THE NURSE SHORTAGE:

PERSPECTIVES FROM CURRENT DIRECT CARE NURSES AND FORMER DIRECT CARE NURSES

AN OPINION RESEARCH STUDY CONDUCTED BY PETER D. HART RESEARCH ASSOCIATES ON BEHALF OF THE FEDERATION OF NURSES AND HEALTH PROFESSIONALS

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INTRODUCTION: EXAMINING THE PERSPECTIVE OF NURSES

The Federation of Nurses and Health Professionals commissioned Peter D. Hart Research Associates, Inc., to conduct a study among current direct care nurses and former direct care nurses to examine their perspectives on the nursing profession. In addition to measuring their overall attitudes about the nursing profession, the research sought to gauge the extent of the nurse shortage today and the potential for the problem to grow, why nurses have left or are considering leaving the field of direct patient care, and what changes have the greatest potential to increase retention and recruitment of qualified nurses.

This report is divided into three sections. Section One outlines current and former direct care nurses' impressions regarding the extent to which there is a nurse shortage. It also identifies the proportion of current nurses who are most likely to leave patient care. Section Two explores the situation facing current and former nurses, including their satisfaction with the job overall and with specific aspects of the job. It specifically seeks to identify the conditions that pose the biggest obstacles to retention. Section Three discusses the potential to improve retention in and recruitment to the field of nursing as well as which specific remedies would be the most effective in accomplishing this goal.

REPORT TERMINOLOGY

Throughout this report, the phrases "current direct care nurses" or "current nurses" refer to registered nurses who currently provide direct patient care in a hospital, community or public health clinic, ambulatory care facility, nursing home, or extended care facility.

The phrases "former direct care nurses" or "former nurses" refer to registered nurses who provided direct patient care in a hospital, community or public health clinic, ambulatory care facility, nursing home, or extended care facility *in the past*, but do not do so currently, and are under age 65.

When examining differences in current nurses' attitudes by the type of health care facility they work in, they are divided into the following three groups: "hospital nurses" who provide direct patient care in a hospital, "clinic nurses" who provide direct patient care in a community or public health clinic or as a

visiting nurse, and "nurses in other types of health care facilities" who provide direct patient care in an ambulatory care facility, nursing home, or extended care facility.

METHODOLOGY

The study includes findings from the following two surveys:

A national survey of current direct care nurses. A national telephone survey was conducted among 700 registered nurses who currently provide direct patient care in a hospital, clinic, or other health care facility. Interviews were conducted from March 5 through 8, 2001, and the average interview length was approximately 20 minutes. The margin of error for this survey is $\pm 3.8\%$.

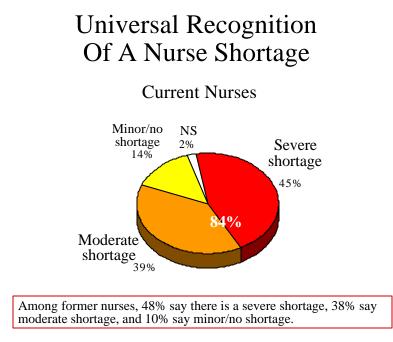
A national survey of former direct care nurses. A national telephone survey was conducted among 207 registered nurses between the ages of 18 and 64 who do not currently provide direct patient care in a hospital, clinic, or other health care facility but did so in the past. Interviews were conducted from March 5 through 8, 2001, and the average interview length was approximately 20 minutes. The margin of error for this survey is $\pm 7.0\%$.

Both surveys were conducted among national samples that came from a sample list of registered nurses purchased from Best Mailing Lists, Inc., of Tucson, Arizona. The national database from which the names were selected is compiled from state licensing information and is updated quarterly. Respondents were screened to determine whether they qualified as current direct care nurses or former direct care nurses. Nationally representative samples of current and former nurses were interviewed.

SECTION ONE: THE NURSE SHORTAGE

CURRENT AND FORMER DIRECT CARE NURSES RECOGNIZE A NURSE SHORTAGE

This study was undertaken to understand the dynamics and attitudes underlying the worsening nurse shortage in the United States, particularly in the field of direct patient care. The first step is to look at the extent to which nurses who are currently in this field, or who were in this field in the past, actually believe that there is a nurse shortage and a problem with retaining qualified nurses in the field.

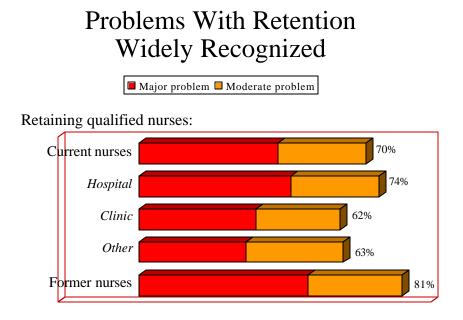


Nearly all current nurses (89%) believe that there is a shortage of registered nurses who provide direct patient care in their local area, including 45% who think the shortage is severe and 39% who say it is moderate. Recognition of a nurse shortage is consistent across the four regions of the country, and nurses in private health care facilities (45%) are just as likely as those in public facilities (45%) to feel that there is a severe shortage. Nurses working in hospitals (48%) recognize the shortage as more severe than do those in clinics (36%); and nurses in other health care facilities (46%) are just as likely as hospital nurses to see the shortage as severe. Nurses who provide primary nursing care (49%) and full-

time nurses (49%) think the shortage is more severe than do those in clinical specialty areas (40%) and part-timers (40%).

Former direct care nurses are just as likely to recognize that there is a nurse shortage in their local area, with 48% who qualify it as severe. Former nurses age 50 to 64 (57%) perceive the shortage to be notably more severe than do their younger colleagues (40%).

Current and former nurses both think that retaining and recruiting qualified nurses are significant problems. Seven in ten current nurses say that their facility has a major or moderate problem retaining (70%) and recruiting (69%) qualified nurses, with more than two in five saying that each is a *major* problem. Former direct care nurses are even more apt to think that health care facilities in their local area have a problem retaining (52% major problem) and recruiting (49%) qualified nurses.



A closer analysis of current nurses' perceptions regarding retention reveals that younger and lessexperienced nurses are among those most likely to perceive retention as a major problem. Among current nurses age 50 and over (40%) and those who have been in the field for more than 10 years (41%), two in five think that retention is a major problem for their facility, whereas 48% of those age 18 to 39 and 50% of current nurses with 10 years of experience or less in the field recognize it as a major problem. Retention appears to be an especially severe problem in hospitals, where 47% of current

nurses acknowledge it as a major problem for their health care facility, whereas 36% of nurses in clinics and 33% of those in other types of health care facilities agree. Current nurses working in the South (53%) also indicate that retention is a much greater problem there than do their counterparts in other regions of the country (43% West, 39% Northeast, 38% Midwest).

Among former nurses, older nurses and those who ceased providing direct patient care fairly recently think that retention and recruitment are bigger problems than do younger nurses and those who left the field more than four years ago. These differences indicate that, in recent years, conditions have worsened and problems facing nurses have grown more severe.

CURRENT DIRECT CARE NURSES ILLUSTRATE THE RETENTION PROBLEM

Current nurses' attitudes and intentions regarding their continued work in a direct patient care setting reveal the potential for the nurse shortage to become even more acute. Indeed, with half of current nurses having recently considered leaving the direct patient care field for reasons other than retirement, retention is a clear and present problem.

Fully 50% of current nurses say that, within the past two years, they have considered leaving the patient care field for reasons other than retirement. Nurses who have spent at least 10 years in the field (52%) and those in clinical specialty areas (54%) are the most likely to have considered leaving for non-retirement reasons, but even among primary care nurses (47%) and those with less experience (45%) substantial proportions indicate that they have considered departing the field. Fully 54% of current nurses under age 50 and 41% of those age 50 and over have thought about leaving the patient care setting to do something else. (When retirement is included as a reason they have considered leaving direct patient care, current nurses under age 50 (54%) are just as likely as those who are older (54%) to have considered leaving.)

POTENTIAL LEAVERS

The health care profession faces a serious risk of losing one in five current nurses (21%) from the direct patient care setting for reasons *other than retirement*. This target group of "potential leavers" comprises current nurses age 18 to 59 who have considered leaving the field of direct patient care within the past two years—but not because they want to retire—*and* who expect to leave the field within five years. Potential leavers have a demographic profile that closely resembles that of current nurses overall, but their willingness to consider leaving direct patient care is undoubtedly a result of their lower levels of satisfaction with every aspect of their job, as is examined in Section Two of this report.

FORMER DIRECT CARE NURSES CONTINUE TO DRAW UPON THEIR NURSING SKILLS

Former direct care nurses did not leave nursing behind altogether. Most of them continue to work, and nearly all of those who are employed use their nursing skills in their current job.

Former nurses are nearly evenly divided between those who ceased providing direct patient care less than five years ago (48%) and those who left that arena of the nursing profession longer ago (52%). These two groups are very similar in terms of age (former nurses under age 50 comprise 51% of those who left five years ago or longer and 47% of those who left more recently). Despite their similarities in age and other demographic characteristics, however, former nurses who left the direct patient care arena within the past four years display markedly different attitudes and levels of satisfaction with their job than do former nurses who departed before then. These differences are highlighted in Section Two.

Nine in ten former nurses (91%) confirm that they voluntarily decided to leave the direct patient care setting, and two-thirds (65%) indicate that they continued working after they left the profession. In fact, 65% of former direct care nurses say that they are currently employed, including 52% who are working in professional/manager positions; 19% are retired, 9% are homemakers, 6% are unemployed and looking for work, and 1% are students.

It is particularly notable that, among former nurses who are currently employed, 90% say that their current job involves the use of their nursing skills or training. This translates into 58% of former direct care nurses who are currently in the work force and continue to use their nursing skills in some way.

SECTION TWO: WHY ARE NURSES LEAVING?

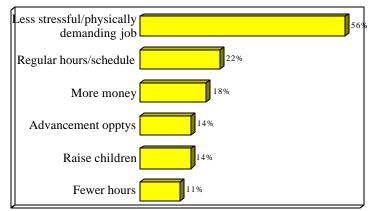
Individual nurses leave patient care for many reasons, but the biggest cause for their departure is the stressful working conditions, especially as they relate to understaffing. Nurses are leaving patient care because, too often, the conditions they face today are intolerable.

REASONS FOR LEAVING THE DIRECT CARE SETTING

The top reason why nurses have considered leaving the patient care field for non-retirement reasons is to have a job that is less stressful and less physically demanding (56%), and they are two and a half times more likely to say that they have thought about leaving for this reason than for any of the other five reasons listed. By comparison, 22% admit that they have considered leaving to have a more predictable schedule, 18% have considered leaving to earn more money, 14% say that it is because they want a job with more opportunities for advancement, and 11% want to spend fewer hours working. One in seven of these nurses say that they have considered leaving the patient care setting for the personal reason of being at home to raise children (14%), rather than because of any specific problems with the job.

Reasons Nurses Have Considered Leaving Patient Care

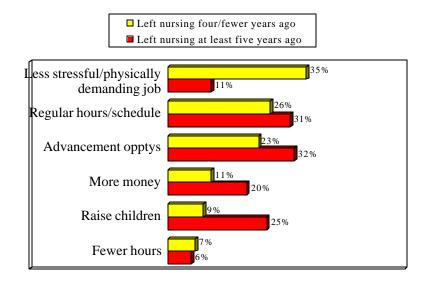
(Among the 50% of current nurses who have considered leaving for non-retirement reasons.)



Among former direct care nurses, no single reason stands out as the main reason they left the field of direct patient care. In fact, the most-often cited reasons are because they wanted a job with regular work hours and a more predictable schedule (28%) and because they wanted to work in a setting with more opportunities for advancement (27%). Whereas 53% of current nurses say that they thought about leaving in order to have a less stressful and physically demanding job, less than half of former nurses (23%) select this as their reason for leaving the field.

Nevertheless, former nurses who left the patient care field within the past four years are three times more likely than are those who left before that to say that it was because they wanted a job that was less stressful and less physically demanding. Thirty-five percent of recent departees say they left to have a less stressful job, 26% preferred more regular hours, and 23% wanted a job with more opportunities for advancement. On the other hand, only 11% of former nurses who left the field five or more years ago cite the desire for a less stressful job as the reason, while 32% wanted a job with more opportunities for advancement and 31% wanted a job with regular hours.

Reasons Former Nurses Have Left Patient Care



In their responses to an open-ended question about why they left the direct patient care setting, most former nurses indicate that it was either because of their dissatisfaction with specific areas of their job or because of a desire to advance their careers or further their education. Three in ten indicate that they left the patient care for personal or family reasons (5% retired, 7% left for health or medical reasons, and 18% left because of family and parenting obligations).

BROAD MEASURES OF SATISFACTION

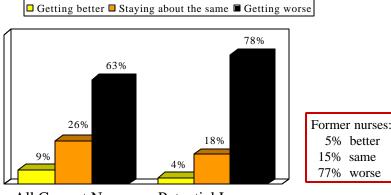
Nurses' satisfaction with their job on several specific measures provides important insight into why they are considering leaving or why they have already left the field of direct patient care. Indeed, current and former nurses' assessments of their job on several broad measures and in individual areas reveal the biggest barriers to job satisfaction and retention.

Large majorities of both current and former nurses give a negative assessment of the direction in which the profession has been moving in recent years as well as the level of morale among their nursing colleagues. By 63% to 9%, current nurses say that the overall situation facing nurses where they work has been getting worse rather than getting better, with 26% who think that the situation has stayed about the same. Among potential leavers, nearly four in five view their profession as being in decline, with 78% who believe that it has been getting worse, 4% who say that it has been getting better, and 18% who don't think it has changed.

Former nurses also provide a more negative verdict than do current nurses overall, as 77% think that the situation for registered nurses has been getting worse since they left the direct care setting, 5% believe that it has been getting better, and 15% perceive no change.

Most Believe The Situation Facing RNs Has Been Getting Worse

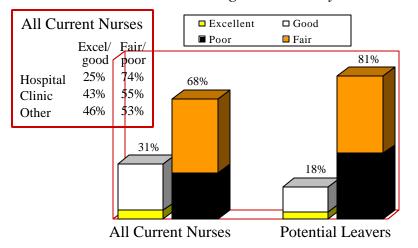
The overall situation for registered nurses has been . . .



All Current Nurses Potential Leavers

Current nurses also report a low level of morale among registered nurses at their health care facility, with only 31% who rate morale as excellent (5%) or good (26%) and 68% who say it is fair (42%) or poor (26%). Current nurses who relay the lowest levels of morale at their health care facility are also the ones who perceive the greatest decline in the situation facing nurses in recent years: younger nurses, those who work part-time, those working non-daytime shifts, and Northeasterners. As illustrated in the following graph, current nurses working in hospitals (25% excellent/good, 74% fair/poor) perceive a much lower level of morale among their colleagues than do those who work at clinics (43%, 55%) or other types of health care facilities (46%, 53%). Potential leavers also provide a particularly negative assessment of the level of morale among nurses at their workplace, with fully 81% who assert that morale is fair or poor and a mere 18% who say it is excellent or good.

And Morale Is Low



How is the morale among RNs where you work?

Nurses are less negative when asked to think in micro terms about their own personal situation rather than in macro terms about the situation facing registered nurses more generally. Both current and former nurses express moderate levels of personal satisfaction with their job as a direct care nurse. Their level of job satisfaction is not particularly high nor notably low. Just over three in five current nurses say they are very (24%) or fairly (38%) satisfied with the situation at their job these days, whereas 29% are just somewhat satisfied and 9% are not at all satisfied.

Some notable differences in personal job satisfaction emerge among current nurses. Those who work in clinics (79% very/fairly satisfied, 21% just somewhat/not at all satisfied) report higher levels of job satisfaction than do those in hospitals (58%, 42%) or other types of health care facilities (62%, 38%). Current nurses who work full time (67%, 33%) also are more satisfied than are those who work part time (56%, 44%). Current nurses who work nighttime and variable shifts (52%, 48%) are much less satisfied than are those who work day shifts (67%, 33%). Job satisfaction also is lower among current nurses in the Northeast (53%, 47%) than in any other region of the country.

Potential leavers are the most pessimistic group among current nurses, which explains why these individuals are the most likely to leave the arena of direct patient care. In contrast to every demographic subgroup of current nurses, a majority of potential leavers express a low level of overall job satisfaction: 45% are very or fairly satisfied and 55% are just somewhat or not at all satisfied.

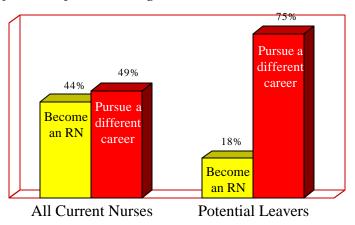
Former nurses report similar levels of satisfaction with the situation at their job when they were providing direct patient care: 61% confirm that they were very (31%) or fairly (30%) satisfied, 23% say that they were just somewhat satisfied, and 15% were not at all satisfied. There is a striking difference, however, in the level of job satisfaction between those who left the direct patient care setting within the past four years (47% satisfied, 53% not satisfied) and those who departed before that (73%, 25%). In fact, on most satisfaction measures, former nurses who left the direct care arena more recently give lower ratings than do their counterparts who have been out of the field for a longer period of time. This difference in attitudes may be explained partly by a sense of nostalgia among those who left longer ago, although recent departees' consistently lower levels of satisfaction indicate that the situation and conditions facing nurses have deteriorated notably in the past four years.

We have found in other research that it is not uncommon for professionals to put forth more negative assessments of their workplace or profession in general than of their own personal job situation. Indeed, it is not surprising that, when reporting their own personal job satisfaction, current and former nurses tend to be more positive, as they are likely taking into account the personal, individual aspects of their job and their relationships with the people they work with most closely on a day-to-day basis (their colleagues and immediate supervisors).

A notable proportion of current direct care nurses actually question whether they chose the right profession. Indeed, the plurality of current nurses say that, if they were younger and just starting out, they would pursue a different career (49%) rather than become a registered nurse (44%). *Among potential leavers, fully three in four assert that they would pursue a different career other than nursing if they were just starting out today.*

Nurses Would Pursue Different Career If Just Starting Out

If I were just starting out I would . . .



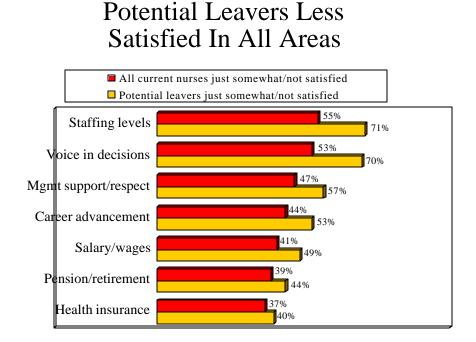
POTENTIAL LEAVERS

- 55% are just somewhat or not at all satisfied with their job overall (compared with 38% of all current nurses)
- ♦ 78% believe that the overall situation facing nurses at their facility has been getting worse (compared with 63% of all current nurses)
- 81% rate the level of morale among RNs at their facility as fair or poor (compared with 68% of all current nurses)
- 75% would pursue a different career other than nursing if just starting out (compared with 49% of all current nurses)

ASSESSMENT OF SPECIFIC JOB CONDITIONS

To understand current and former nurses' impressions of and attitudes toward their profession and their current situation, it is important to examine their assessment of various aspects of their job in providing direct patient care. This examination reveals varying levels of satisfaction with different job conditions and provides a detailed picture of what shapes and drives nurses' perceptions of and feelings about their

work. Satisfaction is substantially higher in some areas than in others, and potential leavers' appraisals of their job are much more negative on all measures than are the assessments by current nurses overall.



In five areas at least two in five current nurses express low levels of satisfaction, and potential leavers' assessments are notably lower. Current nurses express the lowest levels of satisfaction when it comes to staffing levels (44% very/fairly satisfied, 55% just somewhat/not satisfied) and having a voice in decisions that affect them (47%, 53%), and fully seven in ten potential leavers give low ratings in these two areas. In fact, the biggest gaps in satisfaction between all current nurses and potential leavers exist in these two areas. (Only 28% of potential leavers are very or fairly satisfied and 71% are just somewhat or not satisfied with staffing levels; 30% are very or fairly satisfied and 70% are just somewhat or not satisfied with having a voice in decisions.)

As illustrated in the previous graph, all current nurses and potential leavers also register low levels of satisfaction with the support and respect they receive from management, career-advancement opportunities, and salaries and wages. They report moderately low satisfaction levels with health insurance costs and coverage and pension and retirement benefits.

Current nurses are the most satisfied with their job when it comes to safety conditions on the job, the quality of care they are able to provide, and flexible arrangements for handling both work and family responsibilities. They also report moderately strong levels of satisfaction with on-the-job training and opportunities for continuing education and professional development. Potential leavers are less satisfied with each of these specific aspects of their job.

Former direct care nurses actually express higher levels of satisfaction than do current nurses in nearly all these specific job areas. The most notable differences occur in the areas of flexible arrangements for handling both work and family responsibilities (71% of current nurses are very or fairly satisfied and 29% are just somewhat or not satisfied, versus 59% of former nurses who are very or fairly satisfied and 39% who are just somewhat or not satisfied) and pension and retirement benefits (current nurses: 52% very/fairly satisfied, 39% just somewhat/not satisfied; former nurses: 41% very/fairly satisfied, 49% just somewhat/not satisfied).

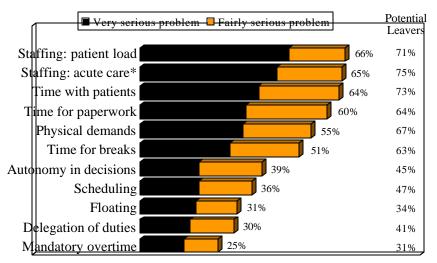
Former nurses who left the field within the past four years and those who left before then express very different levels of satisfaction with selected areas of their job. For instance, recent departees indicate much less satisfaction with the quality of patient care they were able to give (65% very/fairly satisfied, 34% just somewhat/not satisfied) than do nurses who left before that (84%, 16%).

The survey also examined in greater detail current and former nurses' satisfaction with their retirement benefits, which reveals lower levels of satisfaction. Overall, 22% of current nurses lack any sort of retirement plan. Seventy-eight percent of them do have a retirement plan, including 42% whose employer funds half or more of their plan and 36% who say that their employer funds less than half (30%), are not sure about the division of funding (4%), or don't report who funds the plan (2%). Among current nurses who have a retirement plan, 48% affirm that they are very or fairly satisfied with their plan and 49% say that they are just somewhat or not satisfied with it. Those whose employer funds half or more of their retirement benefits express a higher level of satisfaction (56% very/fairly satisfied) than do those whose employer funds less (39%), but even among the former, fully 42% report a low level of satisfaction.

Nearly seven in ten (68%) former nurses confirm that they have some sort of retirement plan through their work as a nurse, with 48% whose employer funds half or more and 20% whose employer funds less than that or are not sure. Thirty-two percent of former nurses do not have any retirement

plan from their nursing job. Among former nurses who have a retirement plan, the majority express a low level of satisfaction (46% very/fairly satisfied, 53% just somewhat/not satisfied).

The research seeks to understand not only nurses' level of satisfaction with selected aspects of their job but the severity of selected problems facing nurses in the workplace today. When current nurses are asked to rate the seriousness of selected problems that they face on the job, issues relating to staffing levels continually top the chart. Whether it is inadequate staffing levels to handle the number of patients during a shift (66% very/fairly serious problem), inadequate staffing levels to handle the level of acute care required by most patients (65%), or the fact that there is not enough time to spend with patients (64%), current nurses rate these three staffing-related problems as the most serious. Solid proportions of current nurses also indicate that inadequate time to complete paperwork (60%), the difficult physical demands of the job (55%), and inadequate time for breaks (51%) are problems. The remaining items are seen as less problematic.



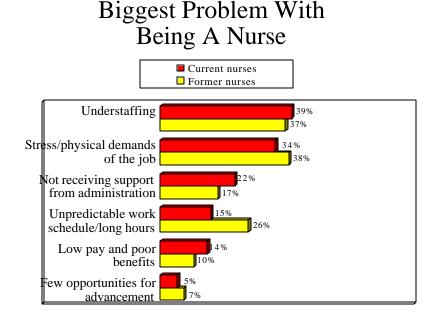
Severity Of Problems Facing RNs

*79% of current nurses report an increase in the acuity of patients.

A clear perception exists among all subgroups of current nurses that the acuity of patients for whom they care on a daily basis has increased over the past few years. Fully 79% think that the acuity of patients has increased, whereas only 3% believe that it has decreased and 17% say that it has stayed the same. (A similar 77% of former nurses say that the acuity of patients increased between the time they became a nurse and the time they left the direct patient care setting.)

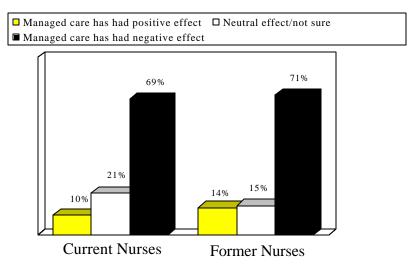
Potential leavers believe that each of the problems facing registered nurses is more severe than current nurses overall believe each one to be, which is another indication that stressful conditions are contributing to the nursing retention problem. Eighty-five percent of potential leavers also believe that the sickness of patients has increased in recent years.

In a separate questions, current and former nurses were asked to select from a list the one or two biggest problems with being a direct care nurse. Some of the same concerns already discussed continue to surface—understaffing and the stress and physical demands of the job. Both current nurses (39% select understaffing and 34% pick stress and physical demands) and former nurses (37% choose understaffing and 38% select stress and physical demands) cite these two areas as the biggest problems with their job. Responses among potential leavers are very similar, as the top three items they mention are understaffing (39%), the stress and physical demands (33%), and not receiving enough support from the administration of their health care facility (26%).

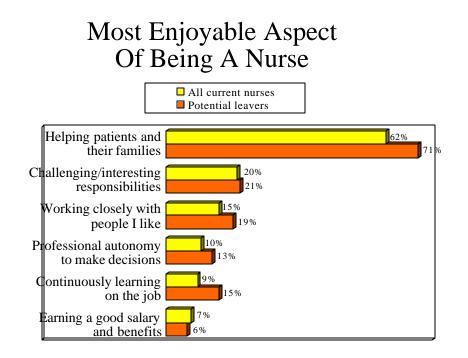


The one area in which current and former nurses have somewhat differing perceptions is when it comes to how big a problem unpredictable schedules and long hours are—former nurses (26%) found this aspect of their nursing job more problematic than do current nurses (15%). (And, as cited previously, former nurses also express a lower level of satisfaction than do current nurses in the area of having flexible arrangements for handling both work and family.)

Managed Care's Perceived Effect On Conditions For Nurses



By a substantial 69% to 10%, current nurses believe that managed care has had a negative rather than a positive effect on conditions for nurses, with 38% who think that it has had a *very* negative effect (and another 16% say that its effect has been neutral). Former nurses give an equally negative appraisal of managed care: 14% positive effect, 71% negative effect, 11% neutral. Nurses seem to feel that managed care bears considerable responsibility for staffing problems and greater acuity. It is widely recognized that managed care plans have developed methods and procedures to minimize the amount of time that their members spend in the hospital. In meeting this goal, it is logical that hospitals throughout the country have more patients who spend fewer days in the hospital, but are in need of more acute care and attention when they are there.



Both current and former nurses indicate that the element of their job that they most enjoy is helping patients and their families. This aspect of the job is far and away the most rewarding element to those in the direct patient care field. To some degree, current and former nurses also like their job because they have responsibilities that are challenging and interesting, but this element is not near the selling point that helping patients is. Few nurses select the other aspects tested as elements that contribute to their enjoyment of the job.

Fully 71% of potential leavers agree that the rewarding aspect of their job is helping patients and their families. This sentiment indicates that potential leavers are not considering leaving because they lack commitment to health care and their patients but because current conditions make it difficult to care for patients as they want to.

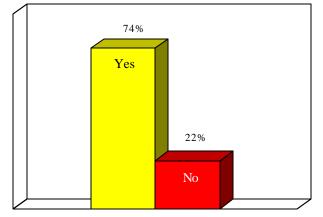
SECTION THREE: THE POTENTIAL TO IMPROVE RETENTION IN THE DIRECT PATIENT CARE SETTING

Despite direct care nurses' concerns about their job, and the fact that one in five current nurses are seriously considering leaving the field, the research reveals the potential to improve morale and increase retention. As will be discussed, the two most-often cited improvements that nurses would like to see are increased staffing levels and higher salaries. Another important step that can be effective in retaining and recruiting quality nurses is allowing nurses to have more input in decisions affecting their workplace.

Fully three in four (74%) potential leavers say that they would consider continuing in patient care for longer if conditions at their job improved.

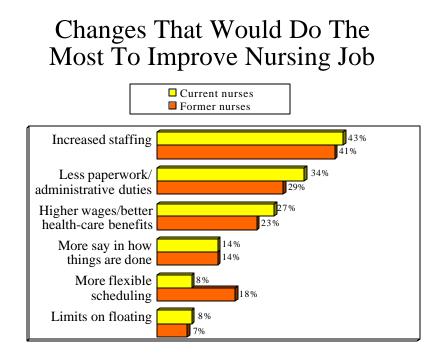
Improvements Could Persuade Potential Leavers To Stay

If conditions at your job improved, would you consider continuing in patient care for longer period of time?



When asked to select from a list the one or two changes that would do the most to improve their job, pluralities of both current (43%) and former nurses (41%) choose increased staffing levels. The two other changes that are selected by solid proportions of current and former nurses are less paperwork (34% of current nurses, 29% of former nurses) and higher wages/better health-care benefits (27% of current nurses, 23% of former nurses). Pluralities of all subgroups of current nurses except for

those working in clinics rank increased staffing levels at the top of the list. Clinic nurses actually select less paperwork (41%) as the more important change, followed closely by higher wages (39%). A plurality of potential leavers select increased staffing levels as the most important change.



When potential leavers are asked to name, in their own words, specific things that could be done to make them more likely to continue working as a nurse, increased staffing (42%) and better salaries (36%) top the list. Other changes that they say would make a difference to them—although not mentioned as frequently—include having better hours and schedules (21%), more respect (12%), more of a voice and input on how things are done (11%), and more support from management (11%).

What Would Make Nurses Stay? In Their Own Words

	Potential <u>leavers</u>	Former nurses*
More pay, salary increase	42%	23%
More staff, more nurses	36%	21 %
Better hours/schedule	21%	21%
More respect	12%	7%
More voice in decisions	11%	5%
Management support	11%	3%

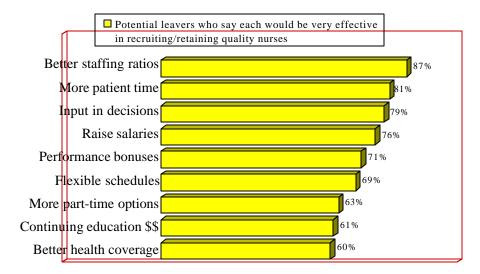
*29% of former nurses say they are happy with what they are doing now and that nothing would persuade them to enter direct patient care.

Former nurses also volunteer that better pay (23%) and more staffing (21%) would cause them to consider returning to the nursing profession, and a similar proportion also mention having better and more flexible schedules (21%) as an effective enticement for returning. This reveals again the higher priority that former nurses put on flexible scheduling. (Twenty-nine percent of former nurses state that they are satisfied with their current job and that nothing would make them consider reentering the profession. Another 6% say that no changes would entice them because they are retired or disabled.)

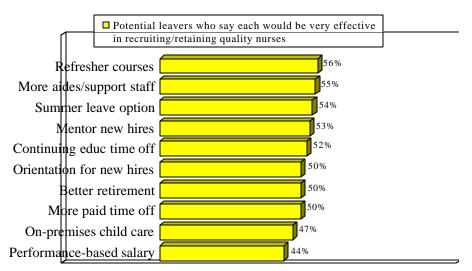
Several survey indicators clearly reveal the extent to which current and former nurses believe that inadequate staffing levels are a problem in their profession, so it is not surprising that one of the first improvements they suggest is increased staffing. However, neither current nor former nurses express the same level of dissatisfaction with their salary and wages (59% of current nurses are very or fairly satisfied and 61% of former nurses were very or fairly satisfied with this aspect). Nevertheless, although salaries are not necessarily a top-tier concern for nurses, one reason they may believe it to be an important and effective improvement is because of the greater plausibility of this change. Whereas they may perceive that some changes would be more difficult to implement effectively, such as reducing paperwork or giving nurses more of a voice in decisions that affect them, a salary increase is simple to

fulfill *once a decision has been made to provide it*. In addition, higher salary would provide greater compensation for and recognition of the challenging job conditions that nurses feel they face.

How To Improve Retention And Recruitment



How To Improve Retention And Recruitment



Nineteen specific proposals also were tested to gauge their potential effectiveness in helping to recruit and retain quality nurses. The findings reinforce the fact that improving staffing ratios and raising salaries, as well as giving nurses more input in decisions affecting them, are the most critical improvements than can be made. In fact, 87% of potential leavers nurses confirm that improving staffing ratios would be very effective, 79% think that enabling nurses to have more input in decisions affecting the workplace would be very effective, and 76% rate raising salaries as very effective. Four in five potential leavers also believe that providing more time to spend with patients would be very effective, which is a change that is directly linked to increased staffing ratios. With more than two-thirds of potential leavers strongly endorsing performance-based bonuses (71%) and more flexible schedules (69%), these are also changes with the potential to make a real difference in retention and recruitment. Each of the other possible changes are thought to have the potential to be at least moderately effective.

These findings are important because, although the nurse shortage is clearly a serious problem, it is not unsolvable. If hospitals and other health care providers improve conditions for nurses, these survey results suggest that it is possible to make real progress in addressing the nation's nurse shortage.