On behalf of HPAE, Change Research surveyed 512 current and recent nurses in primarily bedside facing roles in New Jersey hospitals from August 10-16th, 2022. This quantitative research concludes the multi-phase research program for HPAE in its efforts to better understand the experiences, challenges, and needs of hospital nurses in these unprecedented times. Of the nurses surveyed, 70% are currently working at the bedside in hospital settings, 3% are currently at the bedside but recently left (within the past three years) hospital settings, 4% still work in a hospital setting but are no longer primarily at the bedside, and 23% were at the bedside in a hospital setting within the past three years but are no longer at the bedside or in a hospital. Fully 30% are no longer in bedside facing roles in hospitals.

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1 On behalf of HPAE, Change Research surveyed 512 current and recent (past three years) nurses or nursing assistants in primarily bedside-facing roles in New Jersey hospitals from August 10-16, 2022. For the purposes of this survey, nurses are defined as nurses or nursing assistants only, excluding nurse managers and others, and being “recently” at the bedside or in a hospital setting means within the past three years. Respondents were recruited into an online survey instrument via targeted online advertisements to HPAE’s membership, to likely nurses on the voter-file, and to those interested in ‘nursing’ on Facebook, and via SMS to a voterfile sample of likely nurses on file. Respondents were weighted to counts provided by New Jersey Collaborating Center for Nursing. The modeled margin of error is 5.2%.
Unless otherwise specified, the results presented represent the responses of all survey respondents. Below are the most critical survey findings.

**The crisis in staffing levels**

Of those nurses currently at the bedside, **72% have considered leaving the bedside recently.** Newer nurses are the most likely to be considering leaving the bedside (95% of those with 5 years of experience or less). This finding validates a concern of experienced nurses in HPAE’s focus groups that there may be too few younger nurses to fill the ranks as they retire and their observation that younger nurses are less tolerant of a lack of work-life balance. Stunningly, **40% of nurses at the bedside say there is at least a 50% chance that they will become a travel nurse in the future** – 16% definitely/probably and 24% maybe (50/50 chance). The less experienced nurses are the most likely to say that they are considering this option.²

![Survey response chart](chart.png)

When asked to indicate the top two reasons why they might leave the bedside from a list of nine possible reasons, **the top two reasons cited by over half of those considering leaving the bedside were staffing levels (53%) and stress/burnout (51%).** In the second tier of reasons, with

² Our respondents included 22 bedside nurses in hospital setting who are currently travel nurses. When asked for the top two main reasons why they decided to become a travel nurse, the top reason provided was higher pay (72%) while roughly one-in-three selected other options like shorter commitments (35%), flexibility of schedule (30%), travel opportunities (28%) or something else (32%).
roughly one-quarter selecting it as a factor in their decision, is compensation (26%). Newer nurses were considerably more likely to consider their pay a top reason for leaving.

Speaking of stress levels, we asked those at the bedside in hospitals to rate their stress levels on a scale of 0 to 10, where zero means not stressed at all and 10 means severely stressed, and half rated themselves as extremely stressed (an 8, 9, or 10). Those who were currently considering leaving the bedside were particularly stressed, with 60% rating their stress level as very high.

Eighty-three percent of the nurses surveyed reported that nurses at New Jersey hospitals earn too little. Over 60% of all of the nurses surveyed reported they did not receive any sort of bonus in the past three years and less than one-third (31%) received hazard pay in the past three years to compensate them for the extraordinary risks and demands of the COVID-19 pandemic. A 62% majority of hospital nurses currently at the bedside also rate negatively their retirement benefits and 39% report that, despite working in the healthcare industry, their healthcare benefits are inadequate.

Roughly half of the nurses surveyed also rate conditions related to their own safety in the workplace negatively. Not only do a 53% majority of hospital nurses currently at the bedside report inadequate protections from violence and abuse, but also 48% of hospital nurses currently at the bedside reported actually experiencing physical abuse in the past few years; 51% rated their access to mental health resources negatively; even 46% said the protection their employers provided from COVID-19 during 2020 was insufficient.

The crisis in patient care
Our qualitative research phase set off alarm bells about the quality of patient care. Nurses described staffing situations that were setting them up for failure and a resulting decline in the quality of care that they were able to provide to patients. Though a majority of respondents rated positively the quality of care that New Jersey hospitals are able to provide, a disturbingly high 43% of nurses at the bedside in state hospitals rated the quality of care provided negatively.

There are several factors that impact patient safety and the quality of care that nurses provide – from staffing levels and access to tools to the preparedness and experience level of nurses. Three-in-four bedside nurses in hospitals in New Jersey rate the staffing levels in their units as poor or not good. A 55% majority also rate negatively the preparedness of the new nurses in their unit. Over 40% of these nurses also rated negatively the number of experienced nurses in their unit as well as their access to the tools and resources to do their jobs.

A whopping 83% of nurses said that over the past few years they were at least occasionally put in situations that put their license at risk with one-third reporting this happened frequently. Almost three-in-four nurses surveyed (73%) report being disrespected by hospital management in the past few years with 26% saying this was a frequent occurrence. A 61% majority report situations where their manager did not follow practices and protocols and 60% report being asked to cover units for which they were not adequately trained.
Managers failing to follow practices and protocols and putting nurses on units without adequate training were the two experiences that those who recently left the hospital bedside reported at a considerably higher rate than those who were still there: 56% of those at the bedside in hospitals reported being put in situations where their manager didn’t follow practices or protocols in the past years versus 73% for those no longer at the bedside in hospitals; 54% of those at the bedside in hospitals reported being asked to cover a unit for which they lacked training in the past years versus 72% for those no longer at the bedside in hospitals.

In general, would you say the quality of care hospitals are able to provide is:

- Getting worse: 77%
- Staying the same: 18%
- Getting better: 5%

In general, would you say hospitals are:

- Getting less safe: 75%
- Staying the same: 21%
- Getting safer: 4%

The result – 77% of nurses say that the quality of care hospitals are able to provide is getting worse and 75% believe that hospitals are getting less safe. This was evident to nurses of all levels of experience at the bedside.

Attracting and retaining more nurses

Fully 91% of nurses believe that the issues with nurse retention won’t go away unless hospitals take action, and 83% say that “the issues with nurse retention have existed for a while and the pandemic made them even worse; they won’t go away unless hospitals take action.” There are two things that these nurses consider critical to attracting and retaining more nurses at New Jersey hospitals: better staffing levels and higher pay. These two actions were selected by two-thirds of those surveyed when asked to pick the two things they think would help the most to attract and retain more nurses from a list of six possible actions.

Which TWO of the following do you think are the most important things to do in order to attract and retain more nurses at New Jersey hospitals?

- Better staffing levels: Total 67, Currently @ Bedside in Hospital 67, Not Currently @ Bedside in Hospital 68
- Higher pay: Total 65, Currently @ Bedside in Hospital 73, Not Currently @ Bedside in Hospital 46
- Safer, healthier working environment: Total 20, Currently @ Bedside in Hospital 20, Not Currently @ Bedside in Hospital 21
- More responsive, respectful management: Total 17, Currently @ Bedside in Hospital 12, Not Currently @ Bedside in Hospital 28
- Better benefits: Total 14, Currently @ Bedside in Hospital 15, Not Currently @ Bedside in Hospital 14
- More work / life balance: Total 10, Currently @ Bedside in Hospital 8, Not Currently @ Bedside in Hospital 15
- None of the above: Total 2, Currently @ Bedside in Hospital 1, Not Currently @ Bedside in Hospital 2
Notably, higher pay was even more important to those currently at the bedside in hospital settings (73%) compared to the thirty percent no longer in such roles (only 46%). Those no longer in such roles are more likely to consider responsive, respectful management important (28% versus 12% among those currently in hospitals at the bedside).

Nurses are also unequivocal that these are things that hospitals can afford to do: 97% say that they can afford to hire more nurses and 93% say that they can afford to pay nurses higher wages. While 83% believe that nurses at New Jersey hospitals make too little, 89% believe that CEOs and executives of New Jersey hospitals earn too much.

**Legislative action**

An 84% majority of nurses surveyed believe that the state and federal governments provide local hospitals with too little support. What does support look like? **There is an overwhelming desire for proposals that would improve the staffing crisis, especially for rules around staffing.** All of the proposals tested earned support from a majority of those surveyed, but the most popular proposals include staffing committees that include bedside staff when establishing staffing ratios, statewide staffing laws, and hazard pay for nurses at the bedside during the pandemic paid for by the American Rescue Plan funds.

The most divisive proposal is one to establish stricter standards for travel nurses. This has the support of 71% of nurses surveyed and 44% strongly support it, but that is still considerably less than other proposals, perhaps because the nature of the standards is not specified. That being said, 40% of nurses are actively considering entering travel nursing, in part because they believe
that travel nurses are earning what nurses deserve (54%), and there is a general reluctance to blame travel nurses for the untenable situation that hospital managers have created.

Unions will be critical to making these and other changes. Of those surveyed, 36% reported being a current or retired member of a union, and another 29% expressed a desire to join one in the future.

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