the opportunity for career advancement (Alter, 2013) and the succession plan should align with mission and strategy of the company (Choi Sang & Perumal, 2014). By investing in their own employees, an organization can see more favorable employee satisfaction, positive financial impact and productivity outcomes (Ismail, Adnan & Bakar, 2014).

Elite theory refers to the fact that in every business there is a group of employees who have risen above other employees and are ready to replace leaders whom have decided to move on from the company (Kahn, 2012). This approach would allow for the healthcare organization to train for leadership replacement from within, or to grow their own. Specified individuals can be earmarked for leadership training and cultivated to become leaders in the system (Kahn, 2012).

Signaling theory supports the idea that employees are internal stakeholders of their own organization and that they desire career guidance, career growth and career opportunities (Harris, Pattie & McMahan, 2015). Each employee has the awareness of their own capabilities that they can control, and this allows them to seek opportunities that play to these strengths (Clark & Martorell, 2014). Many organizational leaders focus on individuals that desire to advance professionally and this human capital is an investment for the healthcare organization (Harris, Pattie & McMahan, 2015). Healthcare leaders who are responsible for succession planning should create career paths that offer clarity and that allow the employee to understand their own career intentions (Granados & Gupta, 2013).

Turbulence occurs in all organizations (Shapiro & Gross 2017), including healthcare. Not only can a healthcare organization properly plan for leadership vacancies and train potential leaders, the training and preparation can also help to bring down the level of turbulence seen by the organization during the change (Shapiro & Gross 2017). A properly prepared organization can help to eliminate high levels of turbulence by effective planning (Shapiro & Gross, 2017).

Conceptual Framework

S.K. Collins and K.S. Collins (2007) are leading researchers on the topic of healthcare and succession planning. Successful planning for worker shortages, such as succession planning,

can lead to leadership development (Collins & Collins 2007). This type of planning can be a critical business strategy, but is also expensive. The cost to recruit and train new employees can amount to 50%-200% of the annual salary of the role being replaced (Ledier, Harper, Shon, Sellers & Castrucci, 2016). When creating a succession plan for healthcare leadership training programs, such as management development programs, can be put in place that train the leaders of tomorrow (Collins & Collins 2007). Healthcare leaders may consider the example of nursing when creating a plan for succession in healthcare, as nursing leadership has traditionally demonstrated planning to replace a leader when an individual decides to move on from the company (Jones, 2019). This approach would allow for the healthcare organizations to train new leaders from within the organization, which is sometimes called “grow their own” (Jones, 2019). Incorporating this idea, an organization could keep turbulence to a minimum, as opposed to the organization experiencing a high level of turbulence from lack of planning.

Chapter Conclusion

Business sector organizations have a demonstrated history of implementing succession plans. The research into healthcare systems shows that there is a need for healthcare systems to implement a succession plan for positions in healthcare leadership roles. Without a succession plan, a healthcare organization can be caught in a bind and short staffed, which can lead to severe turbulence. Turbulence can include lost revenue, decrease in customer satisfaction, and a decrease in employee morale (Titzer, Shirey, & Hauck, 2014). These findings support the need to continue researching the topic of succession planning in healthcare systems.

Chapter 3

Methodology

The purpose of this qualitative cross-case study was to explore, analyze, and contrast the succession planning strategies of hospital leaders and their current plans with succession planning for senior leadership. The respondents of this research were employed in three mid-size healthcare organizations in central Pennsylvania. The interviewees included three leaders who had amassed 5+ years of leadership experience at the Director level or higher, and who had demonstrated experience in succession planning. The researcher conducted one-on-one interviews with hospital leadership using an open-ended semi-structured approach. As a hospital administrator, the researcher's participation in succession planning has provided insight into the idea of succession planning. This insight, along with the researcher's experience in current and previous professional roles, provided the rationale for the topic of research.

Qualitative research is an approach for exploring and better understanding how organizations explore a problem. Qualitative approach also includes research that focuses on obtaining data through open-ended and conversational communication (Nassaji, 2015). The researcher's goal was to determine not only the perspectives of healthcare leaders as they relate to succession planning, but also the personal motivations for their perspectives. Semi-structured one-on-one interviews represent the predominate method of data collection. All interviews were conducted via phone by the researcher and with three senior healthcare leaders employed by three mid-sized healthcare organizations. This technique provided the researcher an opportunity to gather specific information through a conversation (Nassaji, 2015) about succession planning that is being implemented by current leaders in healthcare.

Conducting a study within one's own organization means the researcher possesses insider knowledge, which can be an asset, but he is also be prone to biases about the study. One approach the researcher engaged to mitigate bias is referred to as reflexivity. Reflexivity is a method of identifying and acknowledging personal bias (Fassinger & Morrow, 2013).

The elite theory, originally developed in the early 20th century, is one theory that would help explain how to identify employees who would be a great choice to move into a leadership role (Highley, 2010). The way the elite theory informs the study is the idea that, within any group, a small elite rises to the top and rules (Highley, 2010). Highley (2010) showed that elites would consist of the most talented individuals, thus allowing for the most qualified to become leaders in healthcare. When looking at turbulence theory, there are four levels of turbulence that are described in the theory (Shapiro & Gross, 2013). Turbulence theory allows the organization to gauge and plan for the severity of an issue such as succession planning in healthcare (Shapiro & Gross, 2013). Using this theory allows the organization to determine predictions, explanations of the issue and find ways to solve the issue at hand. Shapiro and Gross (2013) define this theory as any pattern of fluid motion mention that there is a level of disturbance. Shapiro and Gross (2013) have stated that turbulence theory can be broken down into light turbulence, moderate turbulence, severe turbulence and extreme turbulence.

Every organization experiences some type of turbulence and this turbulence can create havoc on an organization and its employees (Shapiro & Gross, 2013). Shapiro and Gross (2013) have provided definitions of the types of turbulence in their writings. The first type of turbulence is light turbulence, the second type of turbulence that can exist is moderate turbulence (Shapiro & Gross, 2013). Severe turbulence is the third and the fourth and final type of

turbulence is extreme turbulence (Shapiro & Gross, 2013). The chart below describes each level of turbulence, as described by Shapiro and Gross (2013):

Type of Turbulence	Definition
Light Turbulence	This type is associated with ongoing issues that offer no disruption in the normal work environment, little or no disruption
Moderate Turbulence	Widespread Awareness of the issue
Severe Turbulence	Beginning to feel as though a crisis is about to happen. Fear for organization
Extreme Turbulence	Damage occurs to organizations daily and normal operations

Setting

Healthcare leaders that were the focus of this study were based in three central Pennsylvania hospitals. These healthcare systems are well-known and have encountered recent leadership changes, both in nursing and in administrative openings. Each participant in the interview process possessed five or more years of director or above hospital leadership experience in these selected hospitals. The setting for the one-on-one interviews and survey research was those healthcare organizations and interviews were conducted by phone.

The researcher made phone calls to the interviewee, at the healthcare location, from the office of the researcher. Phone interviewing was an appropriate data collection methodology as it accommodated all involved professionals, due to physical location of the healthcare professionals. The study included healthcare leaders located across the central regions of Pennsylvania. Leaders were chosen by their healthcare leadership experience and success in their healthcare organization, along with their consent to participate.

The research questions guiding this study are:

- How do hospital directors at three mid-size hospitals describe their succession planning?
- What approaches, strategies, and tools do hospital directors describe using in their planning efforts?

The researcher's potential knowledge of the participants involved in the study is purely professional, as the researcher has been working in healthcare for many years. These individuals are healthcare executives and as leaders, they are known throughout the healthcare industry and for their leadership involvement in their healthcare organization. Each healthcare professional was chosen because they have extensive time in a leadership position (five or more years), which supports their healthcare knowledge and experience in developing leaders for healthcare organizations. Each of the professional one-on-one interviews was conducted by phone.

Participants

Initially, the researcher reached out to healthcare leaders with more than five years of leadership experience, to ask them to participate in the one-on-one interviews. Once the healthcare leader agreed to participate, the researcher generated a letter of interest and sent it to the healthcare leader. Those that did not wish to participate in a one-on-one interview were removed from consideration.

One criterion for participation in this research was that healthcare leaders have five or more years of senior level (director or above) leadership experience. The participants each hold vast knowledge of healthcare and recruiting for senior level positions within their healthcare organization. The participants were chosen based on their healthcare experience, a minimum five years of healthcare leadership, and their knowledge of the healthcare market. Each participant has been in a leadership role that has an impact on leadership development and hiring

within their organization. Each healthcare leader is known in the healthcare industry from the work they have completed to improve healthcare and patient care.

Data saturation is important for research (Samantara & Sharma, 2015) and the researcher has reviewed previous research to establish a set number of participants that that were needed to conduct a case study. Sample size varies and is dependent upon reaching data saturation for qualitative studies. The importance of having enough participants from which to gather data for each question and the number of participants needed to obtain saturation was found by examining the work of Crosby (2016). Qualitative researchers rely on repeating themes. Thus, the researcher conducted one-on-one semi-structured interviews with three healthcare leaders from three different healthcare organizations, resulting in data sources from nine different healthcare leaders (Cleary, M., Horsfall, J. & Hayter, M, 2014).

Research Design

A multiple case study design was used in the research to answer the question of how healthcare leadership is using succession planning to help with planning for future leadership vacancies. Abma and Stake (2014) explained that the use of a case study allows the audience to have a better comprehension of the topic being studied. The use of multiple case studies allows for gathering more information about ideas, such as succession planning (Stake, 2013). The use of semi-structured interviews that use open-ended questioning allows the participants an opportunity to elaborate more on the idea of succession planning (Abma & Stake, 2014).

Data

The following steps were taken upon the completion of the one-on-one study phase:
Criteria for participation:

- Individual interview for three healthcare leaders from three different healthcare organizations, with five years or more of leadership experience.

Protocol

- Interviews to be conducted by phone.

An email was sent to invite healthcare leaders who indicated an interest in participating in a one-on-one phone interview. Once the healthcare leader agreed to participate verbally or in writing, the respondent was sent a letter of interest that outlined informed consent to their willingness to be part of this research. Interviews took place individually and were conducted by phone. Prior to the data collection, all participants were provided with the study's definition of key terms, in case a term was used in the interview that was not familiar to the participant. The one-on-one interviews were conducted by phone and answers were recorded and then analyzed. During the one-on-one interviews, the researcher used a digital recorder to ensure the accurate capture of all data discussed during the interview.

The researcher employed a semi-structured interview style to guide the interviews. A semi-structured interview style is a common data collection method (Kallio, Pietila, Johnson & Docent, 2016). The style of data collection has been shown to be both flexible and versatile (Kallio, Pietila, Johnson & Docent, 2016). One of the main benefits of using a semi-structured interview is it allowed a degree of control over the interview and provided an opportunity to explore different topics that may not have been pre-planned. This format also allowed the researcher to keep the participants on-topic during the interview and to remain focused. Finally, semi-structured interview style allows for control of the time used during the interview by having prepared questions (Kallio, Pietila, Johnson & Docent, 2016).

A semi-structured approach allows the researcher to set up a general interview structure that showed the topics and discussion to be covered and the questions to be asked (Drever, 1995). This structure also allows the person being interviewed to have some flexibility on the topics they were discussing and what they were able to say (Drever, 1995). For each interview, the same open-ended questions were asked of everyone, a common practice when interviewing a small number of respondents. This approach ensured each interviewee was presented with the exact same questions and in the same order (Drever, 1995).

Analysis

Methodological triangulation was utilized to obtain multiple perspectives from the healthcare leaders, as opposed to singular perspectives, to examine the research topic (Denzin 1978). Pelto (2017) stated that data collected during the interview process with healthcare leaders were gathered and analyzed by the researcher to offer and compare the participants' own accounts. Interviews provided plenty of text and to ensure what is most important was captured, the themes and patterns of the text were brought out (Bloomberg & Volpe, 2012).

Transcripts of the interviews were coded, and coding allowed the researcher to assign a symbol or specific topic for a piece of data that was collected. Thematic coding is one of the most crucial pieces of qualitative research (Basit, 2010). The data consisted of interview transcripts from the one-on-one interviews. The researcher used QDA Minor, a qualitative text analysis software, to import and analyze the interviews. This QDA Minor program allows the researcher to import the interview transcripts and set up the analysis. The QDA Minor program assisted the researcher in identifying trends and themes from the interview transcripts. This program helped the researcher to develop the descriptors and themes for each category (Bloomberg & Volpe, 2012). The researcher also transcribed the interviews by hand as well as

coded the transcripts to ensure accuracy of the QDA Minor program. For data analysis the Bloomberg and Volpe (2012), methodology was employed:

Step 1 – Review and explore data – Identify the main ideas

Step 2 – Re-read and examine data – Coding

Step 3 – Report findings

Step 4 – Interpret findings

The researcher observed a one-week break in-between coding sessions in order to revisit the first coding results to ensure consistent coding. The second round of coding was used to reconfigure the first set of coding to allow more meaningful data to emerge (Basit, 2010). Coding also allowed the researcher to summarize and condense the data (Basit, 2010).

Member checking was utilized to help improve the accuracy and validity of the transcripts. During the member check, interviewees were provided with the collected data and interpretations. Respondents were able to confirm the credibility of the information (Creswell & Miller, 2000). The researcher then asked participants if the themes and categories made sense to them, and if the overall findings were realistic. This action adds credibility to the study (Creswell & Miller, 2009).

The open coding used in this research, known as the inductive approach, allowed the researcher to break down trends in how leaders are using resources for succession planning (Basit, 2010). The inductive approach is used for analysis of qualitative evaluation data and can help to condense the raw textual data into a summary format (Thomas, 2006). The inductive approach also allows the researcher to establish clear links with the objectives of the research and the findings from the data (Thomas, 2006). Further inductive reasoning allows for a

systematic set of procedures to allow for analyzation of the data and can facilitate the reliability and validity of the findings (Thomas, 2006).

Coding allowed the researcher to learn how the leaders view how their resources are working in succession planning in comparison to what literature suggests for healthcare succession planning. Coding also allowed the researcher to organize data on how healthcare organizations are using succession planning. The use of an administrative fellowship by an organization was also investigated regarding whether a fellowship is being used or not used in succession planning. Finally, coding assisted in determining other methods being used in succession planning that may not have been explicit (Basit, 2010).

The design of this research is a case study. A case study is a viable approach when there is a small amount of cases to be used (Seawright & Gerring, 2008). A case study is an intensive study of a single idea that looks to generalize that idea across a larger set of ideas (Gerring, 2004). The following was completed:

One-on-one phone interviews of healthcare leaders.

Participant Rights

Protecting the rights of the research participants is a primary ethical consideration. To achieve this goal, participants in the study were assigned pseudonyms of Leader A, Leader B, etc. The researcher is committed to protecting the rights and confidentiality of the research participants. The researcher eliminated any details that would identify the individual used in the data collection, analysis, interpretation or communication of findings. Organizations also were not named to protect the identity of each participant. Informed consent was also confirmed for each participant and all files were deleted upon completion of the study.

Limitations

The researcher has identified the following limitations:

1. Healthcare leaders' willingness to share information about their organization
2. Participants can decide not to take part in the interview
3. Potential lack of dialogue during the interview

Delimitations

One of the delimitations of the study is that the timeframe of the completion of the research was slated for a prescribed period of time. This study requires human judgement for the detection of the topic, which then requires the researcher to be familiar with the concepts that are contained in the data.

Chapter 4

Results

The purpose of this qualitative case-study was to explore the succession planning techniques used by three hospital leaders in the northeast. The researcher sought to gain a better understanding of how healthcare leaders are planning for leadership vacancies in their hospitals. This study addressed two research questions: (a) How do hospital directors at three mid-sized hospitals describe their succession planning? and (b) What approaches, strategies, and tools do hospital directors describe using in their planning efforts?

The data for this study came from semi-structured one-on-one phone interviews of hospital leaders with five or more years of Director level experience or higher). During the interview process, the nine healthcare leaders discussed and identified the strategies that are currently being utilized in their hospitals to plan for leadership vacancies. The interview results came from the analysis of the transcripts that were recorded during the one-on-one interviews over a four-week interview process. In total, the researcher conducted nine interviews to gather data on succession planning in healthcare.

The healthcare systems that were used in the research are well-known in the healthcare industry and are considered industry leaders. Each healthcare system employs more than 50,000 employees and has brought in senior leaders from across the nation. The healthcare systems range from a large rural system to large city healthcare systems, which allowed for data collection from more than one type of setting.

Interview Data

The interview data was collected by the researcher who conducted nine one-on-one semi-structured interviews with healthcare leaders. The researcher asked each participant twelve

specific questions related to succession planning in healthcare. The researcher conducted the one-on-one interviews by phone. During the interviews, the researcher recorded each one-on-one interview using a handheld digital audio recorder. Each of the one-on-one phone interviews lasted between twenty and thirty minutes.

Analysis

Data was prepared for analysis upon completion of the one-on-one semi-structured phone interviews. Each interview was imported into QDA Minor, a qualitative text analysis software that is used to import and analyze interviews. Upon entering the interview data into QDA Minor, the interviews were coded and prepared for analysis. Once the transcripts were coded and analyzed by the researcher, main themes were identified, and conclusions were developed.

Participant Summary

The researcher interviewed nine healthcare leaders. Each leader was at a Director level or higher and had amassed five or greater years of healthcare leadership experience. Table 1: Interview Participants, includes the experience level of each participant.

Table 1: Interview Participants

Participant	System	Years Experience	Career Level
A	1	15	C00
B	1	25	President
C	1	30	CEO
D	2	30	VP
E	2	8	VP
F	2	15	VP
G	3	25	VP
H	3	20	VP
I	3	10	Director

Theme development

The researcher used transcripts of the interviews, which were coded. The coding of the interviews allowed the researcher to assign a symbol or specific topic for a piece of data that was collected. The data consisted of interview transcripts from the one-on-one interviews and the researcher used QDA Minor, a qualitative text analysis software, to import and analyze the interviews. This QDA Minor program allows the researcher to import the interview transcripts and set up the analysis and assisted the researcher in identifying trends and the final themes from the interview transcripts. The researcher also transcribed the interviews by hand to verify the final themes that were found using the QDA Minor program. For data analysis the Bloomberg and Volpe (2012), methodology was employed:

Step 1 – Review and explore data – Identify the main ideas

Step 2 – Re-read and examine data – Coding

Step 3 – Report findings

Step 4 – Interpret findings

Presentation of Findings

The data of this study included semi-structured interviews of the hospital leaders and existing data and research on succession planning in healthcare. The nine hospital leaders, with more than five years of director or above leadership experience, answered the interview questions based on their expertise in the healthcare field. The data collected informed the development of four main themes.

Themes

The four main themes that emerged from the data are as follows:

Theme 1: Nursing has had a plan in place, and it is working

Initial Idea	Next Step	Next Step	Final Theme
Nursing	Experienced Nursing, how to get there	Career paths for nurses	Nursing has a plan in place, and it is working
Nursing Plans	What type of nursing plan	Career paths for nurses	Nursing has a plan in place, and it is working
Career Ladder	Career Ladders for all nurses	Career paths for nurses	Nursing has a plan in place, and it is working
New Nurses	What does a new nurse expect	Career paths for nurses	Nursing has a plan in place, and it is working
Experienced Nurses	Training for future	Career paths for nurses	Nursing has a plan in place, and it is working
Leadership in Nursing	Nurse training	Career paths for nurses	Nursing has a plan in place, and it is working
RN for Life	Remaining a nurse for career	Career paths for nurses	Nursing has a plan in place, and it is working

The one theme that every leader agreed upon was that nursing already has a succession plan in place and it is effective. The leaders feel the succession plan of nursing works and has been in place for many years. One leader stated that “nursing has been planning for vacancies for many years and that each nurse knows what it takes to reach the next level in their career”. Each leader discussed how the plan works at each hospital, and each process was similar across the three hospitals. Additionally, it was also found that every nurse that starts with the hospital fully understands how to reach the leadership positions. The CEO of one of the health systems

stated that “career ladders are developed for nursing that allows for a nurse to plan their career from the beginning of their time with us”. The following sub-themes emerged from theme number one:

1. Career ladders are developed for nursing
2. Nursing leaders have a more clear-cut role in the organization
3. Nursing impacts patient care so plans must be in place to replace leaders when they leave

Career ladders are developed in nursing to help each nurse fully understand where they start and how to get to the next level. A career ladder is a way for an employee to progress from one position to the next, typically starting at entry-level and moving to a leadership position (Nelson & Cook, 2008). Each leader stated this idea as being an important factor when recruiting new nurses. According to the leaders, nurses can take charge of their own careers and plan for advancement without wondering what is needed of them. If a role requires a certain degree, it is explicitly included in the career ladder. Similarly, if a role requires a certain number of years of experience, it is also identified in the career ladder. The career ladder allows for the nurse to develop into the role they wish.

Many of the leaders stated “nursing has a more clear-cut role in the organization”. According to the respondents, there is more money spent on recruiting and retaining nurses than on administrative positions in the hospital. A nurse leadership role is less likely to be eliminated than a director level administrative role, according to interviewees.

Finally, nursing impacts patient care and leadership feels this is a reason why succession plans must be in place. Replacing nursing leadership is important, leadership feels their roles impact patient care, and this creates a need and urgency to create plans to develop nurses, so they

can replace those that vacate leadership roles. A well-developed career ladder was found to be an effective mechanism for replacing departing leaders.

Theme 2: Administrative Fellowship is a newer concept, but is being implemented across healthcare in the region

Initial Idea	Next Step	Next Step	Final Theme
Training	How do systems train for new leaders	Development of future students	Administrative Fellowship is a newer concept, but is being implemented across healthcare in the region
Master Level Student	How do systems bring in students to learn system	System promotes growth through obtaining master degree	Administrative Fellowship is a newer concept, but is being implemented across healthcare in the region
Interns	How do systems utilize college interns	System works with local schools to utilize student talent	Administrative Fellowship is a newer concept, but is being implemented across healthcare in the region
Fellowships	How do systems utilize fellows	System develops and works with schools to recruit students for fellowship	Administrative Fellowship is a newer concept, but is being implemented across healthcare in the region
New Potential Leaders	How do systems train future leaders	System develops training program for students	Administrative Fellowship is a newer concept, but is being implemented across healthcare in the region

Working with Local Schools	How do systems work with their local universities	Work with schools to develop programs to utilize talent at that school	Administrative Fellowship is a newer concept, but is being implemented across healthcare in the region
Organizational Training	How does the training department develop potential leaders	Develop administrative fellowship	Administrative Fellowship is a newer concept, but is being implemented across healthcare in the region

According to the interviewees, the administrative fellowship has been around for five to ten years. Hospital 1 stated “their fellowship program has been in existence for 5 years” and hospital 2 stated “their program has been in existence for more than 10 years”. Hospital 3 stated that “they had no administrative fellowship program within their system”. The administrative fellowship program is a way for the leaders to bring in a new or recent graduate of a healthcare administration masters level program. The fellowship allows for the system to introduce the fellow to the inner workings of the hospital, which can include all of the policies and procedures. Within two years, the fellow develops the capacity to be a leader in the health system.

One unique idea that came from the interviews was that administrative fellowships were being used to help staff future openings. One respondent indicated “that they were in the midst of creating a specific program”. Due to the program being mid-development, the respondent expressed concern about the difficulty of recruiting a leader that could learn everything needed in a short amount of time. Therefore, the leader stated “instead of recruiting a new director, the hospital trained the current administrative fellow to take over this director position when the role was created”. The fellow was immersed in the company and trained with many different leaders to become accustomed to how things were done in this system. The fellow was given hands-on

project experience, and, upon completion of the fellowship, the individual was appointed to the Director role for which they had been trained.

Theme 3: Succession planning can help to mitigate turbulence

Initial Idea	Next Step	Next Step	Final Theme
Employees unsure	Turbulence and getting ahead of it	Developing a plan to inform employees of steps	Succession planning can help to mitigate turbulence
Employees leave when turnover happens	Keeping employees during turbulence	Developing a plan to inform employees	Succession planning can help to mitigate turbulence
Public is unsure of system when leadership turnover happens	How to keep face in event of leadership turnover	Developing a plan to inform the public	Succession planning can help to mitigate turbulence
Job satisfaction	How do systems keep employees happy	Having a plan to keep employees focused	Succession planning can help to mitigate turbulence
Vacancy filling	How do systems fill these	Having a plan that allows for growth	Succession planning can help to mitigate turbulence
What happens next	Having a plan	Planning for changes	Succession planning can help to mitigate turbulence
Who do we turn to	Having a plan	Planning for future changes and where do employees go	Succession planning can help to mitigate turbulence

Turbulence was identified by each leader as being necessary to try to control. One leader stated that “by having a plan in place, each leader feels they can mitigate turbulence within the

organization by presenting and showing their employees that a plan is in place that allows for leaders to leave and there will be someone trained to take their place”. Each leader also stated that “even though there is a succession plan in place, there are times where the succession plan is not followed”. Leaders discussed how there can be chaos, or extreme turbulence, during transitions, and plans that are made prior to this are sometimes not followed due to having to make quick decisions.

Theme 4: Leadership Identification is how future leaders are chosen for training

Initial Idea	Next Step	Next Step	Final Theme
Employee satisfaction	How to judge employee satisfaction	Employee and leadership annual satisfaction surveys	Leadership Identification is how future leaders are chosen for training
Employee Growth	How does an employee grow	Leadership training	Leadership Identification is how future leaders are chosen for training
How to obtain leadership roles in the system	How do employees obtain this training	Identified through satisfaction surveys	Leadership Identification is how future leaders are chosen for training
Communication to show employee is interested in leadership	Employee surveys	Identified through satisfaction surveys	Leadership Identification is how future leaders are chosen for training
How are employees identified for potential new roles	Employee surveys	Leadership can identify through leadership surveys	Leadership Identification is how future leaders are chosen for training

Leadership training	How do employees obtain this training	Be identified and attend training	Leadership Identification is how future leaders are chosen for training
Surveys	Employee surveys	Annual surveys to identify leaders	Leadership Identification is how future leaders are chosen for training

During the interview process, it became evident very quickly that future leaders who attend trainings to develop into managers and directors were identified and chosen by senior leadership. Pyska and Gajda (2015) stated that leaders have a duty that includes identifying those potential organizational leaders and developing and implementing training programs that would benefit the future of the employee and the company. Respondents discussed the process of identifying potential future leaders. The majority of those interviewed used the process identified by Titzer and Shirey (2013) and that is by identifying a potential successor, developing that person, and evaluating the person who is being cultivated. Each leader discussed how important it was to have a plan in place to select potential leaders, develop those potential leaders and have a way to determine if they are ready to move into a key role once a vacancy occurs. The CEO in the study stated “identifying those future leaders in our organization is key as we need to know who to develop and who to train for the future”. This idea also supports the goals of succession planning posited by Gray (2014), which recommends identifying a potential leader, examining their capabilities and potential talent, and then developing that talent.

Comparison of Findings (Conceptual Framework)

The study and the responses supported the conceptual framework theories presented by the researcher in chapters two and three. The idea of leaders being encouraged to engage with

the idea of creating a succession plan to help meet organizational needs (Pyszka & Gajda, 2015) was supported by the findings of this study. The responses to the interview questions verified and reinforced the fact that nursing has a plan in place and that the rest of healthcare is not following an already proven concept of succession planning that has been shown in nursing (Trepanier & Crenshaw, 2013).

Turbulence theory was mentioned by each leader during the interview process and how important it is to mitigate turbulence during leadership succession. As previously discussed, turbulence theory states that each organization experiences turbulence in one way or another (Shapiro & Gross, 2013). Each respondent indicated that during leadership turnover, there is a higher level of turbulence within the organization unless a succession plan is in place. Although, according to one leader, even if there is a succession plan in place, sometimes, turbulence is so high the plan is not followed, which then creates an even higher level of turbulence. Healthcare systems can help mitigate turbulence by: having a succession plan in place; remaining consistent with that plan; and by communicating with all employees about what is happening (Hall-Ellis, 2015).

Finally, during the coding process, it became evident that elite theory and human capital theory directly correlate to identifying future leaders at each hospital. During the interview process, each leader was asked how a potential leader is chosen. Each leader stated that during yearly reviews with employees, a person with leadership ability stands out and is selected to receive additional training to advance their skills. The elite theory states that, when looking at large groups, there is a small group of leadership that rises to the top and leads and manages the larger group (Shapiro & Gross, 2017). The findings in this study support elite theory and its application to succession planning. The strength of this theory as it was reinforced by this study,

is that a hospital can have a reliable plan to replace a leader if they decide to leave or retire from the company (Shapiro & Gross, 2017). Human capital theory focuses on skills, knowledge, and the abilities of individuals (De Vos & Dries, 2013). During the same yearly review, the leadership team can identify employees who have skills, knowledge and abilities congruent with becoming leaders in a hospital (De Vos & Dries, 2013).

Chapter 5

Conclusion

The purpose of this qualitative, case-study was to investigate how healthcare system leaders are planning for vacancies of senior level leadership in their organizations. This case-study addressed the following two research questions: How do hospital directors at three mid-size hospitals describe their succession planning? and What approaches, strategies, and tools do hospital directors describe using in their planning efforts?

The results of the study were informed by interviews with nine healthcare leaders. These nine leaders worked in well-known healthcare systems in the northeast and central Pennsylvania regions. Each leader was at a director level or higher and has accrued five or more years of leadership experience.

The first research question guiding this study was:

How do hospital directors at three mid-size hospitals describe their succession planning? Shapiro and Gross (2017) have found that it is important for a healthcare organization to have a succession plan in place for leadership vacancies. Turbulence, not always severe, happens in an organization and this turbulence can impact how a healthcare company operates (Shapiro & Gross, 2013). By having a succession plan in place, you can help to minimize the amount of turbulence in your organization (Shapiro & Gross, 2013). Leaders across healthcare organizations can identify future leaders and those who have the knowledge and abilities to become leaders of that healthcare organization and develop training programs for those identified (De Vos & Dries, 2013). Pyska and Gajda (2015) stated that leaders should identify potential healthcare leaders and then develop and implement training programs that would benefit the future of the employee and the company. Leaders that participated in the interviews suggested

that the majority of their organizations have a succession plan in place. Some leaders have also suggested that this plan is not always followed, but when it is, turbulence in the organization is minimal and employee satisfaction remains positive.

The second research question guiding this study was: What approaches, strategies, and tools do hospital directors describe using in their planning efforts? Challenges and barriers in healthcare help leaders in healthcare determine the organizational needs (Titzer et al., 2014). With the future retirement of healthcare leaders, due to the aging population, succession planning is a key tool to helping healthcare organizations plan for the future (Patidar, Gupta, Azbik, and Weech-Maldonado, 2016). Titzer (2014) stated that utilizing tools to plan for leadership vacancy can help an organization as it moves in the future. Interview participants stated that they have been using tools such as: succession planning, employee engagement surveys, leadership training, career ladders and leadership surveys to identify future leaders to help their organizations prepare for the future.

Recommendations for Action

There are a few ways that healthcare systems can prepare for leadership changes. One predominant strategy recommended by this study is to develop leadership courses that prepare future leaders (Rothewell, Jackson, Ressler, Jones & Brower, 2015). The second approach that healthcare systems can adopt to prepare for leadership changes is to develop a succession plan (Trepanier & Crenshaw, 2013). Based on this study, the researcher recommends the following interventions:

- Healthcare organizations should utilize a current nursing succession plan, as this has shown to be successful and in place for many years and can potentially develop career ladders for administrative roles.

- Healthcare should implement an administrative fellowship program to train future leaders of the system and to help introduce future leaders to the logistics and infrastructure of the system.

A key recommendation from the research is the potential to borrow the idea of career ladders for administration. Each individual who has been identified can be paired with a mentor. The mentor and future leader can meet weekly to strengthen and grow the potential leader in areas needed for development. This would allow for the mentor to gain teaching experience, while simultaneously allowing the future leader to learn more about leadership in the healthcare setting.

Recommendations for Future Research

There exists an opportunity to expand upon the research conducted here. Due to a limitation of being a small sample size, a much larger study can help to expand the findings. By expanding upon this study, future researchers can begin to flesh out the idea of using career ladders for succession planning in healthcare. Also, future research can look closely at how nursing succession planning can be implemented into leadership succession planning in healthcare.

Conclusion

Research has shown that succession planning in healthcare is not happening at a consistent, nor necessary rate, even though healthcare is operating as big business (Trepanier & Crenshaw, 2013). A lack of succession planning can be financially risky and can increase hospital costs as healthcare systems recruit for leadership roles (Titzer & Shirey, 2013). One area of healthcare that succession planning is happening can be observed in the field of nursing (Waxman & Delucas, 2014). Nursing leaders are critical in healthcare organizations as they

serve as liaisons between leadership and nurses (Jones, 2019). Nursing has had plans in place that allow nurse leaders to hand-pick potential leaders from current employees and have them follow a career ladder and train them to be future leaders within the same system (Mensik & Kennedy, 2015). Based on this study, the outcomes confirm previous literature suggesting that nursing is using succession planning, but in healthcare and administrative areas, leadership is inconsistently following the plans in place. Each leader discussed how important it was to have a plan in place to select and to develop potential leaders. Representatives from each system discussed how it is important to determine potential leaders who are ready to transition into a new role if a vacancy occurs. This idea supports the idea of succession planning posited by Gray (2014) that if a potential leader has been identified, it is important to examine their capabilities and talent and then develop those attributes (Gray, 2014).

In sum, by utilizing administrative fellowship programs to help identify and train future leaders, and by borrowing the succession planning skills used in nursing, healthcare leadership can accomplish the goal of having a succession plan in place to fill leadership vacancies.

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Appendix

Interview Questions

Good afternoon and thank you for taking the time to speak with me about your healthcare organization and specifically the way your healthcare organization plans. I understand that your time is valuable, and our goal here today is to dig deep into how your healthcare organization plans or is planning in the future to prepare for departures in leadership. I will ask you a series of questions that you can feel free to answer. Once completed, I will be taking the results from my interviews and compiling the data to show whether succession planning is being used in healthcare and how it is being used.

Thank you again for joining me today to discuss your healthcare organization and how plans of your organization are made.

The subjects of the interviews conducted by the students at the University of New England has been made confidential. The subjects will have their names removed and stripped of identifying factors. The subjects used in this research have come from a healthcare background. They are leaders in their respective fields and lead teams of healthcare professionals at their institution. They were chosen because they are leaders in their respective business and have shown that collaboration and planning for succession are important to them.

Question	Evidence Based
What role do you play in planning for the future leadership vacancies at your organization?	Anato, 2013

Have you experienced a good model of a succession plan in your career? If yes, what made it a good model?	Collins & Collins, 2007
What is the succession plan in place for healthcare leadership in your hospital? What are some of the barriers to succession planning?	Trepanier & Crenshaw, 2013 Jones, 2019
How long have you been utilizing a succession plan in your hospital and please describe how it has been successful or not.	Waxman & Delucas, 2014 Sverdlik, 2012
Please explain your hospital's administrative fellowship program.	Geisinger.org
How long has your hospital been using this fellowship and please describe how it has influenced current staffing?	Hall-Ellis, 2015
When the fellowship is completed, where are your fellows placed within the organization?	Hall-Ellis, 2015
How do you see the fellowship program working in combination with succession planning at your hospital?	Hall-Ellis, 2015

<p>How does your Organizational Development (OD) department help train future leaders and how do they decide who gets the training? In your experience, how are future leaders chosen or self-enrolled into these courses?</p>	<p>Rothwell, Jackson, Jones & Brown, 2015 Turner, 2019</p>
<p>How does your OD department play an important role in succession planning?</p>	<p>Rothwell, Jackson, Jones & Brown, 2015 Turner, 2019</p>
<p>Please give me an example of a recent change in OD/Training that reflects the success of succession planning. What level of degree is succession planning transferrable?</p>	<p>Rothwell, Jackson, Jones & Brown, 2015</p>
<p>Research indicates strong succession plans help mitigate turbulence in organizations, give me an example of where you observed this.</p>	<p>Shapiro & Gross, 2013</p>
<p>Please explain your hospital's succession planning for nursing. Why do you feel nurse succession planning is successful or not in your system?</p>	<p>Waxman & Delucas, 2014</p>

