

ANALYZING STUDENT COMPLAINTS AGAINST NURSING PROGRAMS: TAXONOMIES OF COMPLAINTS AND OUTCOMES

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National accrediting organizations require that complaints against nursing programs receive careful review consistent with policies, established systems, and continuous quality improvement approaches. Program administrators must manage complaints equitably and professionally so that the conduct of programs does not violate programs' and accrediting organizations' standards or procedures. This descriptive study analyzed a convenience sample ($N = 98$) of complaints submitted by undergraduate and graduate nursing students attending an urban, private university and by students' parents. After establishing interrater reliability of the coding scheme, investigators established taxonomic domains of type of complaints, complaint outcomes, and complainants. Undergraduate nursing students made the most complaints; failure and dismissal from the program was the most frequent taxon, with grading, teaching, and testing the next highest. Administrator discussion with stakeholders occurred most frequently. The investigators hoped that study results would assist nursing programs to accomplish continuous improvement, to change practices, and possibly to reduce the number of future complaints by early intervention with complainants and process improvement activities. (Index words: Complaints; Nursing programs; Taxonomies; Policy) *J Prof Nurs* 27:283–291, 2011. © 2011 Elsevier Inc. All rights reserved.

NATIONAL ACCREDITING ORGANIZATIONS require that complaints against nursing programs receive careful review consistent with policies, established systems, and continuous quality improvement principles (Brown & Marshall, 2008; Kangas, 2003). Program administrators must manage complaints equitably and professionally so that the conduct of programs does not violate programs' and accrediting organizations' standards or procedures and students' rights.

Accreditation standards for nursing education programs specify requirements for formal complaints (Commission on Collegiate Nursing Education [CCNE], 2009a; Tanner, 2008, 2009). The formal complaint requirement standard suggests that a nursing program interested in achieving and maintaining accreditation status needs to create a

definition of a formal complaint and a procedure for constituents to follow when filing a formal complaint (CCNE, 2009a). Supporting documents consist of the program policy and the actual complaint file.

The definition of the CCNE (2009a) of a formal complaint is “a statement of dissatisfaction that is presented according to a nursing unit's established procedure” (p. 19). The glossary definition is offered in the spirit of continuous improvement. However, the interpretation of what constitutes a formal complaint may vary according to the complainant. Complainants might consider formal complaints of great importance despite the perceptions of program faculty, staff, and administrators who judge certain complaints to be of less concern.

Policy Formulation

Numerous nursing education programs maintain complaint files, and La Salle University's nursing programs (undergraduate, graduate, and certificate) are no exception. However, recent preparation of the Continuous Improvement Progress Report (CCNE, 2009b) stimulated the administrators to reconsider the formal complaint element of Standard I, Program Quality: Mission and Governance.

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The database on complaints had been kept in an Excel file, and administrators, faculty, and professional staff responded to complaints, working toward resolution and improving processes. Complaint report and complaint tracking forms were also available to constituents.

In the course of midterm report preparation, program administrators discovered that a nursing programs' complaint procedure process was followed but a policy was not in evidence. Their appraisal stimulated a series of discussions that involved nursing program administrators, faculty, and professional staff; the provost; the affirmative action officer; and the vice president of Student Life.

The administrative team of the school created a *formal complaint* definition and policy and revised the procedure. The definition is as follows:

Formal complaints: *Formal complaints* are defined as expressions of dissatisfaction presented to program administrators, faculty, or staff during face-to-face meetings and by constituents in letters, complaint forms, and e-mail messages or in trends noted on course evaluation summary forms. Complaints are recorded, filed by year, and entered by the dean into a complaint database on Excel.

The nursing program administrators and the dean and director of the graduate nursing and registered nurse-bachelor of science in nursing (RN-BSN) programs recognized that identifying consistent categories might improve the complaint database and help with process improvement activities. They were concerned about being certain that the complaints were addressed up to conclusion. They reviewed the complaint database and identified the need to derive a taxonomy of complaints. Initial assessment revealed that the gravity of complaints varied. In addition, administrators understood that, sometimes, students have insisted that complaints remain anonymous, perhaps fearing reprisal.

On the basis of what the evaluation of the complaint process revealed, the administrators determined to analyze the types of complaints on the Excel database. The purpose of this study was to examine the characteristics of the complaints made in the nursing programs of a private university so that in the future, the database might include types of complaints identified during the investigation based on the analysis. Complaints were defined according to the policy that was formulated. The dean and director decided to induce a taxonomy of complaints to accomplish continuous improvement, to change practices, and possibly to reduce the number of future complaints. In addition, they explored associations among type of complaints, complaint outcomes, and complainants. The research questions were as follows: What are the types of complaints submitted by nursing students, and who, in addition to students, are other complainants? What are the outcomes of the complaints? The practical significance of the study might be in gaining insights by building a description of the complaints, outcomes, and complainants whereby administrators

and faculty can view them in a more systematic manner. The study is framed by principles of continuous quality improvement (Brown & Marshall, 2008; Deming, 1986).

Related Literature

A literature review on the topic of complaints included searching the Cumulative Index to Nursing and Allied Health Literature, Education Resources Information Center, and Medline databases and netted minimal results on program complaints. Much of the literature found focused on sexual harassment and disability discrimination complaints rather than program complaints, which were the focus of this study.

Examining problems with how medical school faculty were evaluated from the perspectives of faculty and administrators, Jones and Froom (1994) conducted a survey, using an open-ended question, of 126 accredited U.S. medical schools selected by convenience. A total of 455 completed instruments were returned by deans, faculty affairs deans, basic science chairs, clinical chairs, promotion and tenure committee members/chairs, senior faculty, and junior faculty. Narrative comments were analyzed, with evaluation of teaching one of the six major areas or salient problems identified concerning faculty evaluation. Respondents complained about problems with student evaluation of teaching. Eighteen percent of all respondents reported dissatisfaction with student evaluations. Many considered student evaluations invalid because students rated teachers for their "entertainment value" (Jones & Froom, 1994, p. 480). Evaluation methods and recognition for teaching were also identified as concerns. Evaluation of faculty teaching is a persistent challenge for medical educators; this issue is also evident in nursing education programs.

Olliffe and Stuhmcke (2007) explored the increase in the number and complexity of complaints made to Australian universities to external agencies. They also noted the increase in inquiries into the handling of grievances by universities. The authors attributed the increases to the fast pace of change in higher education; the "fee for service" expectations of fee-paying students; the increase in the number of academic institutions, students, and staff; and the lack of attention by universities to developing and implementing acceptable complaint policies and procedures (Olliffe & Stuhmcke, 2007, p. 205). The increase in the complexity of higher education grievances was explained by the unique ways universities handle conflict; the internal nature of students as members of the university community; the potential for the university to disagree with staff views; the quality and timeliness of complaint handling; the university's duty to treat students and staff fairly; that confidentiality may be breached due to the bureaucratic structure of the university; and the variability of the student body: undergraduate, graduate, international, and local. Complementary strategies to address complaints included strengthening university mechanisms, maintaining the state ombudsmen position, scrutinizing universities and/or creating specific sectors in their offices, and creating a national ombudsman.

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