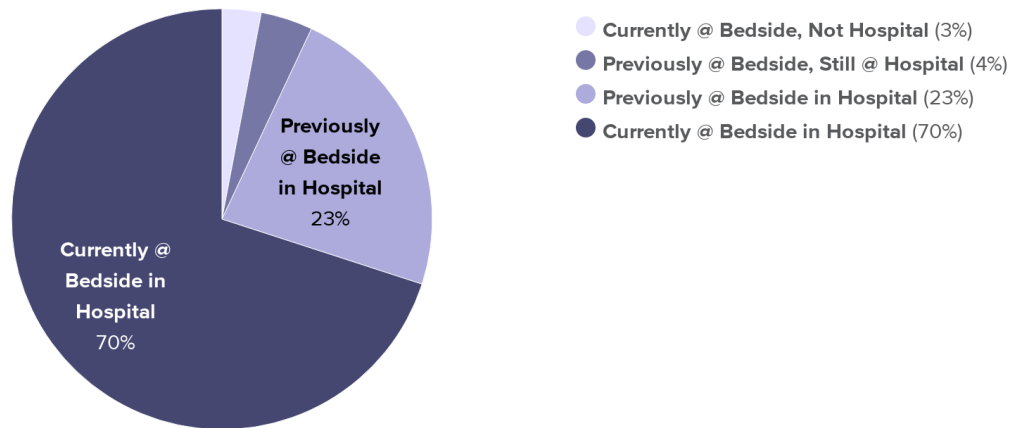**August 22, 2022**

TO: **HPAE New Jersey**
FROM: **Nancy Zdunkewicz, Change Research**
RE: **Results of Survey of Current & Recent Bedside Nurses in NJ Hospitals**

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.[1] 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.

Current bedside / hospital status:

- Currently @ Bedside, Not Hospital (3%)
- Previously @ Bedside, Still @ Hospital (4%)
- Previously @ Bedside in Hospital (23%)
- Currently @ Bedside in Hospital (70%)

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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.
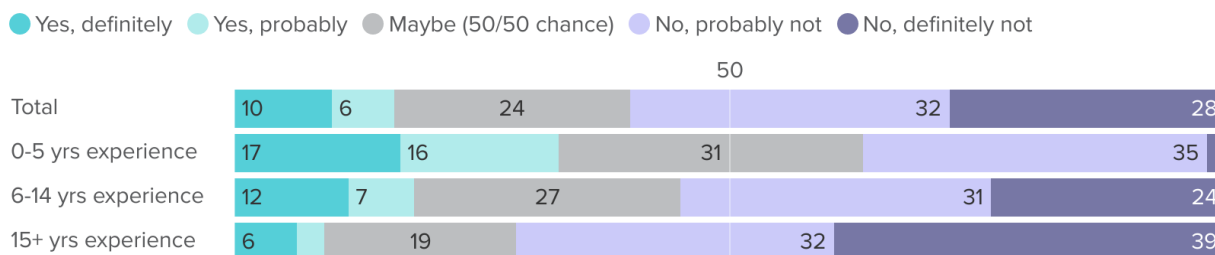
The crisis in staffing levels

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]

Have you considered leaving the bedside recently?

● Yes

Total	72
0-5 yrs experience	95
6-14 yrs experience	70
15+ yrs experience	64
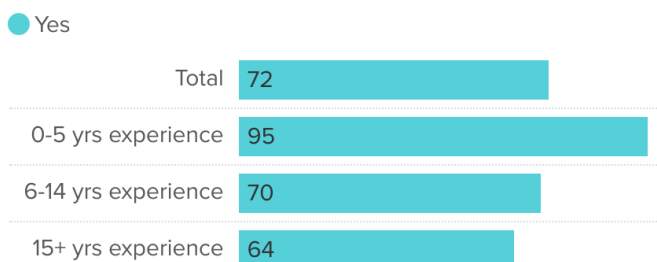
Asked of those currently at the bedside.

Are you considering becoming a travel nurse in the future?

● Yes, definitely ● Yes, probably ● Maybe (50/50 chance) ● No, probably not ● No, definitely not

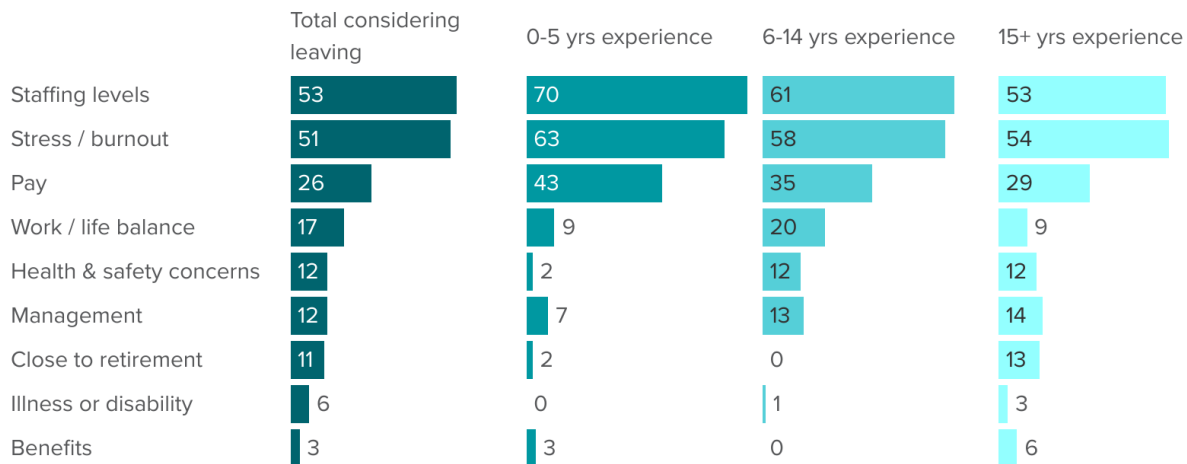|					
Total	10	6	24	32	28
0-5 yrs experience	17	16	31	35	
6-14 yrs experience	12	7	27	31	24
15+ yrs experience	6		19	32	39

Asked of those currently at the bedside who are not travel nurses.

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

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[2] Our respondents included 22 bedside nurses in hospital settting 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.

Which TWO of the following are most important factors in your decision to leave the bedside?

	Total considering leaving	0-5 yrs experience	6-14 yrs experience	15+ yrs experience
Staffing levels	53	70	61	53
Stress / burnout	51	63	58	54
Pay	26	43	35	29
Work / life balance	17	9	20	9
Health & safety concerns	12	2	12	12
Management	12	7	13	14
Close to retirement	11	2	0	13
Illness or disability	6	0	1	3
Benefits	3	3	0	6

Asked of those who have considered leaving the bedside recently.

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.
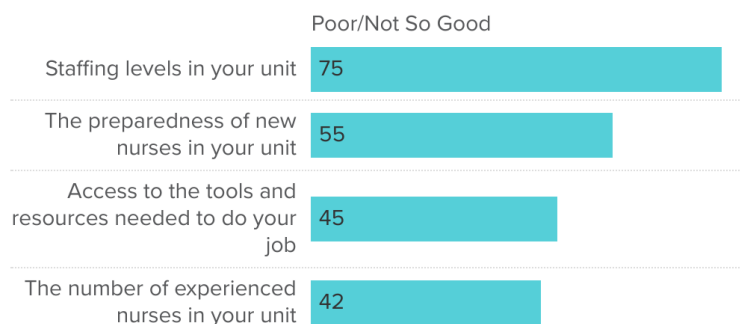
Roughly half of the nurses surveyed also rate conditions related to their own safety in the workplace negatively. Not only do a 53% majority of hospital nurses currently at the bedside report inadequate protections from violence and abuse, but also 48% of hospital nurses currently at the bedside reported 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

Ratings on issues related to care quality & patient safety:

Poor/Not So Good

Staffing levels in your unit	75
The preparedness of new nurses in your unit	55
Access to the tools and resources needed to do your job	45
The number of experienced nurses in your unit	42

Results among current bedside nurses in hospital settings.

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.
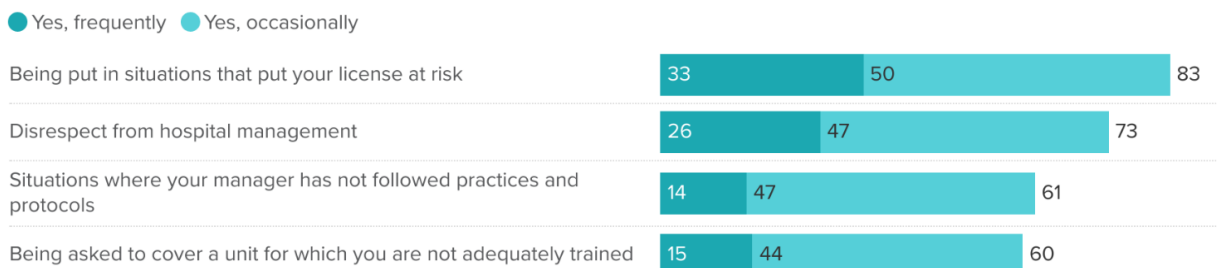
A whopping 83% of nurses said that over the past few years they were at least occasionally put in situations that put their license at risk with one-third reporting this happened frequently. Almost three-in-four nurses surveyed (73%) report being disrespected by hospital management in the past few years 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.

Did you experience any of the following in your workplace in the past few years?

● Yes, frequently   ● Yes, occasionally

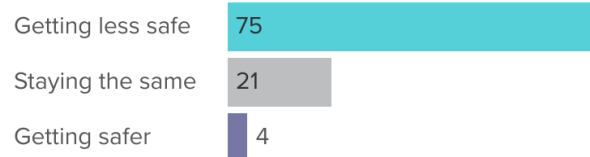|			
Being put in situations that put your license at risk	33	50	83
Disrespect from hospital management	26	47	73
Situations where your manager has not followed practices and protocols	14	47	61
Being asked to cover a unit for which you are not adequately trained	15	44	60

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
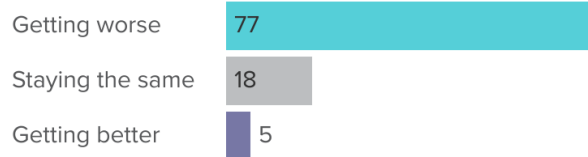
In general, would you say hospitals are:

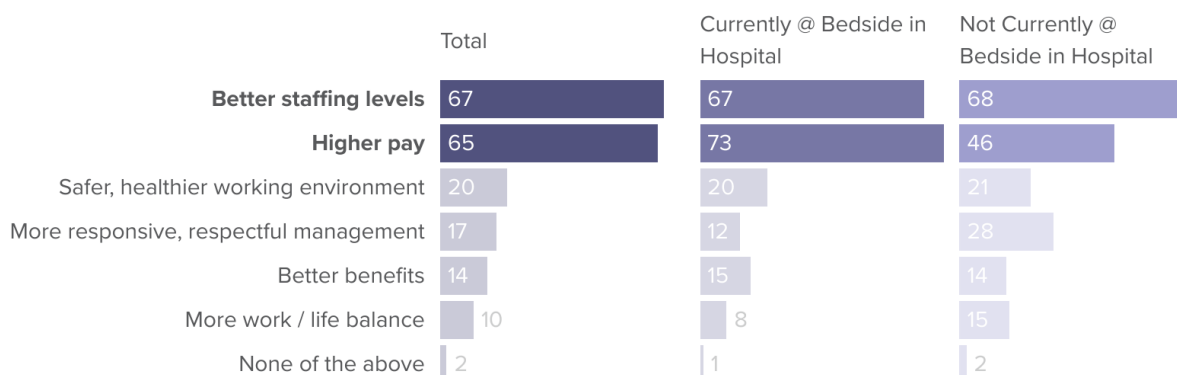|	
Getting less safe	75
Staying the same	21
Getting safer	4

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?

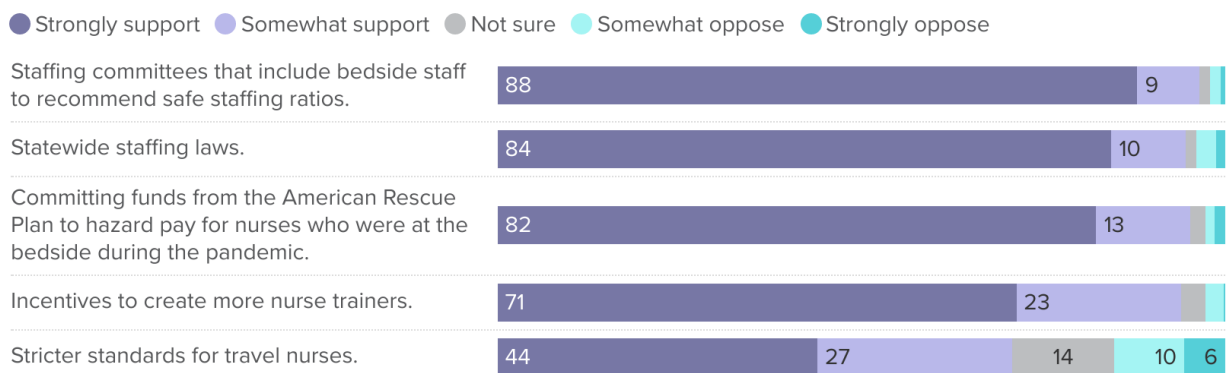|	Total	Currently @ Bedside in Hospital	Not Currently @ Bedside in Hospital
Better staffing levels	67	67	68
Higher pay	65	73	46
Safer, healthier working environment	20	20	21
More responsive, respectful management	17	12	28
Better benefits	14	15	14
More work / life balance	10	8	15
None of the above	2	1	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.

Do you support or oppose each of the following proposals?

● Strongly support ● Somewhat support ● Not sure ● Somewhat oppose ● Strongly oppose

Proposal			
Staffing committees that include bedside staff to recommend safe staffing ratios.	88	9	
Statewide staffing laws.	84	10	
Committing funds from the American Rescue Plan to hazard pay for nurses who were at the bedside during the pandemic.	82	13	
Incentives to create more nurse trainers.	71	23	
Stricter standards for travel nurses.	44	27	14 · 10 · 6

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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