

The Nursing Dean Dilemma

ADDRESSING LEADERSHIP GAPS IN NURSING
EDUCATION

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The nursing profession faces a critical leadership crisis as the number of qualified candidates for dean positions dwindles while experienced leaders approach retirement. This article examines the systemic challenges creating this pipeline problem — from faculty workload constraints to changing career priorities — and proposes five strategic interventions to develop, attract, and retain the next generation of academic leaders in nursing.

Securing the Future of Nursing Academic Leadership

A leadership crisis threatens the future of nursing education. As experienced deans approach retirement age, the pipeline of qualified successors has narrowed dramatically — a consequence of faculty shortages, heavy teaching workloads that limit scholarly development, and changing career priorities among potential leaders. This leadership gap emerges at a particularly challenging time, as nursing schools already struggle with faculty shortages while attempting to address the broader nursing workforce crisis.

A deanship may not be as attractive a career destination as it once was. It has taken on added pressures, particularly around nursing faculty shortages and program finances in a time when budgets are tight. Compounding the problem, early and mid-career nursing faculty or other potential academic nursing leaders may simply have different priorities than in the past, expressing a desire for greater work-life balance that is antithetical to advancing up the leadership ladder. Further, teaching faculty within nursing schools bear a heavy workload, inhibiting their ability to conduct the research and scholarship expected of individuals who aspire to associate dean or dean roles.

Meanwhile, those clinical track faculty who have done the requisite scholarship (including many Ph.D. and D.N.P. holders) are often not considered eligible for a dean position.

These challenges come at a precarious time for nursing academic leadership: a wave of retirements is expected soon among the industry's most experienced deans. According to WittKieffer research on 100 leading US nursing schools, 40% of deans are aged 65 and above (with 13% aged 70 and above), while another 19% are between 60 and 64 years and approaching retirement age. This data underscores the imminent leadership vacuum.

The leadership landscape is already in flux, with 36% of nursing deans appointed within the last two years. Notably, 62% of deans were appointed externally, and 78% previously served in leadership positions such as associate deans, deans, or interim deans at other institutions — highlighting both the mobility within the field and the limited development of internal successors.

Addressing this leadership crisis requires a multifaceted approach focused on both developing new leaders and making the deanship more attractive.

Beyond the Shortage: Recommendations to Strengthen Academic Nursing Leadership

The future of the nursing dean profession is at risk. There is a pipeline problem which must be addressed through varied means, ranging from better supporting the development of prospective leaders to paving a wider path to a deanship to making the dean role more appealing as a career destination.

Solving this problem will require a multifaceted approach. We offer the following suggestions to generate discussion around potential solutions.

1. Creating Space for Research and Scholarship: Supporting Faculty Development

The most common route to the nursing dean role begins with a nursing faculty position, then to a program director or associate dean role before one can rise to the decanal level — usually gaining a full professorship along the way. This is still a viable pathway; however, we've seen fewer and fewer individuals looking to travel this path in our 25+ years of recruiting deans. One reason is generational. The rigors of becoming a dean are great, requiring one to develop and demonstrate achievement as a teacher, researcher, published scholar, and manager/supervisor. In an era when early and mid-careerists value work-life balance and often prioritize their personal activities over professional pursuits, there are simply fewer faculty who want to put in the work — over the course of many years — to move into leadership and then to a decanal role.

One specific way to address this challenge is to lighten the teaching load for faculty, allowing them more time to pursue research and to publish (especially critical at R1 and R2 institutions). Reducing course loads has implications, of course, including allocation of more teaching hours to adjuncts or other instructors, but is worth consideration to secure the future of nursing leadership.

2. Intentional Leadership Development: Mentorship and Succession Planning

For those faculty with sights set on leadership positions, the pathway isn't always clear. Nursing faculty may ask: What are the rewards versus the costs of leadership? Do I even have what it takes? If not, how do I develop myself as a leader? They need help answering these questions.

The most obvious way is through mentorship. Most sitting deans owe much of their success to one or more dedicated mentors during their careers, and we encourage today's deans and associate deans to prioritize and formalize mentorship of junior colleagues. One method sitting deans use to nurture the career of an associate dean is to give them budgetary and faculty recruitment responsibilities, as with an interim department chair position. Other ways to support aspiring deans is to bring them to meetings and conferences they wouldn't normally attend; to invite them to meetings with potential donors to discuss their research or college initiatives. The AACN LEADS program includes a peer-to-peer

mentoring component, as well as leadership development modules for aspiring deans (Elevating Leaders in Academic Nursing, or ELAN) and current deans in conjunction with the Center for Creative Leadership. These are invaluable offerings.

Formal succession planning, commonplace in the corporate world, makes leadership development a priority within institutions by identifying individuals with high-potential and prioritizing their growth and advancement. Succession planning involves individualized development plans that nurture strengths and address weaknesses or experience gaps. Targeted growth opportunities can include degree and leadership training programs such as those by AACN, committee memberships, mentorships and peer networking, coaching, serving in interim positions, and more. Planning and development require follow-through: succession planning and development for faculty and rising administrators must stay on the dean's agenda and be revisited at least annually.

3. Expanding the Candidate Pool: Rethinking Traditional Qualifications

As noted above, dean candidates must demonstrate many years of excellence as an educator, researcher, scholar, and supervisor. We think there's a need for greater latitude in this regard. There are fewer decanal candidates today who "check all the boxes" but more who excel in most of these areas and have additional qualities to compensate for whatever they may lack.

Candidates who might be considered include:

- Nursing faculty who have proven themselves in the classroom as instructors and outside as department chairs but may not have fulfilled the scholarship criteria to gain full professorships and/or be considered for assistant dean or dean roles.
- Chief nursing officers or other nursing executives who have proven themselves as clinicians and leaders, and who most often have a Ph.D. or D.N.P. and yet do not have the academic bona fides from a lengthy faculty tenure. These "nontraditional" candidates may have impeccable leadership qualities and yet are categorically ruled out of dean searches – even though many institutions request that their dean candidates have extensive clinical backgrounds.

Both situations above require institutions and hiring authorities (college presidents, provosts, and assistant provosts) to keep an open mind when assessing viable decanal candidates. We believe many "underqualified" or nontraditional leaders bear greater consideration. Many may have what it takes to be a great dean or understand what they will need to do to address weaknesses and round out their qualifications early in their tenures.

Controversial as it may be, we believe institutions need to open up dean recruitments to non-tenured faculty. Because someone has not passed the muster of the promotion and tenure, they should not be precluded from administrative consideration.

4. Enhancing Appeal: Making Deanship a Desirable Destination

Nurses and nursing faculty with potential may look at the dean position and think that it is not really for them. It is an arduous path to get there while the rewards are unclear.

Experienced deans know the rewards are many, of course – among them, the chance to directly impact the lives of students and colleagues and indirectly contribute to the well-being of patients and communities through the nurses they help educate. They are respected leaders on their campuses and across the healthcare industry, helping to advance the interests of a noble profession. All of us who work in health-related fields can promote these benefits to make the dean position attractive as a career choice.

It must become attractive from a practical compensation standpoint as well. We encourage institutions to be more competitive in terms of the nursing dean's compensation as well as for assistant deans and those roles

on the path to a deanship. Many institutions encounter this reality upon launching leadership searches and realize their current compensation package is not enticing qualified candidates. We would like to see institutions address compensation proactively.

5. Securing Success: Supporting New Deans Through Transition

Upon hiring a dean, many institutions offer minimal orientation and onboarding. The best practice, however, would be to welcome deans with formal transition plans which include aligning with the board around strategic priorities as well as helping to acculturate the new leader, especially for deans hired from another institution. The board, president, and leadership team can be proactive in helping to accelerate the impact of the new dean, building a foundation for a long, successful tenure. One option is to hire an interim dean to serve as a bridge between permanent leaders and provide mentorship and guidance to an incoming dean.

Conclusion

The responsibility for cultivating the next generation of nursing deans lies with all participants in the nursing education ecosystem. Current deans should prioritize mentorship and succession planning. University leaders need to reevaluate and redefine traditional qualification requirements and compensation structures. Professional organizations should continue expanding leadership development offerings. And those who could be future deans need to be inspired to see the deanship as a fulfilling and impactful career path.

The health of our healthcare system depends on strong nursing education programs, which in turn require forward-thinking, well-prepared leaders. By taking intentional steps today to develop and support nursing academic leaders, we can ensure that the nursing profession continues to advance, innovate, and meet the evolving healthcare needs of our communities. The future of nursing education – and, by extension, patient care – depends on our collective commitment to solving this leadership pipeline challenge.



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