A PHENOMENOLOGICAL STUDY OF THE EXPERIENCES OF TRANSITIONING FROM

A PROFESSIONAL CAREER IN HEALTH INFORMATION MANAGEMENT TO

TEACHING IN HIGHER EDUCATION

by

Mildred Eleanor Norris

Liberty University

A Dissertation Presented in Partial Fulfillment

Of the Requirements for the Degree

Doctor of Education

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ABSTRACT

The purpose of this transcendental phenomenological study was to describe the experiences of faculty in Health Information Technology (HIT) programs as they transitioned from working in their field of expertise to become a teacher in the accredited HIT associate degree programs. The intended sample size, pending saturation, was comprised of 10 HIT faculty members at five colleges in the southeastern United States. Schlossberg's (1981) transition theory is used to guide this study; it is a thematic approach, which can be used to identify the factors which affect people as they make transitions. The expectancy-value theory, conceptualized by Atkinson (1957), utilized by Watt and Richardson (2007) and the self-determination theory (SDT) (O'Brien, 2008) were applied to this study. The SDT is based on the constructs of: (a) competence, (b) autonomy, and (c) relatedness. Data was collected through the use of (a) interviews, (b) a questionnaire, (c) protocol writing, and (d) focus groups. These data was transcribed, coded, and clustered into categories as recommended by Moutakas (1994). The findings were analyzed and peer reviewed to ensure accuracy and dependability. The consensus of the participants was that they were (a) excited about teaching, (b) did not want to go back to a healthcare position, and (c) enjoyed a comfortable life as they helped students learn and meet their goals for better jobs.

Keywords: second career teacher, Health Information Technology, Health Information Management, Registered Health Information Administrator, Registered Health Information Technician, self-determination theory, transition theory.

Dedication

This dissertation is dedicated to all the people who have encouraged me and insisted that I finish this paper. All of my family has been supportive of efforts but I want to give special appreciation to Amy, my daughter who is also my best friend, and my youngest son, Jarrod, who never let me forget that I had a paper to finish. He encouraged and helped me take care of things to give me more time to concentrate.

I appreciate my classmates, Kathy Danberry, Cora Tolliver, Lauren Woodward, Lorna Woodhall, and Monica Barnes who supported each other through this dissertation journey. We prayed together, cried together, and cheered each other onward. Special mention to Howard Hendren, whom I have never seen in person but who has supported me continually with encouraging words and prayers. God has made this possible and has carried me through the sands of time. There is still only one set of footprints on the beach.

Acknowledgments

I express deep appreciation to my committee chair, Joan Fitzpatrick, PhD, who was also my first instructor at Liberty University. She had always been a counselor for me with her knowledge and prayers as she helped strengthen my faith and reliance on the Lord. The Lord blessed me by providing a wonderful committee to guide me through writing this paper.

I thank my committee members, Erik Lovik, PhD and Xiaoming Zeng, MD, PhD. I felt honored that these gentlemen would agree to oversee my work. I highly respected Dr. Lovik, my instructor for EDUC 718. Dr. Zeng is the Chair, Health Services and Information Management at East Carolina University. I felt privileged to have him on the committee to use his knowledge of Health Information Technology to guide my writing.

Susie Harris, PhD, Director, MS Degree Program, Department of Health Services and Information Management at East Carolina University agreed to review the questions for the instruments used to collect data.

Last but certainly not least, I want to thank Dr. Lucinda Spaulding for strict but understanding guidance to help me achieve a life-long dream.

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List of Abbreviations

Alternative Certification Programme (ACP)

American College of Surgeons (AMS)

American Health Information Management Association (AHIMA)

American Medical Record Association (AMRA)

Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM).

Council for Excellence in Education (CEE)

Education Strategy Committee (ESC)

Health Information Management (HIM)

Health Information Technology (HIT)

Information and Communication Technology (ICT)

Registered Health Information Administrator (RHIA)

Registered Health Information Technician (RHIT)

CHAPTER ONE: INTRODUCTION

Overview

According to the administrators of the American Health Information Management Association (AHIMA) (AHIMA, 2007), there is an ongoing shortage of credentialed people to fill the many positions available in the healthcare field. More programs need to be established, which will require more instructors. In the recent past, the members of the AHIMA have encouraged professionals to teach in the accredited Health Information Technology (HIT) and Health Information Management (HIM) programs. The Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM) requires that the Health Information Technology (HIT) programs have one credentialed director and one credentialed full-time faculty member to oversee the programs and manage the students. Successful completion of the associate degree programs prepares students to take the examination offered by AHIMA in order to credential them as a Registered Health Information Technician (RHIT). The students may then enroll in the bachelor degree program and upon completion of the degree qualifies them to take the examination for the Registered Health Information Administrator (RHIA). For purposes of clarification, the abbreviation of HIT was used when referring to the associates level programs and persons only possessing an Associate degree. The abbreviation HIM is used to identify medical departments and those persons who obtained baccalaureate degrees. An applicant for the position of director or faculty must have a college degree that qualifies them for an examination to obtain an AHIMA credential. I did not find any research that described how a HIM professional transitions from the work place to the college classroom, including the online environment. It appears that only minimal research has been done about HIT programs and faculty.

According to AHIMA (2007), "A new vision is proposed for quality education in HIM, such that the profession would be able to further sustain and lead amidst a rapidly changing healthcare delivery system" (p. 3). It appears the need for highly trained personnel is increasing at a greater rate than the number of students who are prepared to graduate. However, frequently, prospective students are attracted to other programs, which are marketed on the basis that, with only six months of training, they can earn $40,000-$60,000 annually. Consequently, it is difficult to understand how an individual could receive enough training during a six-month course when the HIM professionals are required to have a minimum of an associate degree (AHIMA, 2007).

Researchers discussed the transition process of experienced teachers as they move to teaching college level students (Crane, O'Hern, & Lawler, 2009; McDonald, 2010). Even though experienced teachers have a vast amount of knowledge and confidence they may still experience difficulties. The college classroom is a new environment with a different routine. New educators face numerous challenges and they must make adjustments in order to function comfortably in the new academic environment. Many studies have examined how to better prepare second-career teachers to be effective in the K-12 classroom (Tigchelaar, Brouwer, & Vermunt, 2009; see also Samaras & Wilcox, 2009; and Powell, 1996). I am seeking to discover how to better develop the HIT novice educator as well as finding ways to encourage HIM professionals to use their vast experience to teach others. This study and future research may reveal what will help more HIM professionals become HIT instructors.

In this chapter I described what the AHIMA organization is today and explain how they began with an educational home study program using the US Postal Service. I explained my involvement with the HIT programs and the increasing shortage of highly qualified teachers in

the HIT programs. The framework and significance of the study are explained in the research

plan that will include the parameters, procedures, and the methods used to analyze the research

data.

Background

The members of the American College of Surgeons (AMS) maintained that the quantity

and quality of the medical record should be standardized in the hospitals. The AMS initiated the

establishment of the Association of Record Librarians of North America (ARL) in 1928

(Huffman, 1990) (see Appendix A for AHIMA timeline). The 58 charter members of the ARL

chose to rename the organization as the American Medical Record Association (AMRA) later

that same year. These custodians of the medical record established membership criteria and the

title of Accredited Record Technicians (ART) for those who completed the home study program,

which was equivalent to a two-year degree. The title of Accredited Record Administrators

(ARA) was bestowed upon students who had completed an equivalent to a four-year degree

(Huffman, 1990).

In 1991, the association changed the name from AMRA to the American Health

Information Management Association (AHIMA) and developed a Vision 2006 plan (AHIMA,

2007). In the year 2000, the credential titles were changed to RHIT and RHIA to be more

consistent with the new name of the organization. The AHIMA began with 58 members in 1928.

As of 2014, AHIMA has 71,000 members and is recognized worldwide as an excellent source of

HIM education and training (AHIMA, 2000). It is important to the AHIMA members that the

students who graduate from the programs are prepared to assume positions in healthcare with a

minimum of additional training. With the emergence of the electronic health record and

technology advancements in the field of medicine, it is imperative that HIT programs are staffed

with faculty, who have in-depth knowledge of the materials and curriculum used in the HIT programs. Many of the current HIT faculty are nearing retirement which will leave vacancies unless other HIM professionals are enticed to switch to college level teaching. The members of AHIMA have only recently established master's level programs at more institutions and are looking at the existing doctoral programs in healthcare that would be appropriate for the HIM professional. There appears to be an awareness of the number of educators who will be needed as well as the urgent need for more individuals to obtain higher level degrees (Calhoun, Rudman, & Watzlaf, 2012).

The research about HIT faculty who transition to second-career teachers was based on the transition theory defined by Schlossberg (1981). The theories about motivations are necessary to further clarify the transition process. Several theories in the literature (Anthony & Ord, 2008; Watt & Richardson, 2007), address the motivational categories of: (a) Intrinsic, (b) Extrinsic, and (c) Altruistic. Intrinsic motivations are things that make people happy, content, and satisfied. Examples of intrinsic motivations would be: (a) helping someone, (b) teaching children, and (c) contributing to the community. Examples of extrinsic values are increased salary, promotions, and more vacation time. Extrinsic values are those items that occur outside the person that motivates them to do something. Being praised for a job well done is an extrinsic motivation. Altruistic motivation is helping someone at your own expense without expecting any compensation. For example, the value of being more successful can be a strong motivational factor. O'Brien (2008) stated, "Intrinsic motivation is defined using the self-determination theory which was developed by (Deci & Ryan, 2000). When these three needs are met, people Experience well-being" (p.vi).

Situation to Self

I taught college level classes with only an associate degree in health information technology, and later obtaining a master's degree in education allowed me to experience the importance of pedagogical skills. I knew the subject matter well; it did not mean I had the experience to know how to meet the students' needs for learning. My original career goal as a high school senior in 1958 was to teach high school English. In 1995, I was offered the opportunity to become an adjunct instructor in the HIT program, and I was ready to make the transition to teaching.

In order to become a full-time faculty member, I was required to obtain a baccalaureate degree. I chose to acquire a degree in Healthcare Leadership from National Louis University at a campus in Tampa, Florida. I continued to teach degree courses and continuing education with an associate degree. I was not provided with any professional development that enhanced my pedagogical skills, but I was placed in a grant-funded program to receive training to teach online in the year 2000. Two weeks after I completed the baccalaureate degree I enrolled in the Master of Education for Curriculum Development and Interdisciplinary Studies at National Louis University. After completing the master's degree in 2003, I was offered the position of assistant professor in an HIT program at a community college. Later I transitioned to an adjunct instructor teaching undergraduate online courses for different universities. I am required annually to submit professional development information that enhances my pedagogy and content knowledge. I was recognized in 2014 as Distinguished Faculty for Student Success.

My research paradigm is based on the ontological assumption that the lived experiences of the HIT faculty and their interactions with faculty of other disciplines and the students could produce multiple realities due to the HIT faculty participants' sharing differing viewpoints.

Since I am confident with the knowledge gained working in the field, and am a transitioned second-career teacher I should be able to develop a rapport and respect between the participants and myself. This relationship may develop the ethical rigor that is discussed by Guillemin & Heggen (2009). Most of the HIT faculties I have met over the years have had no prior teaching experience. It was meaningful to share experiences with the participants and to discuss the value of the study and how it may be beneficial to other HIM faculty.

Problem Statement

In 2003, AHIMA professionals who completed the Workforce Assessment Study indicated the medical field would need 6,000 new positions each year, and nationwide there are 228 programs but the need for more programs is increasing. The Key message included: "Objective: Support and grow the network of academic programs in HIM at the associate, baccalaureate and master's degree levels" (p. 1). Technology has generated the need for well-educated HIM professionals to work with the electronic health record (EHR) (AHIMA, 2003). By 2005, it was determined necessary to promote a new framework for educators. Russell and Patena (2005) stated:

> Academic programs are at risk due to decreased enrollment, shortage of new
> faculty, and curricula that has not kept pace with technological change. Programs
> are suffering from a failure to communicate the profession's unique value to both
> employers and students. (p. 23)

The problem does not involve HIT professionals who leave teaching positions; instead the main issue is encouraging individuals to give up their positions in the field to transition to the classroom. Long-term educators are beginning to retire and are increasing the shortage of faculty. The discovery of why and how the educators chose to make the transition to a teaching

position could be shared with other HIM professionals who could consider filling vacancies in established and new HIT programs.

In a careful review of the literature, I was unable to find any studies conducted to determine the positive events and/or challenges the HIT faculty experienced during the move from a HIM position in the field of healthcare to a teaching position in the HIT programs. The need is ongoing for trained personnel to work in the field of Health Information. More accredited programs in the US need to be established to meet the employment needs of hospitals and physician's offices (Bates et al., 2014; Calhoun, et al, 2012). AHIMA professionals appear to be focused on addressing the educational needs of the organization as stated by Calhoun et al., (2012): "The ultimate objectives are to increase the number of professionals who can lead HIM education in academic institutions and continue to prepare students for the future," (p. 20). I will examine how and why people in the HIM workforce are able to transition to teach in the HIT programs. Although many studies have been conducted on the topic of second-career professionals who become faculty in community and baccalaureate colleges (Anthony & Ord, 2008; see also Berger & Ascoli, 2012; Kember, 2008; Mayotte, 2003), my review of the literature revealed no studies about second-career HIT faculty who transitioned to teaching.

Purpose Statement

The purpose of this transcendental phenomenological study is to identify and understand the experiences of faculty in HIT programs as they transitioned from employment in their field of expertise to become an educator in an accredited HIT associate degree program. The participants in the study were HIT faculty who taught at 10 colleges in a state in the southeastern US. At each college, there is a minimum of one full-time program director and one full-time faculty, as required by the Commission on Accreditation for Health Informatics and Information

Management Education (CAHIIM). I framed this study by using Schlossberg's (1981) transition theory, which is a thematic approach to examine the factors, which affect people as they make transitions. Schlossberg (1981) observed an increasing interest by authors, the media, and people in general about how people transition, adapt, and cope with problems. The theories of motivation (Anthony & Ord, 2008; Watt & Richardson, 2007; O'Brien, 2008; and Deci & Ryan, 2000) address the first purpose of this study; which is to understand the motivational factors and issues, which prompted the HIT faculty members to transition from their jobs in healthcare to the classroom. The HIT faculty could explain why they wanted to leave their position in healthcare. The second purpose was to have the HIT faculty members explain the problems and joys they may have encountered during the transition journey. The faculty participants could describe how they overcame the difficulties.

Significance of the Study

The findings from this study should be of use to the members of AHIMA, who plan to advance the levels of education for HIM professionals and encourage them to consider becoming educators in the accredited HIM programs. Analysis of the collected data could reveal information that may be used by any HIT faculty and HIM professionals to encourage qualified people to teach in the HIT programs; which could reduce the shortage of instructors

The AHIMA leaders are aware of the need to focus on the educational needs of the organization and to train the future workforce that will be required in the field of non-clinical healthcare (Calhoun, et al, 2012). The findings from this study could provide a better understanding of the needs and problems that face HIT faculty. This information may promote resolutions that would motivate HIM experienced professionals to transition to teach in the HIT programs. Students could benefit learning subject matter from highly educated, trained

individuals. The urgency for educators to be involved is further expressed by Brodnik, Valerius, and Watzlaf (2013) as they reported

> This year the AHIMA Board of Directors developed the AHIMA Strategic Plan:
> Drive the Power of Knowledge for 2014 -1017. The need to advance HIM
> education to a higher level is stressed throughout the plan, and explains the need
> for educators to play a vital role in moving the profession to greater levels of
> knowledge, advanced and specialized education, and recognition. (p. 24)

This plan stated by the AHIMA Board of Directors may encourage more people to consider the role of becoming educators and be involved or it could have the reverse effect on HIM professionals. I will use this study to discover if this insistence for more education and increased knowledge to enhance the educational process will make the transition to teaching more difficult for some or if it will reduce the number of candidates who teach.

Research Questions

The purpose of this study is to identify what the selected HIT faculty experienced during their transition from the healthcare workplace in order to acquire credentials for employment as an instructor at a college. The following research questions were addressed:

RQ1: How did HIT professionals experience the transition from professional careers in healthcare to teaching positions in community colleges?

This question is designed to determine how the HIT faculty managed to navigate the uncharted journey of a new career. Depending upon the area the person worked in the HIM department will largely effect how comfortable he or she would be with the subject matter they would be required to teach. The answers to this question could identify adjustments needed by

HIT professionals to help them fit into the new environment with seasoned college faculty while adhering to institutional rules and regulations.

RQ2: What concerns did the transition present to the HIT professionals who worked as educators in the accredited associate programs?

The answers to this question could reveal what may cause the HIT faculty experience insecurities in regard to their: (a) skills, (b) management of students, and (c) use of E-learning technologies. It appears that seasoned educators and administrators look at the second career teacher as someone who is experienced and forget that these people have not taught students. In the Mayotte (2003) it was found that "Each of these participants acknowledged that as novices in a new and entirely different position, having previous career experiences was not enough for the successful transition to teaching" (p. 691).

RQ3: How did the HIT professionals overcome the challenges of the transition from the healthcare work place to become faculty in a community college?

The most recent study conducted about HIT faculty was Houser, Tesch, Hart-Hester, and Dixon-Lee (2009). This study consisted of a survey in regard to job satisfaction, salary, concerns, and interest of the HIT faculty. However, the items in the survey did not include information about how the HIT faculty transitioned from the healthcare workplace to becoming a college level instructor.

The research questions were designed to focus on the motivation and subsequent concerns and challenges of the HIT faculty, who decided to transition from the healthcare workplace to teach in an institution of higher education. The participants were purposefully selected from HIT faculty employed in five postsecondary institutions in one southeastern state. Analysis of the data was conducted by the use of classification and coding of the transcribed

material collected from the participants.

Research Plan

In this qualitative transcendental phenomenological study, I sought to discover the lived experiences of individuals who transitioned from the healthcare workplace to be second career teachers in a community or baccalaureate institution of higher education. The participants were limited to HIT faculty at five different colleges located in a southeastern state. The author interviewed the faculty who completed protocol writing to gather data with the use of an intrinsic theoretical framework of self-determination (Deci & Ryan, 2000; O'Brien, 2008) and expectancy-value (Watt & Richardson, 2007). The transition theory (Sclossberg, 1981) was used to describe the transition journey of the HIT faculty and their motivations for making the transition from professional careers to teaching careers. Creswell (2013) maintained that a small sample size is best when using interviews and protocol writing to define a phenomenological study with a written report to describe the essence of the phenomenon. I will use questions to collect rich data about the reflections and feelings of the HIT faculty as they made the journey from an occupation to teaching the content knowledge of their profession.

I used the social constructivist framework described by Creswell (2013) with the phenomenological method to guide the study. I sought to identify the subjective meanings of the participants' experiences as they transitioned to teach in a HIT program. I want to learn how their interactions with others affected their experiences and to identify the thematic patterns within the collected data. I used interviews and observations as an inductive method to identify the themes involved with the transition from work as a credentialed RHIT and RHIA in the field of healthcare to become an instructor in higher education.

Definitions

1. *FIT-Choice*: Factors Influencing Teaching Choice is a scale used to measure how and why people are motivated to become second-career teachers.

2. *Health Information Technology*: An associate degree program which is accredited by the AHIMA and prepares the students to take the examination for the RHIT credential.

3. *Health Information Management:* The HIM may represent a department in a hospital that manages the patients' health records and the release of health information. It also identifies individuals that have completed the Health Information Management degree program who are eligible to take the examination for the RHIA credential.

4. *Second-career teacher*: The setting and circumstances generate different definitions for the second-career teacher. McDonald (2006) defined the second-career teacher as someone who has a bachelor's degree and had worked in the field of science for a minimum of three years. Williams and Forgasz (2009) defined the second-career teacher as someone who had worked in a career for a minimum of three years and/or was a parent before applying to be in the teacher education program.

5. *Self-determination theory:* Deci and Ryan (2000) explained that competence, autonomy, and relatedness were the human motivations which supported the self-determination theory (SDT). These are the psychological needs people strive to fulfill while they achieve their goals.

6. *Transitional teachers:* Schlossberg (1981) stated that,

> adaptation to transition (defined as an event or nonevent that alters the individual's perception of self and of the world, that demands a change in assumptions or behavior, and that may lead either to growth or to deterioration) as

a dynamic process, a movement through the various states of a particular

transition. (p. 15)

7. *Transition theory:* According to Schlossberg (1981), transition theory "describes the

extraordinarily complex reality that accompanies and defines the capacity of human

beings to cope with change in their lives." (p.3)

Summary

Many studies are available about persons transitioning from a variety of professions to become K-12 educators. No research was found about how HIT professionals working in healthcare transition and prepare to become teachers in postsecondary institutional settings.   The AHIMA has become internationally recognized as a leader in health information education and training. More programs and faculty are needed with the advancement of medical technology in the 21st century.

A transcendental phenomenological study was completed and the theories of transition Schlossberg (1981) and self-determination Gagné & Deci (2005) were applied to identify how the HIT faculty felt during and after the move to an academic environment. The purpose of the study was to gather data from the participants that will clarify the problems, joys, and struggles experienced by the HIT faculty. This study should provide useful evidence and facts to the AHIMA organization which may be used to facilitate and recruit future HIT faculty who transition to teaching. The data may indicate that there are specific needs for professional development**,** as well as additional pedagogical training. In Chapter Two, I presented the review of literature and the concepts that apply to this study of transitioned HIT faculty.

CHAPTER TWO: LITERATURE REVIEW

Overview

The literature reviewed consists of studies about career professionals who have left their jobs to develop a second career as teachers. Researchers documented many aspects of this journey that included motivations, the desire to change, the problems generated by transitioning, and how these novice teachers are welcomed at new institutions. There are no studies that target Health Information Technology (HIT) faculty who transition to a second career to become teachers. Most of the studies refer to training and additional schooling the career changers received prior to transitioning to teacher status at K-12 institutions. The literature provides theories and themes that may be used to study the involvement of HIT faculty from professional jobs in Health Information Management (HIM). The American Health Information Management Association (AHIMA) is aware of the lack of research and are encouraging members to become more research oriented (Biedermann & Fenton, 2012).

Theoretical Framework

The theoretical framework is based on several themes applied to second-career teachers by previously established theorists. My theoretical framework is shown in Figure 1. The transition theory was developed by Schlossberg (1981) to study people who change careers to become a teacher. Thoughts about how people cope with change were partially derived from the theorist, Erik Erikson. Schlossberg (1981) stated, "Erik Erikson for instance, postulates an eight-stage progression in ego development, each characterized by a crucial issue that must be successfully resolved before the individual can move on" (p. 4). This theory of transition and developmental growth evolved and was further refined by Deci and Ryan (2000) who gave an explanation of self-determination which involves the intrinsic, extrinsic, and altruistic

Overarching Research Question

How do HIM professionals experience the transition from professional careers in healthcare to teaching positions in community colleges?

Central Theory

Transition Theory

Self-Determination

Theory (SDT)

Idea needed to be examined to answer the research question: Intrinsic, Extrinsic, and Altruistic motivation factors, Change, Adjustment to new environment.

Idea needed to be examined to answer the research question: The challenges HIM professionals must deal with such as: Salary, Professional Development, Interaction within academic environment, and Education level.
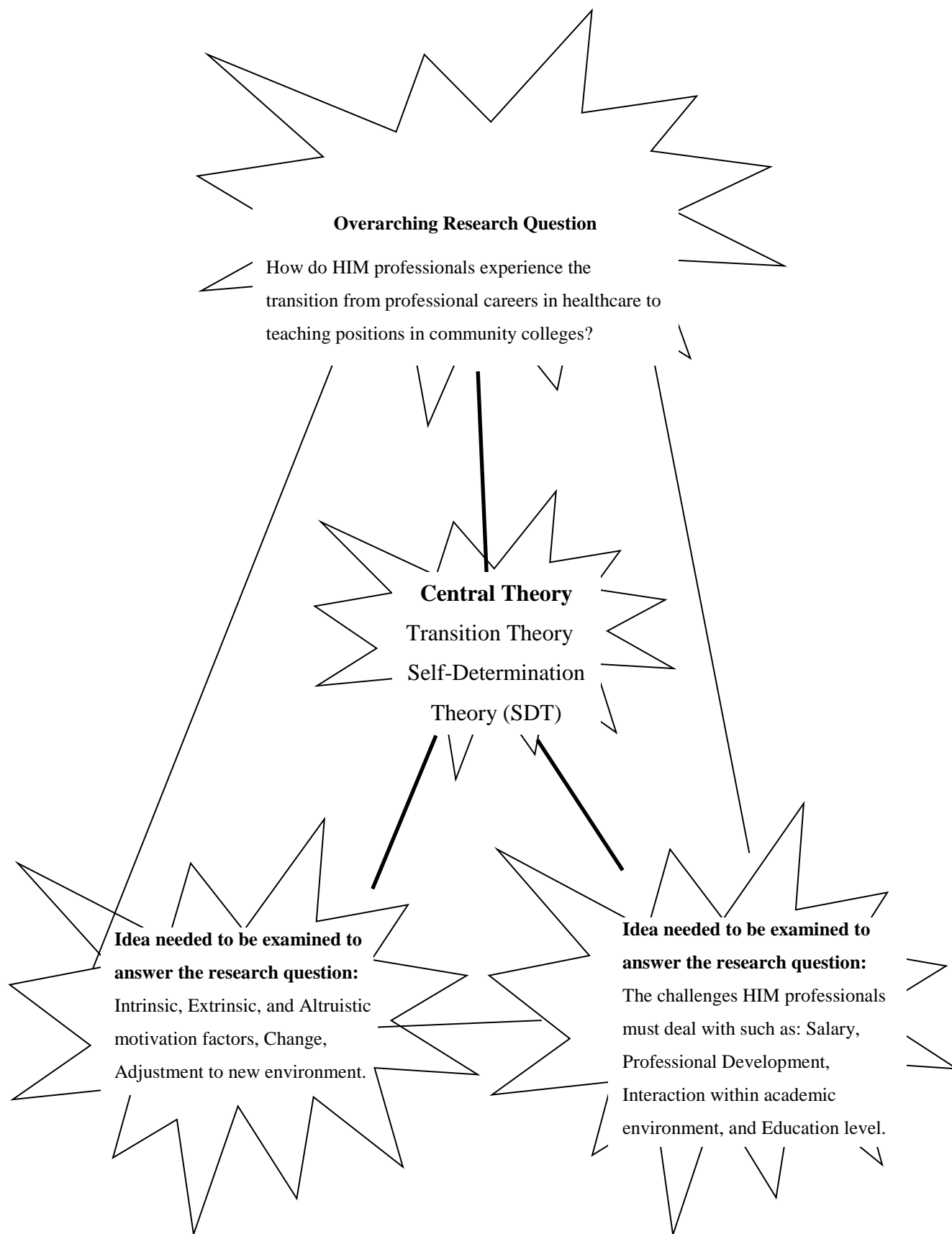
Figure 1.**Theoretical Framework**

motivational incentives that stimulated people to want to make changes in their lives and adjust to new environments. The transition theory was used to identify how moving to another state could be an adventure for some people whereas it could be a crisis for someone else. Making a transition in life could be positive for some and negative for others. Schlossberg (1981) based her research on many theorists who addressed people making changes in their life. She identified many factors that affected people such as their age and other circumstances that caused them either additional stress or situations that made the transition more comfortable. Examples would be a single 50-year old being let go from a career job while raising a grandchild. A 50-year old who is promoted to a position of more responsibility may not feel confident with the new tasks and is then being served papers for divorce after being married 30 years. Different responsibilities at different stages and ages in life generate a variety of reactions to circumstances.

How people transition through life has multiple combinations of events that may contribute to how they cope making the changes (Schlossberg, 1981). Castro and Bauml (2009) used the transition theory developed by Schlossberg (1981) to study people who change careers to become a teacher. The transition theory focuses on how some adapt readily to new situations while some struggle with any type of change. Sometimes the persons who accept change with no difficulty can reach a point when they decide they will stand firmly and not accept any change (Castro& Bauml, 2009). HIT faculty who became second-career teachers knew they would experience a change of environment. This research could provide meaningful information regarding the stress involved with change and the acceptance of change.

The Self-determination Theory (SDT) was developed by Deci and Ryan (2000) and relates to job satisfaction regarding relatedness, competency, and autonomy. Professionals in all

fields of work were goal oriented and did whatever was necessary at whatever cost to attain a particular position. Needs that people require have many aspects, are not the same for everyone, and are the foundation for the SDT. One of these aspects involves whether or not these needs are being met during the time people are climbing the ladder to arrive at career goals. The top of the ladder may not be as pleasant if the struggle lacked the qualities of life the person needed. However, there are those individuals that being at the top was worth not having needs met during the journey. Deci stated (as cited in Deci & Ryan, 2000), "Thus, Deci (1975) proposed that intrinsically motivated behaviors are based in people's needs to feel competent and self-determined" (p. 233). Deci and Ryan (2000) view the needs as innate instead of the personality theories of needs being learned.

The needs involved in the SDT may be categorized by intrinsic, extrinsic, and altruistic values which have been reviewed by many researchers (Watt & Richardson, 2007; Castro & Bauml, 2009; Williams & Forgasz, 2009). Watters and Diezmann (2015) indicated "the sense of being a teacher – a sense of identity – establishes a feeling of belonging and acceptance within the profession" (p. 168). They found that second career teachers developed a professional identity by having positive relationships in the workplace. This helped to supply the needs for competence, autonomy, and relatedness required for the self-determination theory.

According to Williams and Forgasz, (2009), most second-career teachers have intrinsic and altruistic reasons for changing professions. Some enjoyed the extrinsic rewards of more time off and the status of being a teacher was important to many second-career teachers. Examples of intrinsic reasons are someone who wants to make the community better or to help students succeed. It is doing something meaningful and helpful to others. Some second-career

teachers may feel the intrinsic reward of having a job that gives them more satisfaction and they are able to see results of their labors in the students who move on to the next class.

Atkinson (1957) developed the expectancy-value theory which was a framework to determine the reasons students studied math. Although the expectancy-value theory was first used to gather data about gender enrollment in mathematics classes, it has been successfully modified to examine the Factors Influencing Teaching Choice (FIT-Choice) (Watt & Richardson, 2007). The expectancy-value theory explained by Watt and Richardson (2007) involves three constructs which are: (a) self, (b) value, and (c) task perceptions. Watt and Richardson (2007) "developed items for antecedent socialization and perceptions of previous experience identified in the expectancy-value model" (p. 171). Watt and Richardson (2007) looked at how satisfied the second-career teachers were with their choices as well as why they chose to teach. Atkinson (1957) and Watt and Richardson (2007) also reviewed the intrinsic, extrinsic, and altruistic motivations for choosing to be a second-career teacher.

The intrinsic motivation or task for doing something was expanded into the utility value which describes how the task or motivation may be useful to the person in the future. An attainment value is doing the task well and the cost is the effort required of the individual to carry out the task. Sometimes people chose to teach because they are in favor of having more time with family and other quality of life issues that could be construed as extrinsic values. Therefore "We developed the component *subjective attainment value* constructs that we termed time for family, *job security*, and *job transferability*" (Watt & Richardson, 2007, p. 172). Instead of subjective attainment value, they decided the components should be named personal utility value. To further formulate changes from previous studies, Watt and Richardson (2007) decided

the aspect of working with children and adolescents, underprivileged youth, and shaping futures

should be identified as social utility value. Instead of addressing the frequently studied intrinsic,

Extrinsic, and altruistic motivations for teaching, Watt and Richardson (2007) chose to

Fine-tune the generalization of personal satisfaction and tangible rewards to a more clearly

defined research.

The findings of Watt and Richardson (2007), Castro and Bauml (2009), Williams and

Forgasz (2009), Watters and Diezmann (2015) indicate the basis for SDT are that the person's

needs are for competence, autonomy, and relatedness coupled with intrinsic, extrinsic, and

altruistic motivations. Gagné and Deci (2005) discuss the cognitive evaluation theory (CET) and

how other factors like being observed and timeframes may diminish the autonomy many people

enjoy. Intrinsic and extrinsic reasons for motivation can counteract each other generating the

need to access other involved factors. Sometimes rewards may generate a negative response if it

overrides the intrinsic values of the person. Continued negative feedback to someone can

remove their sense of worth which could cause him/her to lose both the intrinsic and extrinsic

motivations. This can lead to people feeling helpless or amotivated (Gagné & Deci, 2005).

According to Gagné and Deci (2005) "The primary difference between SDT and most other

work motivation theories is that the focus of SDT is on the relative strength of autonomous

versus controlled motivation, rather than on the total amount of motivation" (p. 340).

The theories of Transition, Self Determination (SDT), Factors Influencing Teaching

Choice, and Expectancy-Value were used to develop a better understanding of the HIT faculty

and provide an overview of the particular features of the underlying issues involved with the

transition to the new teaching career.

Related Literature

American Health Information Management Association

Education has become a hot topic with the members of AHIMA (Brodnik, Valerius, & Watzlaf, 2013). AHIMA began planning in 2007 to prepare for a vision of 2016 and what skills would be needed to work in a non-clinical setting in healthcare (Calhoun, Rudman, & Watzlaf, 2012). A report produced by members of AHIMA, "Visions 2016: A Blueprint for Quality Education in HIM" included three key items which were: "1. Transformation of HIM to a graduate-level profession 2. Realign the HIM associate degree with workforce needs 3. Prepare an effective, qualified pool of HIM faculty" (Calhoun et al., 2012, p. 19). In 2009, Houser, Tesch, Hart-Hester, and Dixon-Lee (2009) reported the results from a 2008 survey of HIM faculty. Participation in the survey was offered to 1, 667 educators and of those, only 434 surveys were received and 25 were duplicates and three were blank leaving a total of 406. Only 402 (24%) were used for analysis. The survey questions focused on their teaching status, challenges and concerns, levels of interest, salaries, and the use of virtual tools. The authors stated: "Data from this survey provide insights into the concerns and challenges many HIM educators face in today's training institutions and suggest implications for future directions in work force training and professional development within the HIM field" (Houser et al., 2009, p. 1).

In 2010, the Education Strategy Committee (ESC) established the Council for Excellence in Education (CEE) which has 12 members. The focus of the Council is on: (a) community, (b) faculty development, (c) educational programming, (d) research and periodicals, (e) curricula, and (f) workforce. This council also developed four goals: (a) increase the number of graduate degrees held by HIM professionals, (b) provide specialty tracks for the associate degree

programs, (c) provide faculty and member professional development, and (d) increase the number of HIM professionals with masters and doctorate degrees. It was determined that more HIM professionals needed to be in executive positions and to lead HIM education (Calhoun, et al., 2012).

Educational Needs of AHIMA

The literature indicates AHIMA has recognized the serious need to enhance the education of its members and future workforce in the non-clinical health care settings. Biedermann and Fenton (2012) stated,

> In May 2008, the AHIMA Foundation Research Committee authored a practice brief outlining the need for HIM research to "base its practices for the proper education of HIM students and to establish its credibility within the broader healthcare and clinical informatics community. (p. 32)

Biedermann and Fenton (2012) took the initiative to establish an HIM Research Training Institute and are providing information to assist with funding and support to those in HIM wanting to do research. A HIM Research Bootcamp was held to provide training and to mentor those interested in learning how to obtain funding and complete the proposal process.

Similarly, Brodnik, Valerius, and Watzlaf (2013) encouraged AHIMA members to consider obtaining doctoral degrees and offered information about several universities to attend. Brodnik et al. (2013) explained,

> The push toward graduate education in health information management (HIM) is becoming a reality as more universities and colleges develop or explore launching HIM and informatics graduate curricula. Fundamental to offering these programs is the need for doctorally prepared HIM-credentialed faculty. The number of AHIMA members with

that background is less than one percent of the AHIMA membership. Adding to this issue

is the continuing loss through retirement of AHIMA credentialed faculty with doctorates.

As a result, many more doctorally prepared faculty with an AHIMA credential are needed

to teach in the existing and upcoming graduate programs. But the industry must first learn

how to prepare faculty for this challenge and communicate what types of doctoral

programs are available. (p. 24)

It is apparent at this time that AHIMA staff is focusing on higher education for its

members.   There seems to be a shortage of faculty in the HIM programs and it has been

determined to be a need to establish more HIM master's and doctorate programs. Brodnik et al.

(2013) indicated, "Fundamental to offering these programs is the need for doctorally prepared

HIM-credentialed faculty" (p. 24).

Alternative Certification Programs

Career-changers transitioning to teaching positions in K -12 usually are required to go

through an alternative certification program (ACP) or a traditional program to obtain a teaching

license. Most of the studies about second-career teachers are addressing those who have

attended a program before making the transition (Anthony & Ord, 2008; Williams, 2010;

Samaras & Wilcox, 2009). The HIM faculty does not have a certification program to attend

before beginning their second-career teaching.

Another approach to examining the design of an alternative teacher education program

was done by Samaras and Wilcox (2009). This qualitative case study was done by comparing

the experiences of four teachers who had procured a teaching position after having completed the

first year at the teacher education program. Three difficulties were discovered, "(a) meeting time

Demands, (b) managing student behavior and needs, and (c) appreciation of mentors: (Samaras & Wilcox, 2009, p. 180). Two major changes were reported: "(a) seeking a balance of work and personal lives, especially with peer support and b) interdependence/independence as developing teacher" (Samaras & Wilcox, 2009, p. 183). Professional goals for all of the participants were: "(a) wanting a career change and b) making a difference in students' learning" (Samaras & Wilcox, 2009, p. 185). The recommended changes to the program were: "a) an integrated system of resource supports, b) scaffolded mentorship, c) situated learning experiences, d) alternative new teacher network, e) active coordination, and f) university support" (Samaras & Wilcox2009, p. 188).

Samaras and Wilcox (2009) found that the teacher preparation program was essential; however, second-career teachers needed support from peers and administrators as well as time to acclimate to the new environment. Researchers made recommendations about how new teachers needed to have mentors and should be introduced to problems they could face in the classroom. The mentor should be available by phone or email and be like a safety net that would allow the teachers to begin walking the tightrope without fear of hitting the ground and failing. My study addressed how the HIT faculty managed to succeed without the advantage of a teacher preparation program.

Importance of Backgrounds and Experiences

Tigchelaar, Brouwer, and Korthagen (2008) wanted to fully define a second-career teacher as it appeared there were many different types of backgrounds and experiences that could identify these individuals. It was necessary to develop characteristic categories to determine what type of preservice program would best prepare the teacher applicants. The authors assumed that creating the best preparatory program would solve the problem of having well prepared

second-career teachers. The findings indicated that many second-career teachers were stressed and frustrated that teaching was not being what they had envisioned. Others relied on earlier experiences in their previous work life to help them succeed. It was suggested more studies be done to factor in more individual criteria about the applicants to arrive at a curriculum that would increase the success of the second-career teachers.

Consequently, in this study Tigchelaar et al. (2008) reviewed the backgrounds of the second-career teachers to determine how their past and the transition to teaching affected their success. The participants were interviewed about the following topics: (a) personal backgrounds, (b) continuity and change during the transition to teaching, and (c) the contribution of teacher education. Tigchelaar et al. (2008) determined that the alternative certification programs (ACP) could focus on showing the second-career changers how to transition their existing skills to teaching skills. It was discovered by Tigchelaar et al. (2008) that many second-career teachers found that teaching was not what they expected which caused them to leave teaching. Thus, the shortage of teachers remains a serious situation. The ACPs need to help the second-career changers improve the transition to the classroom to remove the frustrations that arise.

Tigchelaar, Brouwer, and Vermunt (2009) provided a review of several studies done about second career teachers. The purpose of the review was to pursue the development of a pedagogy that could be used to educate those wanting to transition to a teaching career. Tigchelaar et al. (2009) reviewed the challenges confronting second career teachers which included: (a) motivation and reality, (b) professional development, (c) strong beliefs and change, (d) transferability of skills, (e) Using practical experience in the classroom, and (f) autonomy and adaption. Many of the studies look at how the second-career teachers adjust in the academic environment and sometimes it appears they have more difficulty with making the adjustment.

Tigchelaar et al. (2009) compared five studies about the second-career teachers and the first-career teachers. They discovered the second-career teachers are more adept than the first-career teachers. The researchers used four categories to make the comparison.

The categories were motives, skills, knowledge & beliefs, and autonomy. The motives indicated the second-career teachers cared more about the student success. The second-career teachers demonstrated more skills from having been in the workplace and were experienced. The knowledge and beliefs section results clearly indicated the second-career teachers were open about what they felt was important about teaching. Last, the autonomy section definitely indicated the second-career teachers were more self-driven and exhibited more authority and confidence in the classroom.

Tigchelaar et al. (2009) listed challenges that could be some of the same ones experienced by those who become HIT faculty; however, the HIT faculty is not required to enroll in teacher-preparatory training programs prior to transitioning to academia. This study would benefit from obtaining the background experiences and conceptions about teaching and learning from the HIT faculty as discussed by Tigchelaar et al. (2014). New research would allow the comparison of transition issues of the second-career teachers having attended the preparatory classes with those issues experienced by the second-career teachers who did not attend preparatory classes

Tigchelaar et al. (2014) focused on the second-career teachers' conceptions of teaching and learning and determined that it was possible for previous experiences to have more influence on their conceptions than their background characteristics. Continuity and change were the key points in this study that addressed the alternative certification programmes (ACPs). Tigchelaar et al. (2014) felt that previous experiences of the second-career teachers covered too many

aspects so they decided to base the theoretical framework on these six aspects: (a) environment, (b)behaviors, (c) competencies, (d) beliefs, (e) professional identity, and (f) mission.

This research completed by Tigchelaar et al. (2014) was focused on how to reduce the high drop-out rate from the ACP programs and to improve the retention of second-career teachers past the first few years of teaching. Tigchelaar et al. (2014) discovered through research that second-career teachers come with learning-oriented and student-centered conceptions. However, after taking the ACP training, many of the second-career teachers find themselves with a content-oriented and teacher-centered concept which they decide is not for them and they give up the idea of being a teacher. They also discovered that second-career teachers want to have more training in classroom management and how to explain subject matter. It seems this research should have concluded to encourage student-centered teaching and to provide pedagogy skills.

Motivations and Deterrents for Second-Career Teachers

The barriers, enablers, and disincentives of people from all walks of life becoming a second-career teacher are explained by Castro and Bauml (2009) due to their wanting to determine why people leave successful careers to become teachers. According to Watt and Richardson (2007), Williams and Forgasz (2009), and Anthony and Ord (2008), it was important to look at which factors influenced second-career teachers to make the transition. The intrinsic and altruistic factors pertaining to lifestyles and wanting to contribute to their community and work with students seemed to super cede the extrinsic motives for higher pay, long holidays, and the status of being a teacher (Williams & Forgasz, 2009). The cluster groups of "Looks Good," "Time is Right," and "Teaching is Me" were used by Anthony and Ord (2008) to analyze their data regarding feelings and expectations of the second-career teachers they evaluated.

Defillippi and Arthur (1994) addressed the Know-why-motivation, the Know-how-skill base, and Know-whom-network and social contacts of the individuals transitioning to a second-career. Much of the success of the career changer depends on how they view themselves. Does their Know-how-skill base belong to a certain company and do they continue to identify themselves with that company after they leave? If they consider themselves to be a "company engineer" instead of viewing themselves as a "proficient engineer", they could feel uncomfortable being on their own seeking other employment. The individual had a Know-whom at their other job where they had a network of acquaintances. It is important for them to be able to connect with new acquaintances and set up a new network of people at their new job. Unfortunately, some employers do not want their employees talking with outsiders and long-term employment in this type of atmosphere could make it difficult for some individuals to comfortably interact with others (Defillippi & Arthur, 1994). HIT faculty employed by vendors of healthcare products could be under that competitive situation that would not allow them to discuss business outside the office which could interfere with their ability to be more open in the college environment.

Christiansen (2003) examined what had motivated teachers to change from a previous career. She based part of her research on three of Erikson's (1963) eight stages of development that would be applicable to the career changers. The three stages were Identity versus Role Confusion, Intimacy versus Isolation, and Generativity versus Stagnation. Six personality types discussed by Holland (1997) (as cited by Christiansen, 2003) were: "Realistic, Investigative, Artistic, Social, Enterprising, and Conventional" (p. 34). The definition of the Social Type described the traits a teacher should have such as being able to train, develop, enlighten, and to perform systematic activities using materials and tools (Christiansen, 2003). The study

participants had all attended the local Professional Development School (PDS) which motivated and gave support to the second-career teachers. The teachers all felt the school had been a meaningful experience for them. The participants in the study had thought about teaching when they were between the ages of 12-25 but were between the ages of 45-53 when they became second-career teachers.

Age and Experience

Mayotte (2003) used the career competencies Know-why, Know-how, and Know-whom, that were used by Defillippi and Arthur (1994), to examine how four second-career teachers were doing in their first year of teaching. It is important to know how these different experiences affect persons making the transition to the teaching environment. Kember (2008) indicated concern about second-career teachers not embracing the information and communication technology (ICT) that is necessary for teaching in Australia. The Know-how gained in the previous employment might not always be extensive enough to encompass what is required in the classroom.

The term "stepping stones" is used by Mayotte (2003) to describe what is needed to help second-career teachers cross over the waters of transition to become secure teachers. The stepping stones "provide strong and steady footholds allowing one to traverse them with some ease" (Mayotte, 2003, p. 692). The stepping stones consist of mentor programs, peer support groups, and training that is comparable for their age and experience. The programs and groups should be set-up for the younger and the older second-career teachers. The more experienced second-career teachers would need a different approach from the second-career teachers who had less experience in their previous jobs (Mayotte, 2003).

Crane, O'Hern, and Lawler (2009) were concerned about how different the challenges are for transitioning teachers who have obtained doctoral degrees as compared to those who are teachers with doctoral degrees. Universities are faced with retiring doctoral faculty and need replacements. The research question dealt with how professional people obtaining doctoral degrees would be able to fill the shoes of career doctoral faculty. The findings of their study indicated the seasoned teacher mentor of two transitioning teachers noted that the mentorship was more of a sharing process. The two new teachers who have obtained doctoral degrees brought the skills from their professional life consisting of communications, organization, and management. The mentor, having taught with a doctoral degree, aided with the adjustment to the university and the pedagogy skills needed by the new teachers. This method proved to be beneficial to the new doctoral faculty. This study identified four themes that new faculty faced and provided 5 tips for administration to apply and eleven tips for transitioning faculty to use. The problems that surfaced were (a) exiting one career and entering a new career, (b) working alone or being lonely, (c) confidence with skills and fear of not being familiar with the environment, (d) new responsibilities but with being a new professor authority was limited.

Personal Practical Knowledge

Powell (1996) examined the second-career teachers' personal practical knowledge and teacher image which is a combination of their previous life experiences and their classroom teaching during their first year of teaching. He intended to understand how the personal practical philosophies of the second career teacher are developed. The theory of personal philosophy and personal image was based on the findings of Clandinin (1985) which identified personal practical knowledge as personal practical philosophies. Powell (1996) explored how the second-career teacher used their experiences to form and enhance the curriculum instead of using the traditional

curriculum. Four participants were followed and analyzed to determine that, "A person, then, can become an effective teacher, highly skilled in implementing prescribed curricula, and yet not become a curriculum maker" (Powell, 1996, p. 170). The HIT faculty are unique from other second-career teachers in that they have job experience with the subjects they are teaching in the HIT programs. Other second-career teachers have developed a variety of experiences and skills but they may not have worked specifically with the subject matter they are teaching. An example would be a banking executive who switched to teaching a class in social studies.

Vocational Second-Career Teachers

The perceptions of the second-career teacher regarding their first career were the focus of the study done by Berger and D'Ascoli (2012). They felt the second-career teachers' motivation to teach was linked to their previous occupations. "Priyadharshini and Robinson-Pant (2003) reported that their participants were attracted to teaching so that they could teach their topic of interest, not simply for the intrinsic value of teaching" (Berger & D'Ascoli, 2012, p. 320) The participants in this study were vocational education training (VET) teachers. A modified version of the FIT-Choice scale was used to identify what motivates people to become teachers and to identify their perceptions of teaching. The limitations of this study indicated the problems of participants not being able to remember their reasons for leaving their occupation and the sometimes-distorted responses from actual truths about teaching (Berger & Ascoli, 2012). Further investigation about second-career teachers in a vocational program was done by Hof and Leisner (2013) regarding the monetary reason for changing from a higher paying job to lower pay as a teacher. Those willing to take a reduction in pay seem to be attracted to the non-monetary advantages of being a teacher. It appears the HIT faculty could be compared more with this type of second-career teacher since the vocational teacher is required to be expert in the

particular field which they are teaching and some may have to accept a reduction of their

pervious salary. McDonald (2010) provided a study of a nurse in clinical practice transitioning to

nursing faculty which could experience similar difficulties the non-clinical HIM professional

would have transitioning to teaching. The study was based on three themes, which were

knowledge deficit, culture and support, and salary and workload. Regardless of the amount of

nursing expertise, it was noted that being a novice nurse educator required a considerable amount

of adjustments to the school environment and managing of students. The working environment

is entirely different for the nurse educator who has to adapt to the cultural expectations of the

learning institution. Finding support is sometimes difficult as seasoned or tenured faculty do not

always accept career changers cordially. Adjustments must be made to accept a frequently lower

salary that may be for nine months instead of 12. The workload may increase due to student

enrollment. The general findings determined that the transition for second-career teachers is

difficult (McDonald, 2010). Even though HIT faculty and nurses work in the field of healthcare,

the transition could have similarities but the clinical and non-clinical sides of healthcare are quite

different and research on transitioning HIM employees could offer an entirely different

perspective.

Protean and Boundaryless Careers

Due to the changing workplace, it is necessary to look at how people are adapting to the

changes and the fear of job security. Segers, Inceoglu, Vloeberghs, Bartram, and Henderickx

(2008) examined the traits of people and how they are distributed within their four motivational

groups of (a) Protean career architects, (b) Trapped/lost, (c) Hired/hired hand, and

(d) Curious/wanderer. The titles can appear to be disconcerting to some people such as trapped

or lost and just curious and a wanderer. What types of labels are these?

Segers et al. (2011) revealed that men had less personal principles than women. Women appeared to be more flexible with their careers than men who were motivated more towards traditional careers. Age caused men and women to be less involved with learning new techniques even though they are more self-directed but do not have the need to achieve. The older worker could have an increased need for job security but appear to have less job security even though their psychological mobility maybe higher (Segers et al., 2011). This study was done in Belgium which indicates these work problems are worldwide.

Each type of career has two items that separate them. The protean considers the internal values of the person and whether or not they are self-directed. The boundaryless focuses on the physical and psychological mobility of the person. The protean type is motivated to take advantage of training and to move up the success ladder. Due to continual personal growth, they will accept change and be ready to move into the next job or level offered to them. Job security will eventually not be of importance to their comfort zone. Boundaryless people use physical mobility to move towards higher pay, status, and new companies. The psychological mobility indicates the person has a need for affiliation, which means they like a diverse social network structure and autonomy. They do not like constraints and want to initiate their work as they see it should be done (Seger et al., 2008).

Another study was done about coping with insecurity in employment pertaining to protean and boundaryless orientations. Briscoe, Henagan, Burton, and Murphy (2012) used a web-based survey to collect data from 362 participates in the work force and explored the coping mechanisms and different career attitudes involved with the economic recession. Outcomes that could occur due to the instability of employment are: "job search behavior, job performance, subjective career success, and psychological well-being" (Briscoe et al., 2012). They determined

there were three skills that could affect the outcomes and these were: (a) external relationship seeking, (b) identity awareness, and (c) active coping. The researchers felt people with these career attitudes would result in positive outcomes in stable and unstable economic conditions. The participants were balanced with 51% being female and 49% male with an average age of 40. The participants were Hispanic, Asian, and African American with 81% being Caucasian and a small percentage of Others. Participants were born in the United States, India, Columbia, Germany, Pakistan, Spain, and Mexico and worked in a wide range of business and industries. Sixty-eight percent of the participants had a least a bachelor's degree. The study used a 7-point scale measure using the following topics:

1. Self-directed protean

2. External support seeking

3. Active coping with change

4. Identity awareness

5. Job search behavior

6. Performance

7. Psychological well-being

Analyses were done using Cronbach's alpha scale. The findings indicated a relationship between the career attitudes and the protean and boundaryless attitudes of the participants.

Entering the 21st Century

Alfred Adler's individual theory appears to be based on the fact that people who are encouraged will feel capable and someone who is discouraged will exhibit negative behavior. Del Corso, Rehfuss, and Galvin (2011) use the theory of Adler to explain how people are adapting in today's work environment and how counselors may help those who are struggling

with making changes in the workplace. Some people wonder if they have a future due to all the uncertainty in the job market. In the ever-changing daily routine of the workplace, some may not feel like they are a part of a company or organization and feel they are a failure. According to Del Corso et al. (2011) "This is an important assumption with Individual Psychology: social interest and significance are inextricably related whether individuals are aware of it or not" (p. 90).

Adler (2010) discussed a psychic mechanism that helps us adjust to the environment and states, "Psychic movements can occur only when they have an innate goal" (p. 44). Individuals have character traits which have a positive side and an inferiority side. Del Corso et al. (2011) explained fictional goals which are guiding fictions. This involves telling ourselves things like "When I graduate I will be important." Only when we feel we are being compensated for our efforts do we feel successful and that means we would have met our goal for happiness. Career adaptability is necessary in today's workplace and Del Corso et al. (2011) list 6 dimensions of adaptability which are, (a) career concern, (b) career control, (c) career curiosity, (d) career confidence, (e) career commitment, and (f) career cooperation. All of these are pertinent to people transitioning from different types of jobs. Some of these topics would be pertinent to discuss with the HIT faculty study participants.

Career concern requires the person to feel involved and responsible to the career. The person must contribute to the process and not sit back and wait to be given something. Career control means we want to determine our future job or future company to work for. Sometimes this can be difficult for people to feel fully confident in. Occasionally there are other priorities that stand in the way of securing a great job because it could require time away from family or distraction from a favorite hobby. Sometimes the person may be defeated by thinking

incorrectly about the job or a lack of determination. Career curiosity involves how prepared are you and what have you found out about the job? Del Corso et al. (2011) stated. "Individuals that express career curiosity ask, 'What do I want to do with my future?'" This requires effort, thought, and action to resolve career curiosity. Career Confidence is self-explanatory. Usually someone must feel confident to succeed. A person must feel self-worth, have some experience, and feel comfortable with him or her to meet the confidence requirement. Career Commitment indicates how much effort we are will to put into a career. A person needs to commit to know who they are, what they can do, and understand where they want to be. Career Cooperation indicates that you must get along with everyone and everything in the company. Individuals must adapt and interact with co-workers (Del Corso et al., 2011). Even though there are people who prefer autonomy in their work, it has been found that team work is the most successful route (Johnson, Johnson, & Holubec, 2009).

The second-career teachers studied by Lee (2010) seemed to focus on the comparison of first-career teachers with second-career teachers. The participants had the same reasons for changing careers as those addressed in this paper which were: "the need for more meaningful work, a more flexible and family-friendly schedule, and the desire to share their experiences with the younger generation" (Lee, 2010, p. i). Preparing the teacher was another aspect of the research. It was suggested a unique program was needed to prepare second-career teachers instead of train them.

The reflections of 12 second-career teachers who were motivated differently was compiled by Lee (2011). The theoretical framework was based on four theorists: Maslow's (1943) Hierarchy of Needs, Alderfer's (1972) Existence, Relatedness, and Growth (ERG),

Herzberg's (2008) Hygiene and Motivational Factors, and Levinson's (1978) Adult Development Theory. The participants were asked if they would encourage others to become teachers. The majority were strong advocates of teaching and others had mixed answers. It was strongly felt that unless a person cared about students and enjoyed teaching, they should find another job. The participants indicated that the teacher preparation programs had value and were beneficial but did not fully prepare the second-career teacher to teach in the classroom. All 12 of the participants had experienced hardships during the transition such as financial, strained relationships, uncertainties, and annoyance with the training and certification process. Second-career teachers had an identity in their previous jobs and now m spend time as a teacher to identify with the profession. Consequently Lee (2011) states,

> This identity formation is a process that often takes a great deal of time and likely involves a shift away from idealism and naiveté toward survival mode in the first year of teaching toward reflective practice as one gains experience. (p. 4)

Even though all teachers must manage finding an identity, the unique identity of the second-career teacher may be formed by their prior career experiences. Overall the participants were happy with their choices and were glad they had persevered to become teachers.

Contrary to Lee's (2011) findings, Powers' (2002) study participants were not as impressed with becoming teachers. The participants were 7 second-career teachers in Spokane, Washington. The challenges regarding students were a lack of student motivation and classroom management skills. Challenges regarding administrators were the administrator's lack of leadership skills and support. Administrators did not seem to get to know the teachers. The 7 second-career teachers had life changing events in their lives that made them want to make a difference and work in education. They had worked hard in their previous careers but it was

nothing compared to teaching and they realized the monetary compensation was far less than the effort they put into the job. Lee (2011) brought out valid and current issues regarding the problems of second-career teachers. Recommendations were to treat the teachers with respect and provide support. The second-career teachers should be allowed to contribute to their students' lives and education.

Del Corso et al. (2011) used the career construction theory (CCT) determined by Savickas (2012). People need to feel what they are doing is significant. According to Del Corso et al. (2011) "This is an important assumption with Individual Psychology: social interest and significance are inextricably related whether individuals are aware of it or not" (p. 90).

Concerns about influencing prospective teachers that were expressed by Fox (1961) appear to be the same as ones discussed by Mayotte (2003), Watt and Richardson (2007), and Lee (2010) in research today. The participants who replied to the opinionnaire in December 1960 were not career changers but had chosen to become teachers before attending college or after college enrollment (Fox, 1961). These teachers stated they were influenced to teach by two factors which were: "the desire to work with children or adolescents and the desire to impart knowledge" (Fox, 1961, p. 428). Other factors mentioned were:

- the opportunity to continue their own education;

- the opportunity to leave the teaching profession and return to it later;

- the desire for security;

- the comparatively short school day, long summer vacation, and many other vacations; and

- the trend toward increasing salaries of teachers (Fox, 1961, p. 428).

These factors were indicative of the intrinsic and extrinsic motivations of people wanting to be teachers. Fox (1961) was trying to determine how to entice more qualified people to become teachers as there was "a critical nationwide shortage of teachers which is expected to become even more critical within the next few years" (p. 427). This research was completed in 1961 and today in 2016, which is 55 years later, there continues to be a teacher shortage and many of the same basic factors involving the motivations for people to become teachers are the same.

Busacca (2007) supports the career construction theory as being the most efficient method for vocational counselors to understand the career problems of those people seeking assistance to obtain jobs. Busacca (2007) noted "in this comprehensive theory, Savickas (2001) incorporated Super's (1957) innovative ideas with a constructivist perspective to help counselors comprehend clients' career problems" (p. 57)   Busacca (2007) stated, "Career construction theory views the client from three perspectives: individual differences in traits, developmental tasks and coping strategies, and psychodynamic motivations" (p. 57). The career construction theory is directed at having clients give their views and assessments about themselves and their situations instead of using objective tests and conclusions by counselors. Busacca (2007) indicates the clients do not fit as well in a predefined assessment for a career as they do when personally conveying what they want to do. The client needs to address what they would be happy doing and finding out how they could be able to perform work in that setting.

Career concern was one of the dimensions stated by Del Corso et al. (2011). Busacca (2007) stated that, "A lack of career concern manifests as indifference and reflects planlessness and pessimism about the future" (p. 63). Busacca (2007) looked at the vocational personality of the clients and their career adaptability. The strategies used for problem-solving and coping

behaviors "provide a schema to understand how a client may effectively manage transition" (Busacca, 2007, p. 62)).

Savickas (2012) discussed the new paradigm of the nontraditional job changer. Instead of staying in a job for 30 years and retiring, they are now finding themselves changing jobs due to layoffs, business closings, job dissatisfaction, and downsizing of businesses. Many job hunters are experiencing some of the same troubles that studies have identified about second-career teachers. The paradigm of life design and how career counselors can help people deal with job changes is explained by Savickas (2012). The participants are invited to tell their stories about life, their jobs, gender, social, and race issues. The stories are constructed and told counselors who then deconstruct the stories. This process allows the stories to be clarified and to bring out items that are possibly missing from the client's original perceptions. More facts are gathered from the client who has been enlightened with the counselors' findings. These facts are then used to reconstruct the identity of the client. This information is used to create a larger narrative of the clients beginning stories. The client reviews the portrait of his/her life and proceeds to edit some of the collected data which is the construction stage of the process. Savickas (2012) states, "With this new-found clarity, clients may envision the next scenes, form intentions, and begin to act (p.17).

Biblical Transitions to Teaching

The book of Acts in the Bible provides a great example of someone who transitioned from a life of persecuting people to someone of concern for everyone. Saul was a Jew who was motivated to enforce Jewish laws and customs. He persecuted Christians and disciples of the Lord until God struck him with blindness on the road to Damascus (Acts 9: 1-9). This provided new perspectives for Saul and he decided to ask what the Lord would have him do. After 3 days

without sight and not eating or drinking, his blindness was lifted. After being able to see, he was baptized and then spent time with the disciples (Acts 9: 18-27). This is amazing how someone can within 3 days change their entire philosophy on life from hating Christians to serving Christians. Saul was born a Jew but his father was a Roman citizen so he was also given the name of Paul. After this life changing event Saul decided to change his Jewish name of Saul to his Roman name, Paul. Reading about Paul's life allows one to view him as a second-career teacher.   He talks about his trials in life with some people not liking him, the mention of a "thorn in his side" that never goes away, and being imprisoned (2 Corinthians 12: 7; Acts 16: 230. Prior to transitioning, Paul was filled with hatred for Christians so it is amazing how this mindset could be removed and replaced with serving the Lord just within three days. Being blind would certainly give someone a wake-up call but as a researcher I would ponder about being able to understand how Paul did not reverse his commitment to serving God especially when conditions were not favorable for him. Instead he accepted his new position as a teacher to many people and continued through much adversity to maintain his career commitment; as defined by Del Corso et al. (2011) "Commitment as an attitude requires individuals to cope with uncertainty" (p. 101). Applying this insight regarding Paul's life, I am wondering if transitioning from a healthcare position to being a second-career teacher could be as difficult. It is necessary to remember and apply, "I can do all things through Christ which strengtheneth me" (Philippians 4: 13, King James Version).

Moses was a Hebrew baby saved from being murdered by his mother hiding him in a floating basket caught in the bulrushes of the Nile River. An Egyptian princess found him and raised him. He was not aware of his Hebrew heritage but had empathy for the Hebrews that were persecuted by the Egyptians. He saw a Hebrew being beaten by an Egyptian and killed him

to free the Hebrew (Exodus 2: 1-15). Consequently, he left immediately and went to Midian

where he became a nomad shepherd and married Zipporah, an Ethiopian who did not share his

Jewish faith. This was a transition going from being the son of an Egyptian princess to working

with animals and living with a family of a different culture (Exodus 2: 16-22).

Moses was tending the sheep when Moses saw a burning bush that did not burn. God

spoke to him and requested he lead the Jewish people out of Egypt (Exodus:1-10). Moses had

objected to the Egyptian beating the Hebrew and knew he was a fugitive for killing the man.

How could he go back without being captured and put in prison? Why would he want to leave

the life he was establishing in a new place? He was not someone who spoke well and did not

feel confident about a new job assignment. "Moses said unto God, who am I, that I should go

unto Pharaoh and that I should bring forth the children of Israel out of Egypt?" (Exodus 3:11).

God then explained the job to him and the benefits he would be given. It appears the intrinsic

motivations researched by Williams and Forgasz (2009) could apply to Moses' decision to

follow God's directions. Moses would make a contribution to the community of people. He

could make a difference doing something meaningful by improving living conditions for the

Jewish people. He could also be satisfied with serving God (Exodus 1-9). Again, Moses tried to

decline, "And Moses said unto the Lord, O my Lord, I am not eloquent, neither heretofore, nor

since thou hast spoken unto thy servant: but I am slow of speech, and of a slow tongue" (Exodus

4:10). However, the Lord was not changing his mind. This job was assigned to Moses.

One can only imagine what Moses may have felt during the time in Egypt trying to

convince Pharaoh to let the people leave with him. He had to deal with conflict and negativity

such is often found in the workplace. I am sure he reflected about his decision to transition to

this new job and did not think about the benefits that had been offered. God asked him to

transition from the life of a shepherd who had killed an Egyptian to go to Egypt and implore

Pharaoh to release the Jewish people. Moses lacked confidence, made excuses, stammered, and

did not feel qualified. Imagine the trials he faced not wanting to be a second-career changer.

Moses followed through with his devotion to the Lord and took on the responsibility. Moses

accepted the position and asked his brother Aaron to help him by speaking for him when they

went to Egypt. Since Moses was not a good speaker, he had his brother say what was necessary

to Pharaoh (Exodus 4: 10-16). It is possible as things fell into place and he accomplished the

tasks God had directed him to do, that he could feel a sense of satisfaction. He probably gained

some of the career confidence and commitment discussed by Del Corso et al. (2011).   Moses

parted the Red Sea and gave the people the 10 commandments. No matter how good things

could be, Moses still had to deal with the people who made idols and who went against the

company policies. These things made it difficult for Moses to remain in his position at that time

but he continued to try to teach the people to have a better way of life. I am sure it would have

been interesting to interview Moses about his second-career.

<div align="center">**Summary**</div>

Common problems for transitioned second-career teachers are lack of support and having

experience but lacking confidence in a new environment without the previous network of

cohorts. The environments in K-12 and postsecondary institutions are entirely different from

what they experienced during their first careers. Feeling mature, competent, and experienced

does not always help when walking into a totally new situation which can remove the comfort

zone of competence (Mayotte, 2003). Researchers have identified themes regarding the second

career teacher which are:

- Learning and Identity

- Prior experience and Personal beliefs,

- Looks Good – Time is Right – Teaching is for Me

- Career Entry vs. Career Exit

- Loneliness vs. Autonomy

- Fear vs. Confidence

- Responsibility vs Authority

Qualitative studies have determined why people have left successful careers to become teachers (Anthony & Ord, 2008; Mayotte, 2003). A few researchers have examined the relevance of pedagogical skills needed by professionals switching to teaching. Most of the studies indicate the problems second-career teachers from other professions are confronted with during the transition to teaching but none of them address the specific problems of the HIT faculty. I was not able to find any studies done about HIM professionals who switch to teaching careers during my review of the pertinent databases including the AHIMA Journal and Perspectives in Health Information Management. I want to discover what the HIT professional experienced during the transition to become a teacher. With the 21st Century bringing more demands for knowledge and expertise of HIM professionals, it is necessary to identify the concerns and needs of teachers in HIT programs (Brodnik & Watzlaf, 2013). The healthcare organization, AHIMA, is on the road to making changes in the education programs as well as the education of its members (Biedermann & Fenton 2012). Due to the lack of research about how the HIT faculty transitioned to teaching, there is a significant gap in the literature which this study may begin to fill and could generate more research. This could then result in programs being established at more colleges to increase the availability of accredited training for students to fill a growing demand for healthcare workers.

This study fills the gap of not having any research that explains the transitional journey of an HIM professional to a teaching position in a postsecondary institution. Most of the research discussed in this chapter has a common theme that regardless of the second-career teacher's knowledge, skills, and previous work experience, transitioning to become a teacher is not an easy journey.

CHAPTER THREE: METHODS

Overview

A transcendental phenomenological design was used in this study to describe the experiences of selected Health Information Technology (HIT) faculty members as they made the transition from a professional career in healthcare to teaching in an institution of higher education. How the HIT faculty/participants are selected is explained in this chapter. Included in Chapter 3 is the: (a) research questions, (b) research design and methodology, (c) procedures, (d) data collection, (e) data analysis, and (f) information about the trustworthiness of the findings.

The American Health Information Management Association (AHIMA) accredited Health Information Technology (HIT) programs prepare students to work in a variety of positions in non-clinical healthcare settings. Some may specialize in management, medical coding, or release of information (ROI) and later move into different areas to increase their expertise. After 5 or more years in the healthcare workplace, some may apply to teach in an HIT program at the local community college. Others may be invited by the institutional administration or by a member of AHIMA to be the director of a new program or fill the vacancy in an existing program when the present director has retired or resigned.

Within the college, the HIT program may be placed under the departments of: (a) workforce development, (b) office systems, (c) allied health, or (d) business. Students, who graduate from accredited HIT programs, may sit for the Registered Health Information Technician (RHIT) examination. Those professionals who work in non-clinical healthcare, who maintain their credentials by submission of annual continuing education units (CEUs) and have job experience are sufficiently qualified to be considered as candidates for teaching positions in

the HIT programs. Researches by Samaras and Wilcox (2009), Watt and Richardson (2007), and Williams and Forgasz (2009), describe the experiences of people who choose to become second-career teachers in a K-12 setting. Understanding how and why current HIT faculty made that journey is important to being able to inform others to consider using their extensive knowledge to teach. The purpose of the study is to seek information about difficulties involved with making the transition to find ways to make it easier to become a second-career teacher.

Design

The choice of design was based on this quoted statement (as cited in Moustakas, 1994) "Husserl's phenomenology is a Transcendental Phenomenology. It emphasizes subjectivity and discovery of the essences of experience and provides a systematic and disciplined methodology for derivation of knowledge (1965, pp. 5-6)" (p. 45). There are two types of phenomenology and one is hermeneutical which is defined by Van Manen (2014) as "a method of abstemious reflection on the basic structures of the lived experience of human existence" (p. 26). The second one is Transcendental which is defined by Moustakas (1994) as

> disciplined and systematic efforts to set aside prejudgments regarding the phenomenon being investigated (known as the Epoche process) in order to launch the study as far as possible free of preconceptions, beliefs, and knowledge of the phenomenon from prior experience and professional studies – to be completely open, receptive, and naïve in listening to and hearing research participants describe their experience of the phenomenon being investigated. (p. 22)

I want to obtain the personal views of the HIT faculty that describes their transitions to teaching and analytically process the findings to discover the essence of their experiences. In this qualitative study, my goal is to identify the experiences of individuals who leave positions in

healthcare to be a transitional or second-career teacher. I want to capture the essence of the reflective statements provided by the participants. A qualitative researcher must be willing to spend a massive amount of time in the field in order to build rapport with participants while collecting vast amounts of data. Then the researcher must carefully and skillfully analyze all aspects of the collected data while reviewing the transcribed statements. I wrote a report of considerable length explaining and defining the information which will describe the intricacies of the complex data compiled from interviews, observations, questionnaires, and protocol writing. It is necessary for me to use a qualitative research design because there is no previous research upon which to build. Also, it is necessary to use multiple methods to reveal and capture the in-depth feelings, challenges, and experiences of the HIT faculty in their natural setting. This is a phenomenon specific to HIT faculty because they are not required to complete additional education and are working with students who are seeking a degree to work in the field in which the HIT faculty are experts.

The two leading philosophers of phenomenology, according to Moustakas (1994) were Descartes (1977) and Husserl (1970), who were "philosophers who recognized the crucial value of returning to the self to discover the nature and meaning of things as they appear and in their essence" (p. 26). The purpose of phenomenological studies is not to solve problems. Instead, the purpose is to provide understanding and meaning of the problem being studied. The researcher becomes a member of the sample and attempts to immerse him/herself into their experience.

Moustakas uses descriptions from Husserl to explain the word, transcendental. However, Moustakas (1994) stated, "From the perspective of transcendental philosophy, all objects of knowledge must conform to experience. Knowledge of objects resides in the subjective sources

of the self" (p. 44). Moustakas (1994) explained transcendental phenomenology based on the information from Husserl (1965): "It is considered 'transcendental' because it adheres to what can be discovered through reflection on subjective acts and their objective correlates" (p. 45). The transcendental phenomenological research design is a scientific study of persons, and the collected data is used to allow me to question participants to obtain their reflective thoughts of lived experiences (Van Manen, 1990). According to Moustakas (1994), the textural descriptions of the participants' experiences describe *what* they experienced, and the structural descriptions explain *how* they experienced the transition to a second career. In research, transcendental phenomenology is describing the experience while hermeneutic phenomenology involves interpreting the experience. The study is transcendental due to my wanting to describe the phenomena instead of explaining it. Having shared experiences with the participants allows me to be a key instrument in this study by designing appropriate questions, observing, and interviewing. Ontological assumptions are made by constructing multiple realities gleaned from the categorized data. I will use the interpretive framework lens of social constructivism and use inductive logic to develop the ideas and thoughts compiled from the collected data.

It is important to be able to explain the feelings and emotions, which revolved around the transition experience of the HIT faculty. With this understanding of the experiences it should be possible to discern the path taken by those, who wanted to make the transition to teaching but are deterred by the unknown consequences. Then to appropriately discern the essence of the phenomenon, it is necessary for me to provide a formal epoche statement (see Appendix B for epoche statement) in order to clearly separate my own attitudes, beliefs, and knowledge from the focus of the study. In this way, I could increase objectivity during the collections and analysis of

the data. It is necessary to remove personal feelings and bias to appropriately arrive at what is true and not distorted by my incorrect perception of the phenomenon.

Research Questions

RQ1: How did Health Information Management (HIM) professionals experience the transition from professional careers in healthcare to teaching positions in community colleges?

RQ2: What concerns did the transition present to the HIT faculty while they worked as educators in the accredited associate programs?

RQ3: How did the HIM professionals overcome the challenges of the transition from the healthcare work place to faculty in a community college?

Setting

In one of the states in the southeastern United States, there are 10 colleges which offer HIT Associate degree programs and are accredited by the Accreditation for Health Informatics and Information Management Education (CAHIIM). The requirements for accreditation of the HIT programs is an extensive process. The qualifications and responsibilities of the program director and faculty are clearly defined. The postsecondary institutions must provide appropriate resources to achieve the goals and outcomes required for the programs. Students' progress is evaluated frequently to ensure the curriculum includes clearly written syllabi and appropriate competencies. Any changes in personnel or program at the educational institution must be reported to CAHIIM. Once a program is accredited, annual reports are submitted and periodic site visits are made to ensure the quality of the program is maintained. These community colleges were selected because traditional courses and online courses are available, and they are centrally located to my residence. Although this is considered a convenience sampling, it should not affect the credibility of the collected data because all the selected colleges share a

commonality with other colleges that have accredited HIT programs due to accreditation requirements. The state in this study is identified as Southeast, USA, and the colleges are identified using alphabet letters A-K. Students' participation in these accredited programs prepares them to work in non-clinical healthcare positions such as: managers, medical coding and reimbursement, and release of information. Coursework consists of: anatomy and physiology, legal aspects, management, medical coding, reimbursement, electronic health record, medical terminology, and computer literacy.

Participants

The sample consisted of HIT faculty who teach at 10 colleges in one state in the southeastern United States, where accredited HIT Associate degree programs are offered. Each program is required to have a minimum of one director and one full-time position, which hold the AHIMA credentials of Registered Health Information Administrator (RHIA) or Registered Health Information Technician (RHIT).

Purposeful sampling was conducted with the use of specific criteria. The faculty have worked as a professional in HIM for a minimum of five years before they transitioned to teaching, although there will no minimum number of years required for teaching experience. The gender, race, and ethnicity of the participants may be limited due to who is teaching at the selected accredited community college programs who agree to be part of the study. It may be necessary to seek out other accredited colleges to obtain a maximum variation of candidates. Creswell (2013) stated, "a heterogeneous group is identified that may vary in size from 3 to 4 individuals to 10-15" (p. 78). Each college has a minimum of two full-time faculty who will be participants from 7 colleges which included a total of 14 participants which are listed below with their pseudonyms.

Table 1

Demographic Data for Participants (N = 14)

Name	Ethnicity	AGE *	Gender	Marital Status	Years in Healthcare	Years as Adjunct	Years Full-Time Faculty	Degree Level **
Alice	C	38	F	M	5	0	13	B
Betty	C	46	F	M	5	7	10	B
Cassie	C	46	F	M	5	0	17.5	B
Gladys	C	32	F	M	3	0	5	M
Harriett	C	37	F	M	13	0	5	M
Helen	C	44	F	M	20	2	2	B
Jane	C	36	F	M	11	12	4	B
Janet	C	37	F	M	4.5	1.5	14	M
Kelly	NA	37	F	M	12	0	5 mos	A
Margaret	C	48	F	M	12	3	10	B
Martha	C	51	F	D	14	0	17	M
Mary	C	31	F	M	2	0	5	M
Nora	W	57	F	M	15	11	16	M
Susan	C	33	F	M	6	1	5	B

Note: * Average Age is 41 years; ** A = Associate; B = Bachelor Degree; M = Master's Degree.

Ethnicity: Caucasian = C; White Non-Hispanic = W; Native American = NA

Procedures

After completion of a successful defense of my proposal, I submitted the requisite

paperwork to the members of the Liberty University Institutional Review Board (IRB) for

permission to conduct the study and received approval (see Appendix C for approval letter). The IRB is a federally mandated body, the purpose of which is to ensure ethical treatment of participants in research projects. Consent was obtained from the college/program administrators using the letter located in Appendix D and the HIT faculty participants were contacted via mailed letters found in Appendix E. All data is secured in password protected computers, locked cases to transport data, and locked file cabinets. Analyzed data viewed by peers and others involved is bound to privacy and confidentiality statements. Member checking was done to obtain feedback from the participants and assure that they agree with their transcribed statements. Interviews of individual HIT faculty members was recorded and transcribed literally. I will write comments about the observations; in addition, the participants were asked to write in a journal, that reflected on their experiences. These data were triangulated with the collected data from the questionnaire and interviews.

The Researcher's Role

I had been an adjunct faculty teaching health related classes for four years and decided I wanted to obtain a position in the community college as full time HIT faculty. It was necessary for me to obtain a bachelor's degree so a friend suggested National Louis University where she was attending. She too wanted to be full time faculty at the HIT program and enrolled in the Healthcare Leadership program which required the students to attend one night weekly for 5 hours. I completed the B.S. degree and two weeks later began the Masters of Education program. I obtained the M.Ed. and in August 2003 began teaching in the HIT program at a community college with the title, Assistant Professor. I have some shared experiences of the same phenomenon with the HIT faculty who will participate in this study. As a researcher, I feel it is important to describe and explain the motivation and reasons by which HIT faculty

transition to teaching from a previous position in healthcare. I was motivated by my desire to be a teacher. I am not sure I experienced trepidations that others working in healthcare could feel while transitioning to second-career teachers. The HIT faculty could have a variety of backgrounds due to the many different non-clinical positions in the field. My expertise in the HIM field, as well as the Education Specialist degree I earned previously**,** will allow me to critically evaluate the faculty while interviewing and observing them. I am curious to know what the HIT faculty participants think and feel about their transition to teaching positions and how they will compare it to their previous work.

I want to obtain information about the HIT faculty participants' desire to teach and their perceived problems when these persons transitioned to teaching. Additionally, how long were these challenges present after they became faculty. It is important to the AHIMA organization to determine what will motivate qualified well-educated professionals to transition to teach and share their knowledge and expertise with students to better prepare them for the workplace. It is possible to remove some of the transition challenges for second-career HIT faculty.

Data Collection

I obtained IRB approval before data collection began. Afterward, data was collected through use of the following procedures: (a) a questionnaire, (b) interviews, (c) focus groups, and (d) protocol writing. I analyzed these data to identify meaningful statements, themes, and similarities. I contacted professional colleagues to review my research questions to determine whether or not the questions would produce the data needed explain the transition of the HIT faculty to become teachers. Based on their comments and suggestions received (see Appendix F audit trail) I added and revised questions for the interview and questionnaire.

Questionnaires

I developed an online questionnaire to gather demographic information about the

participations. The purpose of this instrument is to understand faculty perceptions about

teaching and self-reflections about subject matter knowledge. These questions (see Appendix G

for questionnaire) were provided in an online format for the participants to complete. This

provided demographic information as well as participants' viewpoints. After obtaining

electronic informed consent forms, the questionnaire was delivered via computers which allow

the respondent to feel comfortable and at ease. This provided a baseline of information about the

respondents.

Interviews

I conducted individual semistructured interviews with each HIT faculty at the college or

in a place that is comfortable for the faculty member. The length of the interviewwas determined

by how long the individual requires discussing the questions. The conversations with

participants were transcribed by me and coded to be analyzed for similarities and unique

responses. According to Moustakas (1994), "The interviewer is responsible for creating a

climate in which the research participant will feel comfortable and will respond honestly and

comprehensively" (p. 114). These interviews were scheduled at convenient times for the

respondents and built on the information collected from the online questionnaires. Information

provided by Roulston, deMarrais, and Lewis (2003) was used to develop questions (see

Appendix H for interview questions) and methods to do qualitative interviewing which is not an

easy process. Roulston et al. (2003) discuss how to prepare for the interview and to provide

clear instructions to the interviewee as well as explaining the way to ask questions. The purpose

of the first question is supported by Watt and Richardson (2007), who examined the intrinsic

values and added personal utility value which represented time with family, job security, and job transferability. Question 2 is grounded in Berger and D'Ascoli's (2012) findings that second-career teachers could not always remember why they changed jobs. McDonald (2010) explored nurses who became second-career teachers. The environment and culture of the educational institution was very different from having worked in healthcare settings and would address question 3. Del Corso, Rehfuss, and Galvin (2011) discussed how experienced people in a new work setting may feel like they do not fit in and may feel like a failure. This supports question 4 that states for the participant to explain how they felt. Adaption is the topic of question 5 which Powell (1996) examined how the personal practical knowledge affected the second-career teachers first year of teaching. Question 6 is about interactions with students which Christiansen (2003) examined the traits a teacher should have and that included knowing how to train, enlighten, and develop Mayotte (2003) was concerned about the Know-how from the previous employment and if that was enough to help the second-career teacher succeed in the classroom. Question 7 pertains to how the faculty feel about their positions could be supported by Tigchelaar et al. (2008) who discovered that many second-career teachers were disappointed that teaching as not what they had expected. Questions 8 and 9 explore the orientation and teacher training the HIT faculty experienced   Anthony and Ord (2008) and Samaras and Wilcox (2009) discuss the alternative certification programs and how they can be changed to better fit the needs of the second-career teachers.

Protocol Writing

Van Manen (1990) stated, "It seems natural, therefore, that if we wish to investigate the nature of a certain experience or phenomenon, the most straightforward way to go about our research is to ask selected individuals to write their experiences down" (p. 63). A positive aspect

of protocol writing was stated by Van Manen (1990) "Protocol writing is the generating of original texts on which the researcher can work" (p. 63). Even though this protocol writing could be a problem for some people in general, it can provide information from the study participant (Van Manen, 1990). It may also be a reflective time for the study participant to remember more about the phenomenon being studied (Van Manen, 1990). It is not unusual for a person to not know how to begin writing so to prevent that problem; I asked the participants to begin by just writing thoughts and ideas as it comes to them. The main purpose of the instructions (see Appendix I protocol writing instructions) is to discover the reflective happenings of the participants.

Data Analysis

Setting aside preconceived ideas and experiences with an objective perspective "known as the epoche process" (Moustakas, 1994, p. 22) the analysis involved imaginative variation which opens the mind to view the data from different perspectives with use of a variety of techniques. I carefully transcribed the interviews and observations to prevent misconstruing any of the meanings that may be gleaned from the words of the participants. I allowed the participants to review the transcribed information to assure accuracy. The questionnaire information was used to establish demographic information about the participants and the other data was coded for cross analysis with the data that is gathered. The analysis began with highlighting all terms and statements that are significant. This process is identified by Moustakas (1994) as horizonalization and "When horizonalized, each phenomenon has equal value as we seek to disclose its nature and essence" (p. 95). I used Imaginative Variation to explore the how of the experience which built structural description of the participant's journey and defined structural themes. This was explained by Moustakas (1994) that "Through

Imaginative Variation the researcher understands that there is not a single inroad to truth, but that countless possibilities emerge that are intimately connected with the essences and meanings of an experience" (p. 99). Moustakas (1994) provided examples of how textural descriptions describe *what* the participants experienced, and structural descriptions explain *how* the participants experienced the phenomenon. Data was sorted into appropriate categories and duplicate information was discarded. Data was sorted into appropriate categories and duplicate information was discarded and categorized by themes. I organized the data as follows: (a) Individual questions from the questionnaire and the interview were listed and the participants' answers were noted for each question, (b) Similar answers to questions were grouped together reducing the 25 questions to 20 categories, (c) The protocol writing was read and key points were selected, and (d) The 20 categories from the 25 questions and key points from the protocol writings were compared and matched to arrive at 11 main themes. The data from protocol writing was triangulated with the answers given on the questionnaires and the transcribed interviews to determine if there are obvious differences or information that may be sorted as outliers. Key themes that surface during the coding and categorizing of the answers given by the participants were matched for similarities and differences to clearly define the experiences (see Appendix J). The core themes were labeled. Validated examples of participant's words were presented to construct meanings about the experiences. The textural and structural descriptions were synthesized to construct the essence of the phenomenon.

Trustworthiness

Lincoln and Guba (1995) discussed how difficult it is to verify the truthfulness of a qualitative research. Even using the criteria of credibility, dependability, transferability, and confirmability could still produce questions that bring doubt and speculation regarding the

trustworthiness of the qualitative research findings. Anney (2014) found that the majority of

qualitative dissertations used the quantitative criteria validity and reliability for trustworthiness

instead of the qualitative criteria of credibility, dependability, transferability and confirmability.

According to Anney (2014) to reinforce the value of the findings, it is necessary to have (a)

prolonged engagement, (b) use peer debriefing, (c) negative case analysis, (d) persistent

observations of participants, (e) provide thick description, (f) produce an audit trail, (g) stepwise

replication and code-recode strategy, and (h) establish a reflexive journal. I intend to review the

collected data from different perspectives and to apply the four criteria of (a) credibility, (b)

dependability, (c) transferability and (d) confirmability to arrive at the most accurate and factual

findings.

Credibility

The credibility of this study is based on the use of member checks and direct quotations

including triangulation of the data to support its reliability. In member checks the participants

was asked to provide feedback regarding the findings and interpretation that are written and

recorded by me. The triangulation was done using the collected data from the 10 intended

participant's questionnaires, interviews, and observations. The validity of the questions and the

analytical methods used to elicit the in-depth feelings and thoughts of the participants provided

strength to the findings. Van Manen (2014) stated, "The validity of a phenomenological study as

to be sought in the appraisal of the originality of insights and the soundness of interpretive

processes demonstrated in the study" (p. 348). The participants, with their years of experience

and professionalism, provided substance to the study findings as they adhere to the Code of

Ethics which was established in 1957 by the American Medical Record Association (AMRA).

The title, AMRA, was changed to AHIMA, and the code of ethics has been updated to meet the present needs for ethical behavior.

Dependability

The community colleges are similar, and the programs are operated using the same curriculum. The faculty who participated in this study were credentialed and knowledgeable of the expected program standards. My position was clarified throughout the study regarding researcher bias. The strategies of an audit trail and code-recode methods was used. I requested a peer review done by two people, who have HIM credentials and a master's degree. The two qualified persons reviewed the coding process, which is established by me, to arrive at the textural and structural descriptions and further refined to identify the essence of the phenomenon. Also, the persons completing the external check were also be qualitative researchers who are familiar with the coding process and coding software. An interview protocol was used to maintain a consistent compilation of information. An interview protocol was used to maintain a consistent compilation of information. I compared and contrasted data between each faculty member who may have a variety of experiences due to their years of teaching, healthcare work experience, and the transition to different colleges which could provide more categories to be integrated into the findings of the study.

Transferability

The participants were chosen for a maximum variation sampling that ensured differences and their views and insights were transcribed to provide thick, rich descriptions. The sample taken from seven community colleges provided data that may be applicable to the other three community colleges in the state. The findings from these data may be applicable to all colleges that offer HIT degree programs.

Confirmability

Member checking of the data gathered from transcripts were used to confirm the findings. Extensive analysis of the data, with the use of triangulation and a reflexive journal, could the findings meet the criteria for the appraisal and interpretation of the information collected. Several AHIMA education experts, who did not participate in the study, were asked to review the findings to provide additional insight and verification.

Ethical Considerations

In order to remain within the criteria required by the IRB the college/program administrators and participant consent forms were developed and distributed to all parties. The primary purpose of the consent forms was to emphasize to the participants, that their data will not be available or identifiable to any person other than the researcher; in other words, anonymity will be maintained. The information collected from the colleges and participants will be maintained in a locked file cabinet as well as a password protected computer. The researcher will assign pseudonyms for the colleges as well as and the participants.

Summary

I wanted to understand and describe the scope of the difficulties and positive experiences encountered by the HIT faculty members as they transitioned into a new field of work and environment. The data collected from the questionnaire, interviews, and protocol writing are intended to present a clear and unbiased picture of how this transition occurred for this faculty. The findings were used to better assist more professionals to consider being recruited as future candidates to teach in HIM programs.

CHAPTER FOUR: FINDINGS

Overview

The purpose of this transcendental phenomenological study was to understand the experiences of selected Health Information Technology (HIT) faculty members, as they made the transition from a professional career in healthcare to teaching in an institution of higher education. I wanted to identify the motivational factors, which encouraged the HIT faculty to transition from their work in healthcare to teaching. Presented in this chapter are the analyses of the collected data from the participants, to identify the subthemes and themes, which evolved will present documentation from the participants, the themes and subthemes in the data analysis, and the instruments used to collect the data.

The HIT administrators of 10 community colleges, in a state located in the southeastern section of the United States, were contacted to obtain permission to conduct a study in their department. Of these colleges identified as A-G to maintain anonymity, eight administrators agreed to allow this researcher to conduct th**e** study. One college administrator replied that the college was a non-research based institution**,** and they did not approve requests from outside entities if the research did not fulfill an immediate institutional need. One administrator did not reply, even though another letter was sent, and 3 phone calls were made by the researcher. One college administrator agreed to participate; however, the HIT program director reported that she did not have time to participate. A total of 14 faculty at 7 community colleges, signed and returned the Participant Consent Form.

The qualifications for faculty participation detailed in the participant consent form were: the faculty participant should be more than 20 years of age, and he or she should have worked in healthcare for a minimum of 5 years before the transition to teaching. Further, each member of

the sample ($N = 14$) was to: (a) complete a questionnaire, (b) participate in an interview, and (c) complete a reflective protocol writing. There was a total of 14 participants. In addition, even though the participants signed the consent form, when the data were analyzed, it was found that 3 of the participants had worked in healthcare less than 5 years. All participants are identified by pseudonyms in the research findings. Four faculty at 3 different colleges did not submit the protocol writing.

Participants

The 14 participants ranged in age from 31-57 years; all were female and married, except one, who was divorced. These HIT faculty had worked in healthcare from 2-20 years before teaching. Data were collected over a period of 5 months, and two or three replies were received weekly. Of the 14 participants, 7 had been adjunct faculty prior to becoming full time faculty. A master's degree was held by 8 full-time faculty, a bachelor degree by 5 of the faculty, and 1 currently holds an Associate degree while she worked on a bachelor degree. Of the 14 faculty, 3 had less than 5 year's work experience; their data and the other participants' data are presented in the text and Table 1 to elicit facts that were related to the transition from healthcare jobs to teaching in the HIT programs. The questions developed for the interviews were designed to encourage participants to provide rich data and address several different categories. Major concerns were how the participants' family and significant others helped or hindered the transition from healthcare to teaching. the training and orientation received during the transition, the culture of the community college at which they were employed, and reasons for switching careers from healthcare to teaching. Further, during the interview, I asked related questions which generated additional information.

A second method of gathering information on these topics was Protocol Writing which allowed the participants an opportunity to refresh their thoughts about their journey from healthcare to a second career as a teacher. I urged them to just write thoughts somewhat randomly without concern for grammatical errors. It was essential for the participants to feel free to reflect upon their transition from the past to the present to explain how they felt. However, four of the participants did not submit the protocol writing activity and never stated the reason for not completing the research. The following are a summary of the interviews and protocol writing for each participant.

Alice

Alice, a Caucasian, is 38 years of age and married and worked five years in management after obtaining a bachelor degree. She gave educational presentations to physicians and staff, which helped prepare her to teach in the HIT program. Also, Alice has worked with students assigned to clinical practice at the healthcare facility. She felt a mentor program would help new instructors. Alice said, "I am more introverted and teachers are not normally. I worried if it was a good fit for me. I am sometimes fearful but I am fine now."

Betty

Betty began work in healthcare while in high school in the dietary department and continued her education to obtain a master's degree in adult education. She is 46 years of age, a Caucasian, married, and worked five years in healthcare. She indicated, "I see myself as an experienced instructor, but I am aware that technology changes and health care changes, and I need to stay on top of it. It takes a lot of time to keep up with everything." Also, she also indicated a mentor program would be helpful.

Cassie

Cassie obtained a bachelor degree and worked in management but had no desire to teach. However, a university classmate wanted her to accept a teaching position, which Cassie finally accepted, but after a year went back to a management position. She is a Caucasian, 46 years of age, and married. When told that the program was going to close if someone did not help, Alice changed her mind and took the position as director and turned it around. Her management skills paid off and helped the students. She stated in her reflective writing:

I had spent the first few years trying to figure out what I wanted to do with my career. I have found it. I don't see myself leaving Higher Ed and returning to HIM at this point. I love my job and our college. It is the most rewarding, fulfilling and while it can be frustrating at times to deal with the system, I wouldn't want to be anywhere else.

Gladys

Gladys is 32 years of age, a Caucasian, married, and worked three years in healthcare. She obtained an RHIA after graduation from the university and then worked as a Document Analyst who educated physicians. After the first year of teaching, she reported that she earned a master's degree before she had children. Gladys stated:

I am privileged to have the opportunity to teach what I know and love through my knowledge and experience to students and be able to connect with the community to fulfill the needs of employers with quality graduates of the program. My interest in education is a culmination of my personal interest in learning and sharing that knowledge with others and my professional duties to my students.

Harriett

Harriett is 37 years of age, married, a Caucasian who worked in healthcare for 13 years. She suffered burnout before making the transition to teach. After hired in the position of HIT program director, Harriett obtained a master's degree. During the interview she said, "Deep down I always wanted to be teacher. I wanted to do it out of high school but went to college and changed my mind."

Helen

Helen is a 44-year-old, married, Caucasian with a bachelor degree. She worked in healthcare as a manager for a hospital, physician office, and vendor for 20 years before making the transition to teach. I asked her how she felt after her first term. Even with the vast amount of knowledge and experience she had, Helen replied, "I felt relieved in a lot of ways as it was behind me and I knew I could do it but I realized I had a lot to learn."

Jane

Jane worked as a medical coder after graduating and obtaining a bachelor degree and RHIA credential. She is a married 36-year-old who stated, 'I loved my time at the hospital and I learned a lot of new things." After working at two different hospitals and an outpatient facility, she was asked to teach medical terminology as an adjunct. During that time, she was offered a full-time teaching position but said: I had to decline because the timing just wasn't quite right. Later I was fully vested in the company's pension plan and my daughter was also going to be starting kindergarten that August. The timing was perfect so I decided to apply for the position and was hired.

Janet

Janet is a married 37-year-old who held a variety of positions from nursing assistant to medical records supervisor. She was also an adjunct instructor for 1.5 years before being hired as full-time faculty.   Janet indicated that, "I felt like I gained a variety of experiences related to HIM being in a supervisor's role and having the technical skills and document management. I chaired the quality assurance committee. I felt prepared from that stand point that I had gained a lot of experience in a short time."   Janet felt her education was lacking so she obtained a master's degree in health science with a concentration in adult studies.

Kelly

Kelly had worked in healthcare as a coding supervisor and interim director for 12 years. She is a married 37-year-old native American Cherokee Indian. She stated, "I trained new employees, worked with clinical students and provided education for coders" Kelly has only been full-time faculty for five months. She recorded in her reflective writing:

> The college is definitely very different from the hospital setting. One of the biggest things that still throws me off is what the wear. We can dress more casually here, but I have a hard time with that sometimes. I still pretty much wear my dress clothes that I wore daily at the hospital because 1) That is what I'm used to, 2) We still need to dress professionally as an example to our HIT students, and 3) Since this is what I've had to wear at the hospital so long I don't really have "casual" dress clothes . . . yet. I am definitely adjusting to that, but that change is nice, too.

Kelly obtained an associate degree and the Registered Health Information Technician (RHIT) credential. She is currently completing a bachelor degree.

Margaret

After obtaining a bachelor degree, Margaret worked 9 years in healthcare, and then decided to be a stay at home mom. She is 48 years of age, married Caucasian, who was asked to teach online as adjunct in the HIT program. A few years later she was offered a full-time position and noted:

> It was different at first because I was so used to working at a fast-paced hospital but it was nice to slow things down a bit. Helping students achieve their career goals is an awesome feeling and I am thankful to be in this position. I wish the pay was better but the flexibility of my job helps outweigh that deterrent.

Martha

Martha is 51 years of age, divorced, and a Caucasian. Martha obtained a Master of Arts and a Master of Education. She stepped in months after the director had left and had no prior teaching experience. She stated:

> Obstacles? Yes, there were a few – especially with no experience at accreditation at the college level, but once I figured it out and had a site survey I was told ours was the first HIT program surveyed with no recommendations and we received high commendation. The most positive thing that came out of this was the accrediting body insisted that another full-time instructor be hired.

Mary

Even though Mary had only worked as a supervisor in healthcare for 2 years, she had experience working with students in clinical practice from the college and has a master's degree. Mary is a married 31-year-old who left healthcare sooner than planned due to changes being made at the hospital that was adversely affecting her job. At that same time, there was an

opening at the college closer to her home and she applied as she had enjoyed working with the students at the hospital. Mary stated in her reflective writing, "This job also allowed me to work from home and have more flexibility for my family."

Nora

Nora has a master's degree in Business Administration, has worked 15 years in health care, was adjunct faculty for 6 years, and has been full-time faculty for 16 years. She is a married 57-year-old White non-Hispanic who during the interview, was very energetic and positive about the college and the students. After all this time having so much experience her statement amazed me. She said, "My students have 100% pass rate and are above the national average so I must be doing something right but I am still nervous about it."

Susan

Susan is a married 33-year-old Caucasian with a baccalaureate degree who worked in healthcare 6 years and has been full-time faculty for 5 years. She heard the HIT program at the college was not very successful and the director had left and she had been encouraged to apply for the position. The program was in candidacy status and another full-time faculty member was hired. They worked late and met in the summer to put the accreditation materials together. Susan's reflective thoughts after hard work were:

> My most memorable moment so far teaching was when I graduated my first cohort. "We had developed such of a close bond, it was more like we were all family. In fact, the students surprised the other faculty member and I at the pinning ceremony by presenting us with a very nice glass award. Each cohort since then has also been special, but that first cohort holds a special place in my heart.

Research Question 1 and Results

Samples of the statements collected from the participants are provided in order to identify themes and subthemes of the study. This information is correlated with the research questions. The collection methods used were: (a) questionnaire, (b) interview, and (c) protocol writing.

RQ₁: How did the HIT professionals experience the transition from professional careers in healthcare to teaching positions in community colleges? The themes describing this question pertained to the experience of the transition. The orientation and training received at the college could have affected how the participants felt about being at the college setting. Having the HIT faculty explain what they liked about the college provided insight. The participants became animated when comparing the work schedules of healthcare and of the college. Information about their prior teaching experience and job skills gave an understanding of how well prepared they were to become full-time faculty.

Orientation and Training

Most of the participants received a general, 1 day orientation to the college and their duties as full time faculty. Alice and Harriet received orientation only from the HIT Program Directors. Cassie did not have a director and was given an office, books, and told to get the job done. Several commented that their previous on-the-job experience had given them the ability to assume the position, use previously developed skills, and be able to critically think through problems. Ashleigh and Betty indicated they agreed with mentor programs for new faculty. In general, it was determined a mentor program was helpful and beneficial to all concerned parties. According to these two HIT faculty, the mentee and the mentor both appeared to gain from the experience.

They did not complain about how they were oriented to the new positions and apparently, the new HIT faculty had been welcomed by other departmental faculty and experienced a good rapport at the different colleges. Kelly stated,

It is a smaller environment than an acute care facility, and it is more people driven than finance driven. Finances are of course an issue anywhere, but it is not the main focus of my daily tasks. There is also more opportunity to interact with students and colleagues, and there is time to focus on course prep, etc. which also helps my learning.

Like About College

Another unanimous opinion, which pertained to their sense of gratification, was when they saw their students graduate and successfully obtain jobs. During the interviews, the question about the rewards from their work elicited very positive responses, and the interviewees become animated and smiled. Jane stated, "The feeling of helping people achieve their dreams. I want to inspire others and this is one way that I can do that. I love to see my students walk across that stage on graduation day!" Kelly indicated that "the most rewarding part is helping the students change their lives and learn something new." The participants mentioned that many of their students had difficult life situations, due to low income or care for their children, but the participants talked about the self-satisfaction of being able to help their students reach their goals for a better life.

All the participants reported that they enjoyed the college environment and described it as family oriented with a smaller population than a university. The HIT faculty liked to work with adult students, who had access to affordable education to obtain new careers. Nora was very enthusiastic about how the community college had different departments, and faculty worked together on student projects. A group of students from the electronics engineering

Table 2

Like about the College Environment

Like about the College Environment	
Alice	Ability to impact so many lives and watch students reach their career goals.
Betty	Community college environment is about working with adults to help them prepare for new careers, improve job skills, or transition to higher educational institutions.
Cassie	Love the community college. I believe in what we stand for and the opportunities we provide to students.
Harriett	Mentor and assist students as they pursue education and future careers. Rewarding to see students achieve their goals and dreams of an education.
Gladys	Community college provides students access to affordable education that leads to employment.
Helen	Faculty and staff are there for each other and work together for the students. The community college provides opportunities for students who otherwise might not have them.
Jane	Love the community college environment. Most of the students are non-traditional and they are so eager to learn and apply their knowledge.
Janet	The community college environment allows flexibility for the workforce to learn new skills or update existing skills. Responding to the community of interest when creating a new program and sustaining that program are of the utmost importance.
Kelly	It is a smaller environment than an acute care facility, and it is more people driven than finance driven. There is also more opportunity to interact with students and colleagues, and there is time to focus on course prep, etc. which also helps my learning.
Margaret	I enjoy the small scale of the community college environment. I can communicate/relate to other departments easily. In a bigger institution, I don't think I would have that benefit.
Martha	I like that the Community College is like family. Everyone supports each other and the students.
Mary	The community college has a more relaxed atmosphere and it is smaller. It is more like family and you are able to build long lasting relationships with co-workers and students.
Nora	I enjoy the atmosphere of the community college environment. The time off over Holidays is great. You also get to know your students better in a small environment.
Susan	The diverse population in all aspects. Age, race, gender, economic status, etc…

technology helped students in the Marine Biotechnology program build a device to be used underwater; also, this required cooperation from the students in the welding technology department. Nora indicated how the culture of the community college developed team work and unity while students' real world knowledge was increased (see Table 5). Cassie summarized her feelings about the college environment and said, "I like what I am doing and don't want to do anything else. I love being in the classroom and being with the students. I can't ever imagine going back to the profession. I am married to education."

Comparison of Work Schedules

Participants' comments about comparisons between the teaching work schedule and the healthcare work schedule were quite similar. The flexibility of the teaching schedules allowed these faculty members to take care of personal and family matters while being dedicated to their jobs and able to communicate with students during *off work* time.

In addition, the HIT faculty enjoyed the Summer and Christmas breaks, so they could spend time with their family. Susan said, "I work 30 hours on campus and 10 hours from home each week, and I only have to work 9 months out of the year." Even though there are times that require extra work, such as registration or special events at the college, the participants enjoyed the Summer and Christmas breaks, so they could spend time with their family. Susan said, "I work 30 hours on campus and 10 hours from home each week, and I only have to work 9 months out of the year." Even though there are times that require extra work, such as registration or special events at the college, the participants unanimously agreed that the college work schedule was much more appealing. Not having to punch a time clock and not beg for time off was a major issue for most of the participants. All 14 of the participants were happy about the new schedule the college offered vs. the schedule offered by healthcare jobs**,** which the HIT faculty

Table 3

Compare and Contrast Work Schedules

Compare and Contrast Work Schedules	
Alice	Schedule is definitely more flexible than my previous work. I work M-F but check email on nights and weekends e to answer questions the students may have.
Betty	Healthcare working schedules and community college are very similar. The biggest contrast is the adjustment of schedules from semester to semester.
Cassie	Tired of traveling over three states.
Harriett	I was in management with 30+ employees and it was extremely political. I absolutely love my job as an Instructor/Department Chair.
Gladys	Teaching allows for more flexibility however, it is not a job that you leave the office at 5 pm and my students require me to be "on call" after hours.
Helen	I work "after hours" and answer emails at night or on weekends, I do not feel that I have to be available 24/7. I have a work-life balance.
Jane	The schedules are totally different. In healthcare, I had set hours. As a faculty member I have more flexibility. I have the summer off as well as holidays.
Janet	The teaching schedule is somewhat flexible as we are mostly hybrid program, but we do offer a day and evening program.
Kelly	Some days in healthcare, I did work remotely, and some days onsite. I am full time faculty being able to set my own office hours and having several breaks throughout the year is wonderful.
Margaret	As a manager, I worked 8-5 pm Monday - Friday on site at the facility and was on call on weekends. We are able to work from home instead of being on campus.
Martha	Comparison – M – F work week is about the same. I do take work home on weekends. Contrast – I get more time off in summers.
Mary	In healthcare, you work an 8-5 job and more hours when needed. As faculty, I have the flexibility to work from home and online.
Nora	The hours at the college are great, no overtime, no weekend work, or holidays. No fighting for time off. The hospital never shuts down.
Susan	In healthcare, I worked the typical 40 hour work week all year long. As a faculty member, I work 30 hours on campus and 10 hours from home each week and I only have to work 9 months out of the year.

had left to become teachers. The normal faculty requirement was to be on campus 30 hours a week and days off for holidays, summers, and Christmas/New Year holidays. Most college programs were off for the summer. Participants were unanimous about having more time with families and enjoyed the flexible schedules that could be altered to attend to personal needs. If weather conditions were bad, the school closed, whereas healthcare facilities and hospitals never closed. Cassie said, "Teaching is the best kept secret. You won't become a millionaire, but the payoff is much more rewarding."

Prior Teaching and Job Skills

Six of the participants had trained people on the job or had taught part time for some other institution than an HIT college level program. Combined with the seven participants who had been adjunct faculty, there was only one HIT faculty who had no previous teaching experience. None of the participants were concerned about whether they had been an adjunct instructor prior to becoming a full-time faculty member. Nora and Jane felt it was beneficial to have been an adjunct and felt it was easier to transition to full time faculty positions. Betty-stated, "Being an adjunct gives you the opportunity to see if you want to teach or if you want to continue working in the field." Overall, most did not feel it was imperative to be an adjunct first, but agreed that it probably would be an advantage to have the opportunity to manage one class before teaching five at one time. However, Janet, answered the interview question about the importance of being an adjunct, said, "Absolutely, I think it would be beneficial. I would not hire someone to be full time without any teaching experience."

Most Rewarding

Another unanimous opinion, related to their sense of gratification, was when they saw their students graduate and successfully obtain jobs. During the interviews, the question about

Table 4

Most Rewarding Part of the Job

	Most Rewarding Part of Job
Alice	Seeing students succeed and gain employment in their field.
Betty	Seeing growth in student learning, increased confidence, and success in completion of programs.
Cassie	Graduation and job placement is the reward. Watching students turn their lives around and provide for better opportunities for their families.
Harriett	When our students/graduates call with great news of passing their RHIT Exam or getting a new job! I love the excitement in their voice!
Gladys	When students are successful, meaning they graduate and get jobs and then come back and tell you "thanks"'
Helen	Seeing students succeed, whether it is graduation, passing their exam, getting their first job, etc.
Jane	The feeling of helping people achieve their dreams. I want to inspire others and this is one way that I can do that.
Janet	Seeing that single mom, shy young adult or shy distant male, entering a workforce dominated by mostly females, student walk across the stage at graduation knowing that you have had an impact on them on some level during their CC experience.
Kelly	The most rewarding part is helping the students change their lives and learn something new.
Margaret	When they report that they have passed the RHIT exam and acquired a position in the field is icing on the cake.
Martha	The most rewarding is seeing students transition from scared newbies to confident graduates.
Mary	It is rewarding to build relationships with students from all backgrounds and see all of what they overcome to earn their degree.
Nora	The most rewarding is when the student graduates, passes the RHIT exam and lands a job.
Susan	Seeing students begin the program scared and intimidated, but then finish strong and confident. Seeing proud families crying with joy for their accomplishment.

the rewards from their work elicited very positive responses, and the interviewees become animated and smiled. Jane stated, "The feeling of helping people achieve their dreams. I want to inspire others and this is one way that I can do that. I love to see my students walk across that stage on graduation day!" Kelly indicated that "the most rewarding part is helping the students change their lives and learn something new." The participants mentioned that many of their students had difficult life situations, due to low income or child care for their children, and how important it was to help their students reach their goals for a better life. Mary incorporated the thoughts of all the participants in one sentence: "It is rewarding to build relationships with students from all backgrounds and see all of what they overcome to earn their degree."

Research Question 2 and Results

RQ2: What concerns did the transition present to the HIT professionals who worked as educations in the accredited associate programs? The resolution of one concern generated a new concern. Concerns about the transition from a healthcare position to teaching at a community college caused the participants to wonder if they could do this. When offered the opportunity to teach, the participants had to decide if they wanted to teach. After deciding to teach, the question arose about which subjects they would teach.

Decision to Teach

The decision to teach was determined for some participants by changes in the healthcare environment due to for-profit corporations, which bought hospitals and caused job instability. Some individuals were annoyed with work schedules in healthcare settings and being required to travel extensively while they missed family activities. In some situations, the Directors of HIT programs at community colleges invited qualified candidates to consider faculty positions.

Christine responded, "There was an opening at a local community college that was closer to my home. This job would allow me to work from home and have more flexibility for my family. After I accepted the position, there were many bumps in the road due to my lack of training and communication." Gladys was thoughtful as she wrote, "I am thankful every day that I made the decision to teach . . . . see them come into the program knowing nothing about the health information field and then graduate and get jobs that greatly improve their lives." Jane began with, "When I began my college career, I had no idea what I wanted to do as far as a career." At the end of her reflection, she stated, "It's like seeing all of my children succeeding. It's an emotional time for me because I have invested so much time in these students and I feel like they are part of the family." Helen wrote, "I was in an unhealthy and demanding job. I was not valued as an employee, and I needed to find another job. After talking with the program director, I decided to take a leap of faith and apply to teach."

Life just seemed to occur at a time and place that allowed some participants to take advantage of the opportunity offered them to be full time HIT faculty. Kelly indicated that her earlier job was okay, and she had done it for 12 years, but felt the need to do something to help people. She said,

> One night I was sitting and thinking how I wanted to do something to help somebody, not just to help the finances of a company, which is what a hospital is in some respects. I was thinking about volunteering at the soup kitchen or finding something else that allow me to help people. Within a day or two after that I received an email that there was a FT teaching position open. It was perfect, and meant to be. It came along just at the right time when I was ready for a change.

Martha worked in a hospital facility, which had financial difficulty, and she thought it could possibly close, so she started to look for another job. Martha explained,

> I found an ad for an instructor at a college I had never heard of. I did not have a
>
> particular desire to teach, but though, with a young child at home, the change of schedule
>
> would be nice. I interviewed and was offered the position on the same day.

After teaching for 14 years, Martha reported that, "I am glad I was given the opportunity to be an educator. I have learned so much about the profession, life, and the world."

Cassie indicated she had ignored requests to teach and then when she realized the problems with her current workplace, and where it was headed, she had second thoughts. "I knew that I could help immediately with some of those problems, but I was going to have to learn a lot to become an effective teacher and employee within the Community College system." Cassie was enthusiastic and demonstrated her managerial attitude and approach throughout the conversation.

Could I Do This?

Gladys explained that she had felt overwhelmed but said, "I made it through the first semester, and I learned from my mistakes." Cassie said, "After first term of teaching. I was glad it was over but I taught a summer class and began to feel like I was getting in the groove." Nora stated in the interview, "I did not receive any training. I had no questions and it seemed as if I had done the job previously."

What Was Taught

The participants were asked about what courses they taught. The HIM professionals are taught all aspects of healthcare including management, coding, and reimbursement. Most of the HIT faculty teach a variety of courses, whereas there were two who taught the coding courses

with two or three of the other curriculum courses. No one complained about teaching any

particular course. These courses included (a) Professional Practice Experiences, (b) Record

Systems and Standards, (c) Reimbursement, (d) ICD10 and CPT Coding courses, (e) Medical

Terminology, (f) Health Informatics and EHRs, (g) Health Information Management, (h) Ethical

Aspects of HIM, (i) Statistics, (j) Principles of Disease, (k) Health Law & Ethics, and (l) Data

Utilization & Management.

Research Question 3 and Results

RQ3: How did the HIT professionals overcome the challenges of the transition from the

healthcare work place to become faculty in a community college? This question focused on

challenges which opens a board door with many issues to examine. What challenges one person

is either minor or overlooked by someone else. One of the challenges was teaching outside of

the participants' experience.   Another challenge was accepting what they may not like about the

college environment. It was necessary to ask about the most difficult part of making the

transition to teaching and what strategies were used to manage these challenges.

The combination of 15 years in the healthcare workplace with 11 years as an adjunct fully

prepared Nora for the full-time faculty position. Her comment about the challenges of the

transition to teaching was: "My journey of teaching seemed to come naturally and overall was a

although they were few, were not a real challenge to solve."

Teaching Outside Experience

Participants were asked what they would do if they were asked to teach subject matter

that was outside their realm of experience. All of them said they would research and study the

subject, ask other experts, and obtain training in the topic if necessary. It did not seem to be a

barrier for any of them. Helen said, "I would reach out for help from other instructors. I would

Table 5

Teaching Outside of Experience

	Teaching Outside of Experience
Alice	Research the topic and seek references in the field that may be able to assist me to gain the knowledge further.
Betty	Research the topic, network within the AHIMA association, and seek professional development.
Cassie	Professional development and rely on others that have taught the course before. I would use my network.
Harriett	Research the subject, read and review the textbook related to the subject, seek feedback from others, and review any teaching related course materials that are available.
Gladys	Start from scratch looking at the course objectives, assessing what I do know, reading and researching.
Helen	Request help from other instructors. I would learn as much about that subject as possible – reading the material, studying online materials, attending classes, whatever was necessary.
Jane	Become familiar with the subject matter. I will do research as I'm preparing the class. I'm here to help them the best I can but I can make mistakes just like they can.
Janet	Seeking professional development opportunities in the area would be my first step. Networking and learning from subject matter experts.
Kelly	Study the subject so that I would be comfortable with the topic before beginning the course and course prep, etc.
Margaret	Review the previous course if possible and the research the subject matter. Reading the textbooks required for the course would be necessary. Request ECC to provide specific training on the topic.
Martha	Study the subject material with any available resources (books, online, etc.) and carefully plan out the lessons step by step.
Mary	Review the previous course and read the course textbook and any supplemental resources.
Nora	Read the material to ensure that I had a good understanding and ask advice from someone who had taught the course.
Susan	Research additional resources to help myself gain a better understanding of the material to ensure I am teaching it correctly.

learn as much about that subject as possible, reading the material, studying online materials, attending classes, and whatever was necessary."

According to Tigchelaar, Brouwer, and Korthagen (2008), some second career teachers chose to leave teaching as it had not been what they had expected. These researchers had examined the backgrounds and experiences of the second career teachers in order to develop a training program that would better prepare them so they would not leave. It could have been a challenge for some teachers to teach a course outside their previous job experience. However, not one of the participants in this current study seemed to have had a problem with this type of situation (see Table 5).

Negatives of College Environment

The low salaries and limited funding were a negative factor of the community college environment**,** according to Margaret and Martha. However, they indicated that the additional time off and the flexibility of the work schedule justified the lower salary. Cassie mentioned her dislike of college politics. However, **s**he did not provide additional information about how it affected her personally. Politics and similar issues were something the faculty decided to work around and ignore (See Table 4). Helen observed that, "Coming from the environment that I did before teaching, I can't think of anything that stands out as a major negative. I think, more than than anything, I do not like the view that some people have of community colleges." Alice showed concern about, "The outside perspective of the community college being overshadowed by the 4-year university." The participants indicated they shared the concept that the colleges had a purpose to educate both academically and for jobs and should be recognized for how they helped students. The HIT faculty took advantage of opportunities to dispel any negative ideas about their colleges.

Table 6

Negatives of College Environment

Negatives of College Environment	
Alice	Outside perspective of "community college" vs. 4-year university
Betty	I have no dislikes, except maybe budget restraints.
Cassie	The politics.
Harriett	The majority of our students are on Financial Aid. It's difficult at times dealing with FA issues in trying to get students registered for courses.
Gladys	It does not always do a good job with getting students into the right programs based on their knowledge, skills, and abilities.
Helen	Coming from the environment that I did before teaching, I can't think of anything that stands out as a major negative. I think, more than anything, I do not like the view that some people have of community colleges.
Jane	A dislike would be the lack of opportunities for community college students. Universities offer so many opportunities for students that are just not feasible in a community college environment
Janet	Don't really have any dislikes.
Kelly	I'm still learning about different things here, but I like everything so far.
Margaret	The one aspect I like the least about working for the community college system is the salary. I have found that the salaries for community college faculty is much less than at the university level and potentially less than what some of our graduates are making.
Martha	The salaries are too low for the job duties.
Mary	Faculty have to submit midterm grades, notify students about attendance concerns, and withdraw the student from courses. Students have to be constantly reminded to stay on task. The less work a student completes in the course, it is more work for the faculty to document
Nora	The lack of funding received from the state and no job security.
Susan	The community college seems to have limited funding in comparison to Universities.

Most Difficult

None of the participants indicated any major difficulties in their transition to become a second career teacher. Their main concerns centered on whether they could do the job. Cassie reflected that, "I didn't see myself as an instructor but now I know I should have been a teacher." The HIT faculty focused on the most rewarding part of the job which was the students' success. The most difficult part of their job per Table 6 was related to students who struggled or failed. Or it was students who seemed to not be motivated to learn but wanted a passing grade.

Strategies Used

The 14 HIT faculty fearlessly met the challenges that may have occurred and conquered them. The strategy used to accomplish teaching unknown subjects (see Table 5) is an indicator of how the HIT faculty resolved a problem. They used previous skills and knowledge to brain storm and problem solve any situation or issue that confronted them. These professionals had to use their managerial training to problem solve and deal with unexpected issues every day in the healthcare workplace. They had to direct work and employees to get the jobs done. Alice suggested, "Definitely use a team approach and watch others. Professional development helped me learn how to engage students online." The participants used many types of office equipment and many computer software programs. They had to write documents, run reports, train new employees, and generally stay on top of everything that pertained to their department. Previous work in healthcare with teams and departments provided the HIT faculty with the stamina required to overcome obstacles. Nora stated, "The 11 years as an adjunct prepared me since I chose books, made syllabi, and performed other duties for the director of the program." The participants transferred their expertise with managing employees to managing classrooms and students. Helen insisted, "There are always better ways to teach something."

Table 7

Most Difficult Part of the Job

Most Difficult Part of the Job	
Alice	The most difficult part of my job is pushing the students to do their best and give it their all to the coursework that will pay off in the end.
Betty	Nothing was stated.
Cassie	It is difficult to watch a student with so much potential fall victim to life and have to quit school.
Harriett	Nothing was stated.
Gladys	It can be hard not to hand hold when you see a student struggling.
Helen	Working with students who, at times, have an "I don't care" attitude. They don't want to try or work hard for what they get.
Jane	Students from all types of backgrounds have a difficult time with classes and their personal lives. We try to help them through these experiences.
Janet	Nothing was stated.
Margaret	The necessity of dealing with difficult students. Some students feel they are entitled to an education and they don't want to work hard for their degree.
Kelly	Some students aren't as invested in themselves and their education in the program and it is frustrating at times to see them struggling due to not putting in any effort.
Mary	One of the most difficult parts is if a student is not successful and they have to be dismissed from the program or fail a course.
Martha	Dealing with personalities of those who are not in school for the right reasons.
Nora	Figuring out how to do more with less. Review of budgets for four programs, adjunct salaries for the year and other expenses such as accreditation fees etc.
Susan	Many students face horrific challenges while going through the program and often turn to me for advice. It is difficult to see my students struggle and not be able to always "fix it".

Summary

In Chapter Four, I presented the collected and analyzed data from the participants about their transition to HIT faculty from the healthcare workplace to being a teacher in the community college environment. Themes evolved from determining what the participants experienced during the transition, the concerns they had about making the transition, and the challenges they had while making the transition. In Chapter 5, inferences and conclusions are drawn from the analyses of the subthemes and themes. In addition, examples from the literature are included to provide support for the findings of this current study.

Also, validity of the findings is presented in Chapter 5. The findings were submitted to the participants for member checking. Horizonalization was done to identify significant data given by the participants. Triangulation was applied to the statements from the questionnaire, interview, and protocol writing of each participant to compare and explore how and what the participants experienced. The coded data was placed in tables to be sorted and categorized into themes. The implications of this study are examined to determine how the findings from this study could inform the AHIMA members' perspective of the field. The limitations and recommendations for future research are discussed to provide direction for ongoing studies.

Table 8

Themes and Subthemes Identified for Research Questions 1-3

RQ$_1$	RQ$_2$	RQ$_3$
Experience the Transition	Concerns of the Transition	Challenges of the Transition
Orientation/Training	Decision to teach	Courses Outside Experience
Like about colleges	Can I do This?	Most Difficult
Comparison of Work Schedules	What was Taught	Negatives of College
Prior Teaching and Job Skills		Strategies Used
Most Rewarding		Regrets

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CHAPTER FIVE: CONCLUSIONS:

Overview

The purpose of this study was to understand the experiences of American Health Information Management Association (AHIMA) credentialed individuals who worked in healthcare as they transitioned to becoming second career teachers. In this chapter I summarized the findings concerning the transition of individuals, who worked in healthcare jobs and became teachers in community college Health Information Technician (HIT) accredited programs located in a southeastern state of the United States.

Presented in this chapter are the subthemes, major themes, and the overarching inferential theme, which were identified in this study, based on the analysis of the data sources (e.g., questionnaires, observations, and protocol writing). Each of these categories of data are discussed and analyzed in regard to the findings for the three Research Questions.

Summary of Findings

The participants provided data for this transcendental phenomenological study by their completion of questionnaires, interviews, and a protocol writing. I transcribed and analyzed the data and used the research questions to identify three main themes which were: (a) the experiences of the HIT faculty, (b) the concerns of the HIT faculty, and (c) the challenges of the HIT faculty.

RQ1: How did HIT professionals experience the transition from professional careers in healthcare to teaching positions in community colleges?

In the analyses of data, themes and subthemes emerged, which explained how and why the healthcare professionals transitioned to teaching. Some of the participants enjoyed their healthcare positions but several were on-call 24/7, traveled, or had numerous duties in the

workplace. A few experienced changes in the workplace that affected their jobs, which meant they could be moved to a less desirable position or left without a job. Many of the faculty were responsible for training employees and were asked to teach at the local community colleges in the HIT programs. Seven of the 14 participants became adjuncts before they accepted full-time faculty positions.

Overall the orientation to the college environment was minimal for the 14 HIT faculty members. They used their competence and courage to establish their expertise with others at the college and continued to gain the intrinsic and extrinsic values of the self-determination theory (SDT; Deci and Ryan, 2000). The healthcare experience provided the participants with a wide range of skills and knowledge which they adapted to use in the college environment. The findings indicated the HIT faculty did not question what they were assigned to teach. They accepted the assigned courses, and studied the material, prepared how to teach it, and delivered it in the classroom. After the first term, a variety of comments ranged from Gladys, who said, "a little overwhelmed" to Margaret, who said, "Had to learn how to adapt.' However, there were no comments which suggested that the participants wanted to quit their new roles. Alice stated, "Education isn't stopping here. You must always be learning something."

RQ2: What concerns did the transition present to the HIT professionals who worked as educators in the accredited associate programs?

For many, the decision to teach was centered on convenience for the participants' families and reductions in salary. One or two gave it little thought and some felt unsure while others decided to accept the challenge. There seemed to be a balance between the pros and cons of teaching, and two of the HIT faculty decided to "take a leap of faith" and switch from

healthcare jobs to being a second career teacher at a community college. After taking the "leap of faith" the participants were concerned with "How do I do this?" and "Can I do this?"

Seven of the participants had been adjunct faculty prior to being hired as full time faculty. Jane described her experience as an adjunct by saying, "I was extremely nervous and did not know how my students would respond to me. Quickly, I was loving the job! As a matter of fact, I didn't consider it a job really at all. I would always look forward to the next time I would be in class." Then later she explained, "The timing was perfect so I decided to apply for the full-time position. I was offered the job and happily accepted it." Even though Helen had been an adjunct for 2 years she said this at the end of her first term of teaching: "I felt relieved in a lot of ways as it was behind me and I knew I could do it. I realized I had a lot to learn."

Cassie indicated:

There were a few bumps in the road and obstacles to overcome but it didn't take long for me to realize I was home here at the college. I had spent the first few years in healthcare trying to figure out what I wanted to do with my career. I have found it. I don't see myself leaving Higher Ed and returning to HIM at this point. I love my job and our college. It is the most rewarding, fulfilling and while it can be frustrating at times to deal with the system, I wouldn't want to be anywhere else.

Three of the HIT faculty were concerned about being able to teach and experienced trepidations about managing a classroom and being successful. Other researchers (Crane, O'Hern, & Lawler, 2009) indicated that even though the second-career teachers had much experience in the field, it was like beginning all over again with this new position. College administrators may fail to recognize the gap presented to new faculty as they adjust to teaching.

The adjustment of finding their place among career faculty on one side and critical students on the other may be daunting.

RQ3: How did the HIT professionals overcome the challenges of the transition from the healthcare work place to become faculty in a community college?

Tables 6, 7, and 8 in Chapter 4 address the comments the HIT faculty made about the teaching courses which were (a) outside their experience, (b)most difficult part of their jobs, and (c) the details about the community college, they disliked. The challenge of teaching a subject different from their work experience did not seem to deter any of the HIT faculty. The answers were basically the same. They would read, study, research, and consult with an expert on the subject to help them be prepared to teach it. Betty, Harriett, and Janet did not indicate there was anything especially difficult about their job. The other 11 HIT faculty shared the complaint of having to work with difficult students who were unwilling to apply themselves to learn.   Trying to help students with personal and/or financial problems and those struggling to learn. Betty, Janet, and Kelly reported that there was nothing they disliked about the college. The remaining 11 HIT faculty mentioned a variety of issues. Alice, Jane, and Susan felt the university overshadowed the community college, which did not have the benefits the university received. Salaries and college budget issues were sometimes a problem.

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Overarching, Inferential Theme

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The inferential theme determined by the analysis of the collected data was the joy the HIT faculty demonstrated about their work at a job they truly loved. Regardless of any inconveniences or difficulties that occurred during the transition to teaching, they were all happy with their positions at the colleges. The success of their students was the epitome of success for the HIT faculty.

The HIT faculty were united in never wanting to leave their teaching positions. They continue to plan new ways to serve their colleges and to prepare better materials and develop teaching methods for students. The HIT faculty around the state hold regular phone meetings to discuss issues, which affect education and how to address mandates from the American Health Information Management Association (AHIMA) in regard to curricular changes and requirements to meet (CAHIIM) accreditations.

Discussion

The theories presented in Chapter two were Schlossberg's (1981) theory of transition and the theory of self-determination (SDT) developed by Deci and Ryan (2000). The challenges that would be expected or assumed to be present for the HIT faculty would be to adapt to the new environment of college academia which is considerably different than the 24-hour operation of healthcare. McDonald (2010) indicated in her study that the nurses were professional experts in their field but after the transition to teach in the college, they discovered a knowledge deficit. There may be a culture shock as nurses and professors are socialized differently. The college faculty may assume the nurse faculty are trained and should not have any problems with adjustment to the college classroom and therefore, do not offer any mentorship. The nurse may have specialized in cardiac care but now taught course about pediatrics. The nurse being an educated professional could sometimes feel incompetent and the classroom presents a learning curve (McDonald, 2010).

Lee (2010) identified factors for changing careers which were, "The desire to have a career that makes a difference in the lives of other people, the need to do more meaningful and Fulfilling work…and the desire to have a more flexible and family friendly schedule" (p.115).

These reasons coincided were similar to those of the HIT faculty. The Self-Determination theory is related to the factors of competency, autonomy, and job satisfaction. The HIT faculty understood the need to stay up-to-date with course materials and healthcare changes. They experienced the job satisfaction as students graduated and succeeded in the workplace. A certain amount of autonomy is allowed for the HIT faculty (see Table 5). Martha stated, "I liked the level of independence and autonomy I was given. It would be very difficult now to go back to a closely structured setting. I am able to choose my office hours and times I teach the courses." Even though Cassie did not actually compare the healthcare and teaching work schedules, she responded that, "Teaching is the best kept secret. You won't become a millionaire, but the payoff is much more rewarding!" could indicate she only considers the teaching work schedule. Cassie's work experience was managerial 24/7 and she was invited several times to agree to teach so it was not something she had planned to do. Cassie, who would not consider anything but a job in healthcare, to being a teacher forever.

During the interviews, it was evident to me that the HIT faculty appeared to have looked at the transition as a challenging position that they assumed, no matter how much work it took. They approached it with the same attitude they used with problems in their previous workplaces. The communication with them in their different college settings and even on the phone allowed me to feel the determination and excitement they experienced in their current positions. They faced their feelings of being overwhelmed, rolled up their sleeves, decided they had a job to do, made a plan, and accomplished it. They worked together, asked questions, researched information, attended professional development, and decided this was the best job they had ever had.

There was an apparent atmosphere of teamwork within the HIT faculty at each college setting. They applauded each other and I sensed a real genuineness in their feelings for their cohort. It was easy for me to remove myself from any preconceived notions and ideas about the HIT faculty due to their willingness to speak out and talk extensively about their programs and to discuss plans for the future at the college. The participants were avidly involved with their jobs. They became engaged in talking after the interviews about their programs, the students, and most of them seemed to appreciate the opportunity to talk about it. They were proud of their programs and what was being accomplished. I enjoyed the camaraderie they shared as I too teach in an accredited program online as well as a non-accredited program at another university. I feel there was a good rapport since all of us belong to the same national organization, AHIMA, and the same state organization.

The findings indicated that the HIT faculty did not have any regrets about their transition to teaching. Apparently, the experiences in the healthcare workplace had prepared these participants to handle new and different situations. Any faculty who had not taught previously, was willing to ask for help from teachers and others who had answers and skills in that area. They did admit to feeling overwhelmed at different times but were encouraged by the results from their efforts. The response from students was positive and the colleges seem to have supportive staff and faculty that further encouraged the transitioned teachers. Previous researchers (Anthony & Ord, 2008; Castro & Bauml, 2009) wrote why second-career teachers chose to make a career change. Also, the obstacles they experienced included many of the issues that discouraged some second-career teachers. The article by Samaras and Wilcox (2009) stated, "Two major professional goals were common across all teachers' statements: (a) wanting a career change; and (b) making a difference in students' learning" (p.9). These two items

matched the comments made by the 14 HIT faculty. It seems that their jobs in healthcare had helped to prepare the HIT faculty for the rigorous responsibility of teaching healthcare students. Harriet had worked in management for 5 years and said, "I was able to use my experiences and apply them to real life scenarios for my students."

The self-determination theory (Deci & Ryan, 2000) applies to the HIT faculty. Williams and Forgasz (2009) discussed the intrinsic and extrinsic rewards that were important to the second-career teachers. The HIT faculty received intrinsic rewards, when they helped students to succeed and the extrinsic reward was that they had more time off to spend with family. In the transition theory, it reported that the occurrence of a change can be a positive experience for some and a negative experience for others. The transition, which HIT faculty made from healthcare jobs to teaching had a positive result, and unanimously the 14 HIT faculty believed it was the best career decision they had ever made.

According to the statement from one participant, which indicated that previous teachers would not be rehired back into the workplace, initiated thoughts of agreement and disagreement with that attitude or conviction. This mindset seems to relate to a quotation of George Bernard Shaw which he wrote in his book, *Man and Superman*, in 1903. The quote is found in, *Bartlett's Familiar Quotations,* and is, "Those who can do, those who can't teach." The employers and co-workers who indicate a teacher should not be hired back probably had good and not-so-good teachers. The enigma seems to indicate that they were not all self-taught and learned from a teacher of some sort. This attitude that was extended to a second-career HIT faculty could be presumed that they felt envy or did not realize how much more a teacher had to learn to be prepared to teach others.

This mindset about teachers provides the reason why HIT faculty do not regret their transition to the colleges to a better environment than they had experienced in healthcare. People with this type of mindset do not promote a comfortable work atmosphere. George Bernard Shaw was a controversial person. His biographer, Gilbert K. Chesterton, stated in his book, *George Bernard Shaw (1909)*, "Most people either say that they agree with Bernard Shaw or that they do not understand him. I am the only person who understands him, and I do not agree with him."

Implications

There are other questions that evolved from this study that could have provided more meaningful answers. The question, "Have you ever wanted to teach?" and "Would you like to work in healthcare for the summer or take a sabbatical to work in healthcare and then come back to teaching?" During the interview, the participants were asked how they would develop an orientation program for new faculty. Many suggested having mentors and how important it is to have someone with experience and knowledge to answer questions. The fact that the participants, as a group, did not have a problem with teaching something new could be an indicator that these faculty would understand how a student would experience learning something new.

The interviews and questionnaires did not seem to be an issue but there were four participants that did not submit the protocol writing. The consent form stated what would be required and that participation was voluntary. However, it was stated on the consent form the person could request to be removed from the study and these requests were not received. I do not feel that this missing data affected the validity or trustworthiness of the data. These four participants had provided considerable information during the interviews and perhaps felt it may be redundant for them to recap what they had talked about.

The results of this study implied the need to look at why the teachers did not want to leave their faculty positions to ever work in healthcare again. They appeared to like the subjects they teach which are all about healthcare but do not want to leave teaching. Is it because of the rigors of the healthcare positions, long hours, and never ending work with constant change of laws and regulations? Or is it because personal enrichment is more important than higher salaries and prestigious positions in management. AHIMA may want to consider reviewing the curricula for the education programs and include competencies and objectives that could improve skills required to prevent burn out in management positions.

Limitations

In this study, I worked with the sample of HIT faculty, who ranged in: (a) age, (b) years of teaching experience, and (c) years of professional work. They held credentials approved by AHIMA and were employed in an accredited HIT program. I included the entire faculty in the HIT programs at the selected colleges without regard to race, ethnicity, gender, or age. The limitations would include the honesty of the responses to questions. A few of the questions were not fully answered by participants. When asked a specific question, I noted a participant would appear to be thinking and then begin discussing other items pertaining to the students or curriculum instead of providing a direct answer.

The study was limited to one state where there were only 10 community colleges that met the research criteria. Only 7 colleges participated, with a total of 14 participants. This was a small number for data collection although many different areas of the state were represented. A questionnaire, interview, and protocol writing were the instruments used for the study. A focus group had been planned originally, but due to scheduling issues with the participants, it was necessary to remove that process. It took almost 5 months to obtain the consents and collect the

data. Due to the small number of participants in this current study, it would be beneficial to survey HIT faculty in several states in different parts of the United States.

Recommendations for Future Research

A new study could be developed about healthcare employees that would clarify how many are happy to work in healthcare. Why is there so much stress and burnout in the field of HIM as reported by several of the study participants? This information could be beneficial to HIM educators to ensure the curriculum is providing the skill and knowledge levels required by healthcare employers. Healthcare administrators could review high stress areas in the work place. Studies about the healthcare workplace could open areas for the healthcare management teams to review and possibly recommend realignment of work responsibilities with emphasis on flexible hours. Studies may be helpful that focused on the education of faculty in all the degree levels of HIM. Based on the positive reports by the study participants, it would be interesting to determine why persons left teaching positions in the HIM programs.

AHIMA leaders set standards and guidelines for members to follow that promotes sound ethics and professionalism. I am currently not aware of surveys of the credentialed members being done about their jobs in healthcare. An important recommendation from the research would be for AHIMA leaders to develop a policy for determining the responsibilities and hours of work the AHIMA members were being required to perform. Surveys completed by facilities and AHIMA members could provide meaningful data to aid in preparing students for the workplace. Policies could be developed to prevent discouragement of those working in the field. Teacher shortage could be resolved and the development of more programs if there were policies that allowed AHIMA members having 10 years experience in the field to train to become faculty members.

This study about transitioning could be done in each state and these studies could be compared and expanded. It could be constructive to examine the differences and similarities between colleges in each state. Then the overall comparison could open more studies about the unique findings. Due to having the summers off gave incentive to some faculty to accept less pay. Would a study comparing a 9 month contract versus a 12 month contract make the teaching position less lucrative? AHIMA education accredited associate and bachelor degree programs have had minimal research published. A wide door is open to those interested in pursuing more information about what is good, what is not so good, and what can be done about anything. This study could be a baseline for comparisons with future studies about HIT and HIM faculty in other states.

Summary

The two most important outcomes of this research were: (a) the transitioned second-career teachers do not want to work in healthcare again, because of the intrinsic and extrinsic values they received from their teaching jobs; and (b) the transitioned second-career teachers were rewarded by the success of their students.

It appears the HIT and HIM associate and bachelor programs prepared the HIT faculty to perform well in their healthcare jobs. It seems the responsibilities and tasks required in the HIM workplace fully prepared the study participants to assume teaching positions in the community college. One of the articles (McDonald, 2010) about nurses transitioning to be second-career teachers indicated it was more difficult for them to adjust to the college environment than it was for the HIT faculty. There were some normal trepidations mentioned about being able to teach however, these concerns seemed to disappear quickly. The consensus of the participants was that they were (a) excited about teaching, (b) did not want to go back to a healthcare position,

and (c) enjoyed a comfortable life as they helped students learn and meet their goals for better jobs. This study indicates having two careers in a life time instead of one could be a refreshing and beneficial alternative for many people. Teaching is not for everyone but may be a good opportunity for someone with expertise who does not want to completely retire.

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APPENDICES

Appendix A

Year	Event
1928	Association of Record Librarians of North America - 58 charter members
	"To elevate the standards of clinical records in hospitals, dispensaries, and other distinctly medical institutions" (Huffman, 1990). Within a short time, the ARL was changed to the American Medical Records Association (AMRA).
1942	American Medical Association approved the accreditation of schools.
	The Medical Record Administrator (MRA) credential was established.
1953	Schools for Medical Record Technicians were approved which would allow graduates to sit for the Accredited Record Technician (ART) examination.
1957	AMRA House of Delegates approved the development of the Correspondence Course for medical record personnel.
1962	Enrollment began in the correspondence courses.
	The Foundation of Record Education (FORE) was founded.
1988	The Assembly on Education was created and scheduled to meet annually.
1991	AMRA became the American Health Information Management Association.
2000	The MRA was updated to the Registered Health Information Management Administrator (RHIA). The ART was updated to the Registered Health Information Technician.

Appendix B

Epoch Statement

I transitioned from a professional position in healthcare to a teaching position. In the past, I

worked in many different positions in healthcare. I have worked as a part-time adjunct instructor

and a full-time assistant professor and have my viewpoints about the topic of a second-career

transition. I will not allow my bias to impair my judgment when interviewing and observing

participants. I made the transition from working as a medical coder to teaching full time thirteen

years ago in 2002. I remember the challenges of trying to fit in an academic environment and

how tenured faculty treated me. Some were encouraging and some made it difficult. I tried to

learn from other faculty that I respected. It was difficult learning the rules of the institution

pertaining to curriculum, textbooks, and course materials. Professional development was

mandatory to attend but it did not always pertain to things that I needed to know. Being adjunct

faculty had a different set of issues than becoming full-time faculty. I am more interested in

hearing and reading their viewpoints and experiences.

Mildred Norris

Researcher

Appendix C

LIBERTY UNIVERSITY.
INSTITUTIONAL REVIEW BOARD

7/29/2016

Mildred Norris

IRB Approval 2543.072916: A Phenomenological Study of the Experiences of Transitioning from a Professional Career in Health Information Management to Teaching in Higher Education

Dear Mildred Norris,

We are pleased to inform you that your study has been approved by the Liberty IRB. This approval is extended to you for one year from the date provided above with your protocol number. If data collection proceeds past one year, or if you make changes in the methodology as it pertains to human subjects, you must submit an appropriate update form to the **IRB**. The forms for these cases were attached to your approval email.

Your **IRB**-approved, stamped consent form is also attached. This form should be copied and used to gain the consent of your research participants. If you plan to provide your consent information electronically, the contents of the attached consent document should be made available without alteration.

Please retain this letter for your records. Also, if you are conducting research as part of the requirements for a master's thesis or doctoral dissertation, this approval letter should be included as an appendix to your completed thesis or dissertation.

Thank you for your cooperation with the IRB, and we wish you well with your research project.

Sincerely,

G. Michele Baker, MA, CIP
Administrative Chair of Institutional Research
The Graduate School

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Appendix D

Letter to Colleges

Date: May 5, 2016
Community College
P.O. Box 000
Main Street
Anytown, NC 12345

To Whom It May Concern:

As a doctoral candidate in the School of Education at Liberty University, I am conducting research as part of the requirements for a doctor of education degree. The title of my research project is A Phenomenological Study of the Experiences of Transitioning from a Professional Career in Health Information Management to Teaching in Higher Education. The purpose of my research study is to describe the experiences of faculty in Health Information Technology (HIT) programs as they transitioned from working in their field of expertise to becoming a teacher in accredited HIT associate degree programs. I am writing to request your permission to conduct my research at College A.

Participants were asked to complete the attached questionnaire and contact me to schedule an interview and classroom observations. The data is to provide clarity and understanding of the nuances of the HIT faculty transition to teaching. Participants were asked to sign an informed consent information form prior to the research. Taking part in this study is completely voluntary, and participants are welcome to discontinue participation at any time without penalty.

Thank you for considering my request. If you choose to grant permission, please provide a signed statement on official approved letterhead indicating your approval for education research.

Sincerely,

Mildred Norris
Researcher

APPENDIX E

Participant Consent Form

A Phenomenological Study of the Experiences of Transitioning from a Professional Career
in Health Information Management to Teaching in Higher Education

Mildred Norris
Liberty University
College of
Education

You are invited to be in a research study about transitioning from working as a healthcare professional to becoming a college teacher. You were selected as a possible participant because you are over 20 years of age, worked for at least 5 years in healthcare, and have made a career change from healthcare to teaching in a Health Information Technology (HIT) program. I ask that you read this form and ask any questions you may have before agreeing to be in the study. Mildred Norris, a doctoral candidate in the School of Education at Liberty University, is conducting this study.

You are invited to be in a research study about transitioning to be a college teacher. You were selected as a possible participant because you have made a career change to teaching in the Health Information Technology (HIT) programs. I ask that you read this form and ask any questions you may have before agreeing to be in the study. Mildred Norris, a doctoral candidate in the College of Education at Liberty University, is conducting this study.

Background Information:
The purpose of this study is to describe the experiences of faculty in Health Information Technology (HIT) programs as they transitioned from working in their field of expertise to becoming a teacher in accredited HIT associate degree programs.

Procedures

If you agree to be in this study, I would ask you to do the following things:

- A questionnaire will be sent to you to be completed within one week.
- One interview will be scheduled with you to discuss your transition to teaching, your reflections about teaching, and your assessment and opinions about moving from a professional career to a teaching career. The interview will last about an hour unless the participant has additional information to share.
- The protocol writing will require a small notebook that will be given to you with a pen, or you may elect to use your computer and a Word document to write your reflections about making the transition to becoming a second-career teacher. If you use the notebook and want to rewrite something, make a single line through the words and continue writing. This lessens the risk of the work being altered by someone else. The Word document will be attached to an email sent to norrism00@gmail.com. The attachment cannot be altered and will be used to verify the information used as data. The writing should just flow in any order as you reflect and compile your thoughts. It is not required to be grammatically correct. It is only to have accurate information. At the end of the story, you will sign that it is your work. The participants will be given two weeks to complete this task.
- There will be one focus group session using Adobe Connect that will be scheduled at the convenience of the 10 HIT faculty. This will be an open discussion about the study topics and questions. Your identity will be protected using a pseudonym. The group session will last approximately one hour.

Risks and Benefits of being in the Study:

All studies carry a risk; however, the risks for this study are minimal and are no more than the participant would encounter in everyday life. All steps have been taken to protect your identity, and there should be no misuse of any information.
No direct benefits are provided as a part of your participation in the research study.

Compensation:

Each participant will receive a $25.00 gift card for taking the time to complete the study and review the findings.

Confidentiality:

The records of this study will be kept private. In any sort of report I might publish, I will not include any information that will make it possible to identify a subject. Research records will be stored securely, and only the researcher will have access to the records. The computers are password protected and any paper and recordings will be maintained in a locked file cabinet. The recordings will be erased after the information is transcribed. While I will keep your information confidential, I cannot ensure that other members of the focus group will do so. When the two separate groups meet in Adobe Connect, it is the responsibility of all parties to maintain the confidentiality of what is being said by everyone in the focus group meeting.

Voluntary Nature of the Study:

Participation in this study is voluntary. Your decision whether or not to participate will not affect your current or future relations with Liberty University. If you decide to participate, you are free to not answer any question or withdraw at any time without affecting those relationships.

How to Withdraw from the Study:

You may submit a request in writing to be withdrawn from the study at any time. The individual information provided by participants who withdraw will be removed from the study and destroyed.

Contacts and Questions:

The researcher conducting this study is Mildred Norris. You may ask any questions you have now. If you have questions later, **you are encouraged** to contact her at phone number 910-817- 9481 or email at norrism00@gmail.com. You may also contact the researcher's faculty advisor, Dr. Lucinda Spaulding, at Liberty University phone number 434-592-4307.

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher, **you are encouraged** to contact the Institutional Review Board, 1971 University Blvd, Suite 1837, Lynchburg, VA 24515 or email at irb@liberty.edu.

Please notify the researcher if you would like a copy of this information to keep for your records.

Statement of Consent:

I have read and understood the above information. I have asked questions and have received answers. I consent to participate in the study.

(NOTE: DO NOT AGREE TO PARTICIPATE UNLESS IRB APPROVAL INFORMATION THAT INCLUDES CURRENT DATES HAS BEEN ADDED TO THIS DOCUMENT.)

☐ The researcher has my permission to audio-record me as part of my participation in this study.

Signature:_____Date: _____

Signature of Investigator:_Mildred Eleanor Norris_____Date: 8/3/16

Appendix F

Audit Trail

Table 9

Audit Trail

Comments/Suggestions	Addressed Feedback
Consider the faculty who made a successful transition without many problems.	I added question 10 in interview.
Did the HIT faculty have any type of orientation?	I added question 8 in interview.
How would the HIT faculty design a training program?	I added question 9 in interview.
Ask something about the person having been in the military.	I added to questionnaire.
What type of organizational structure do the colleges have?	I added question 3 in interview.
Basically it all looks good.	I felt relieved and was grateful for the suggestions.
There were no suggestions made about the research questions.	This was good.

Appendix G

Questionnaire

1. What is your date of birth, gender and marital status?

2. How many years have you been teaching?

3. How many years have you been working in healthcare?

4. Where have you worked previously and what were your job positions?

5. What skills do you have (example: computer, software, office equipment, customer service)?

6. What you like about the college environment?

7. What do you not like about the college environment?

8. Explain why you do or do not regret transitioning to college level teaching?

9. What is most difficult part of your job as faculty?

10. If you were required to teach a subject(s) that was outside your realm of experience, how would you accomplish this task?

11. List the subjects you teach each term and add any comments you have regarding the classes you teach.

12. Compare your work schedule teaching with the work schedule required when working in healthcare?

Appendix H

Interview Questions

1. What type of orientation and training did you received after you were hired at the college and how did you feel after the first term of teaching?

2. How has your family or significant others helped or not helped you transition to a second-career teacher?

3. How would you describe the culture of the community college and where do you fit in the organizational structure?

4. How do you feel at this time about your decision to leave the professional job setting to become a college instructor?

5. What in your previous job prepared you for this new career as a postsecondary teacher?

6. Were you previously an adjunct instructor and if so, how long did you hold that position?

7. Do you feel it would help any teacher to be an adjunct prior to becoming full time? Explain why you feel it would or would not be a benefit.

8. What strategies did you use to adapt to working at the college?

9. Based on your present knowledge of the job and the environment, how do you feel about the second-career position?

10. What type of orientation program did you have before you started teaching at the college?

11. What type of orientation would have been helpful?

12. If you were asked to contribute to a revision or design of a program for new teachers in HIT programs, what would be your recommendations?

13. What sort of situation occurred in your life that caused you to decide to make the move to teach in an HIT program?

Appendix I

Protocol Writing Instructions

Greetings to all Participants,

I briefly discussed this task with you when you were asked to sign the consent to be a participant in this study. I hope you will consider this to be an easy assignment. You may write randomly as thoughts come to you. Instead of writing paragraphs, you may number the paragraphs about different topics that occurred since you decided to transition to teach. This is a writing assignment but it does not have to be grammatically correct. It is more important to relay the information than to worry about how the paper should look.

I have given you a small journal and pen to write your story. If you want to change what you have written just draw a single line through the words you want to change and continue writing. No eraser or white out should be used. Another option would be to use your computer and type your thoughts in a WORD document and email to me as an attachment. The purpose of the two options is to ensure that the data cannot be altered. It will prove the validity of your statements

 Reflect on what occurred and write about the least significant detail to the most major happening during that time period of when you began the journey to become a second-career teacher to your position today. Write about students, classroom and how you felt getting out of the car and walking in the building to your classroom. This is very important data and no one will know which journal was yours. You are identified by pseudonyms. This key to your name will be locked in a file cabinet only. The pseudo names will be used in the computer so even a hacker would not know your identity. Please feel free to write your thoughts without any fear of someone knowing who wrote them. This document is a vital part of the study. I sincerely appreciate your time and effort you contribute to this project.

Mildred Norris
Researcher

APPENDIX J

ANALYSIS WORKSHEETS

CLASSIFYING DATA

- Need for Mentors is mentioned several times.

- Time was not structured for me. Make my own schedule.

- Orientation was not a big thing for most. What they had was fine. Their jobs in healthcare seemed to have prepared them for taking on new things and overcoming large and small obstacles.

- Definitely like the college life and schedule.

- Do not miss the stress, long hours of health care.

- Overwhelmed was mentioned a lot but not something that could not be overcome.

- Nervous at the beginning.

- Student success was important and rewarding to everyone.

- Several mentioned always looking at new and better ways to teach.

- Wanted to be a teacher.

- The clinical and non-clinical experience before teaching and perhaps that helped overcome the short time of only 2 years in the workplace.

- Only five of the 14 have masters' degrees.

- Salary is too low

- Stress and long hours and responsibilities.

- Only three out of the 14 had always thought about teaching but all 14 would not think of giving it up now.

- Masters degrees

Analysis Plan

I have given pseudo names to participants. I am writing a paragraph identifying each participant plus I am using tables to show demographics and comparisons of answers. For instance, all of them stated identically, "I do not regret becoming a teacher.

I have pulled these headings/themes from the questions and protocol writings.

Decision to Teach

How would you design Orientation?

HIM work history

Like about the environment

Dislike about the environment

Most rewarding

Most difficult

Orientation & Training received.

Previous skills & how did they help.

Were you an adjunct before full time?

Strategies used to overcome challenges.

Always wanted to teach.

What did you teach?

Comparison of HIM work schedule with Teaching schedule.

I plan to tie themes in with research questions:

RQ1: How do HIT professionals experience the transition from professional careers in healthcare to teaching positions in community colleges?

- HIM work history

- Like about college environment

- Most rewarding part of teaching

- Orientation and Training

- Comparison of job schedules between healthcare and teaching

RQ2: What concerns do the transition present to the HIT professionals who worked as educators in the accredited associate programs?

- Decision to teach

- Could I do this

- What was taught and what was thought about it

- Years as adjunct and years full time

RQ3: How do the HIT professionals overcome the challenges of the transition from the healthcare work place to become faculty in a community college?

- Regrets

- Teaching courses outside experience

- Most difficult

- Previous skills and how it helped

- Dislike about college

- Strategies used