

California Board of Registered Nursing

2010 Survey of Registered Nurses



Conducted for the
California Board of Registered Nursing

by the
University of California, San Francisco
School of Nursing

Joanne Spetz, Ph.D.
Professor & Principal Investigator
Dennis Keane, M.P.H.
Survey Analyst
Carolina Herrera, M.A.
Statistician

Survey of Registered Nurses in California, 2010

July 2011

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The authors thank our interns, Henry Chu, Andrew Tang, Tiffany Huang, Frank Hoffman, Evan Neubacher, Lela Chu, and Jessica Lin for their work on this project.

SURVEY OF REGISTERED NURSES IN CALIFORNIA, 2010

Published 2011 by the California Board of Registered Nursing

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Executive Summary

The 2010 Survey of California Registered Nurses is the seventh in a series of surveys designed to describe nurses licensed in California and to examine changes over time. Other studies were completed in 1990, 1993, 1997, 2004, 2006, and 2008. Like the 2004-2008 surveys, the 2010 survey targeted two populations: RNs with active California licenses, and RNs whose California licenses had been renewed with inactive statuses in the previous two years or lapsed within the 13 months prior to the survey. The 1990, 1993, and 1997 surveys were sent only to RNs with active licenses and California addresses; these previous surveys did not include out-of-state RNs, RNs with inactive licenses, or RNs with lapsed licenses. The 2004-2010 studies surveyed active RNs living inside and outside of California and lapsed or inactive RNs with California residency.

The 2010 survey response rate of nurses with active licenses was 62.2 percent, yielding information for about 5,551 nurses with California addresses, and 673 nurses who live outside California. The 2010 survey response rate of nurses with inactive and lapsed licenses was 54.5 percent, providing data about 332 nurses with inactive licenses (66.4% response rate) and 213 nurses with lapsed licenses (42.6% response rate).

Demographics

California has a large, diverse workforce of RNs. Between 1990 and 2010, the average age of working RNs residing in California rose from 42.9 to 46.3 years. Nursing continues to be a predominantly female profession, but the percent of men entering the profession is increasing: in 1990, 5.4 percent of working RNs residing in California were male and in 2010, men made up 10.7 percent of employed California RNs. The ethnic diversity of California's working nurses has changed since 1990; the share of white nurses has declined from 77.2 percent in 1990 to 53.8 percent in 2010. Whites do not comprise the majority of the nursing population under 45 years old; 59.2 percent of these younger nurses residing in California are non-white. The most highly represented non-White ethnic groups across all age groups are Filipinos (20.8%), Hispanics (8.5%), and non-Filipino Asians (7.7%).

Nursing education

Diploma programs continue to decline as a source of basic nursing education for California registered nurses. In 1990, the share of working RNs whose initial education was in a diploma program was 32.3 percent and by 2010, it had dropped to 11.1 percent. The share that entered the profession with a baccalaureate or graduate degree rose from 28.7 percent in 1990 to 41.0 percent in 2010. The majority of California's working RNs were educated in California, at 56.2 percent in 2010, and 23.0 were educated in other countries. The average age at which working California nurses graduated from their initial RN education program has risen over time. In 1990, the average age at graduation was 25.4 years; in 2010, the average age was 27.3 years. Many nurses increase their education level after licensure; 11.5 percent of working RNs report that their highest nursing education is a master's or doctoral degree.

Employment

About 87.4 percent of nurses with active licenses and California addresses were working in nursing positions at the time of the survey; this share has ranged from 82.6 percent to 89.3 percent since 1990. Employment rates vary substantially with age. In 2010, for the first time the percent of nurses under 30 who were working dropped considerably; in 2004, 96.1 percent, and in 2008, 97.7 percent of nurses under age thirty reported working, while in 2010, only 91.3 percent of nurses under thirty reported working. In 2010, 87.8 percent of nurses 55 to 59 years old who resided in California were working in nursing positions and the employment rate for nurses 60 to 64 years rose from 75.5 percent in 2008 to 81.4 percent in 2010. The employment rate for nurses 65 years and older

with active licenses and California residences rose in 2008 to 54.0 percent, and declined in 2010 to 49.8 percent, a level similar to that seen in 2006.

The average number of hours worked per week by RNs changed little between 1990 and 2010 ranging from 35.2 to 36.5 hours over this period. Over 65 percent of RNs said they work less than one hour per week of overtime, or no overtime, in their principal nursing position, while 8.7 percent said they work more than 8 hours of overtime per week, the lowest level reported since 1997.

Job titles and work settings

Most working RNs report a primary job title of “staff nurse” or “direct care provider” (59.8%). The percentage of registered nurses employed in acute hospital settings declined from 67.9 percent in 1990 to 60.2 percent in 1997, and then increased to 64.3 percent by 2010. Other common workplaces of RNs include ambulatory care settings, such as clinics and outpatient surgery centers (8.1%), nursing homes, extended care facilities, or skilled nursing facilities (4.4%) and home health agencies (3.3%).

In 2010, for the first time RNs were asked about employment status changes in the past year, regardless of current employment status. Nearly 29 percent of RNs residing in California reported a change in their employment status in 2010. The most common change was a decrease in working hours (26.3%) followed by a new position with the same employer (20.6%), and an increase in hours (19.9%). Nearly 18 percent reported an “other” change, of which the most commonly reported was retirement (17.4%), disability (5.8%); being laid off (5.8%), being unemployed (4.9%), and having more than one job (3.9%).

Only seventeen percent of RNs who reside in California reported that they held more than one nursing position in 2010 as compared with 21.9 percent in 2004. In 2008, 19.7 percent of these RNs reported holding more than one additional position; in 2010, 23.5 percent of RNs with a second job had two or more secondary nursing positions. Forty percent of RNs with secondary positions work as hospital staff for at least one of their additional positions. Nearly sixteen percent are engaged in ambulatory care, school health, or occupational health and another 11.4 percent are engaged in teaching health professions or nursing students. Over thirteen percent were employed through a temporary agency for at least one of their additional positions, 2.5 percent were employed by a traveling agency, and 11.4 percent were self-employed. The percentage of RNs with a secondary position working as a regular employee rose from 73.7 percent in 2008 to 77.1 percent in 2010.

Three percent of RNs who reside in California work for a temporary agency or registry for their primary or secondary nursing jobs, and less than 1 percent work for a traveling agency. For nurses who reside in California, this was the first time wages were not the dominant reason to work for a temporary or traveling agency (28%); however, 46 percent of nurses reported that this work supplemented their income, 16.5 percent are waiting for a desirable permanent position, and 13.8 percent reported they have been unable to find a permanent RN job or to work sufficient hours. Almost 53 percent reported working for a temporary or traveling agency, or registry because they wanted more control of their schedules. Forty-six percent of nurses selecting agency/registry work or traveling assignments reported taking the position to supplement their income.

Nurses’ earnings and benefits

Nurse incomes have risen dramatically since 1990. In 1990, average annual income from nursing was \$31,504 for California residents working in nursing positions; in 2004, it was \$59,937, and by 2010, it had risen to \$82,134. Twenty-two percent of RNs reported they earned more than \$100,000 in 2010. When asked about fringe benefits in 2010, the percentage of working RNs reporting retirement, dental, and personal health insurance were lower than that reported in 2008. Nearly 73 percent of nurses received personal retirement benefits and personal health insurance. Almost 60 percent received dental insurance from their employers, and 76.3 percent received health insurance for their families. The percentage of working RNs reporting retirement, dental, and personal health insurance were lower than were reported in 2008.

Job satisfaction of working registered nurses

Nurses were asked to rate their satisfaction with 29 aspects of their primary nursing position, in addition to their satisfaction with the profession overall. The five aspects of nursing that received the highest satisfaction ratings in 2010 were interactions with patients, feeling that work is meaningful, job overall, team work between coworkers, and work schedule. In prior years, job security was rated as high; in 2010, it was replaced by teamwork with coworkers. The remaining factors were also highest rated in 2004, 2006, and 2008. The five lowest rated aspects of nursing in 2010 were amount of paperwork required, involvement in policy and management decisions, non-nursing tasks required, leadership from administration, and recognition for a job well done. These factors, with the exception of recognition for a job well done, also were rated as least satisfactory in 2008.

Temporary departure from nursing work

Nurses were asked whether they had ever stopped working as a registered nurse for a period of more than one year. The proportion of California-resident RNs who stopped working as a registered nurse for more than a year decreased from 25.1 percent in 1990 to 11.5 percent in 2010. Among those who had temporarily stopped working, 11 percent were out of nursing for only one year, and over half (61%) stopped working for more than two years. In the 2010 survey, childcare responsibilities were cited as an important reason to stop working temporarily by over half of the nurses who left nursing for more than one year (58.8%). Other frequently reported reasons for temporary departures from nursing include other family responsibilities (44.6%), moving to a different area (27.7%), stress on the job (26.7%), and to try another occupation (18.7%).

Future plans of working registered nurses

Since 1993, over half of respondents have indicated plans to work approximately as much as they do now, between 1993 and 2008, this share dropped to 54.6 percent. However, in 2010, 60.2 percent reported they planned to work approximately as much as they do now. In 2010, thirteen percent planned to increase their hours of nursing work. Fifteen percent plan to reduce their hours of nursing work; this share dropped over four percentage points since 2008 (19.8%). Since 2004, about 3 percent of nurses plan to leave nursing entirely, but not retire; in 2010, two percent of working RNs reported they plan to leave nursing but not retire. Fewer RNs reported they would be retiring in five years; in 2008, 12.5 percent of working nurses said they plan to retire within five years, as compared with 9.5 percent in 2010.

Nurses residing outside California

In 2010, nearly 15 percent (51,434) of RNs with active California licenses live in other states. In 2010, 29.7 percent of these nurses reported that they worked in California at some time during the previous year. Of those who worked in California, 16.3 percent had worked in the state for a temporary or traveling agency. Out of state nurses who worked for a temporary or traveling agency worked in California an average of 2.1 months in the previous year, for 39.7 hours per week. Over 10 percent worked in telenursing, either for a California employer or with California patients. About 2 percent commute to California from a bordering state. For nurses who were living outside California in 2010, 30.5 percent reported that they plan to travel to California to work as an RN intermittently over the next five years, and 25.9 percent plan to relocate to California to work in nursing.

Nurses who do not work in nursing

The share of nurses working in non-nursing jobs rose from 22.7 percent in 2004 to 33.9 percent in 2006, and then declined in 2010 to 26.9 percent. Of the nurses with active licenses who were not working in the profession at the time of the survey, 34.9 percent reported that retirement was an important or very important factor in their decision not to work in nursing in 2010 as compared with 30.5 percent in 2004. Nearly forty percent said they either were retired or would definitely not return to nursing in 2010, which is a decrease from the 47 percent who intended to leave nursing in 2008 and higher than the 31.6 percent who responded similarly in 2006. In 2010 nearly one-third (32.8%) of not working nurses were currently seeking RN work.

Among nurses with inactive licenses, 49.9 percent were retired in 2010. Only 11.1 percent said they plan to work as an RN in the next five years; 82.0 percent said they do not plan to practice in California in the next five years. However, 35.0 percent said they might reactivate their licenses in the future. Nurses who were uncertain of their plans were asked to identify factors that might be important in a future decision to return to nursing. The most important factors were flexible work hours, better nurse to patient ratios, and adequate support staff.

Among nurses with lapsed licenses, 41.2 percent were retired in 2010. Only 9.2 percent said they plan to work as an RN in California in the next five years, and 16.7 percent said they might reactivate their California license in the future. Nurses who were uncertain of their plans were asked to identify factors that might be important in a future decision to return to nursing. The most important factors for nurses with lapsed licenses were availability of re-entry programs and mentoring, flexible work hours, modified physical requirements of the job, and adequate support staff.

Summary

California has a diverse workforce of nurses, and this diversity is increasing with the entry of more men and ethnic minorities into the profession. Nurses are well educated, and a large share of nurses pursue additional education after entering the profession. The commitment to ongoing professional education is one of the strengths of the nursing workforce. Nurses have a wide range of job opportunities, and can take advantage of even more with appropriate educational advancement. Nurses are generally satisfied with their jobs, the profession, and their interactions with patients.

The employment settings of RNs have been relatively stable over the past decade, with most nurses working in staff nurse positions, and the majority working in acute-care hospitals. Nurses work in a wide range of fields, including long-term care, management, patient care coordination, education, home health, community health, and public health. Overall satisfaction levels are higher for working RNs, with the exception of satisfaction with job security and employer supported education, both of which dropped between 2008 and 2010.

In 2010, unlike previous surveys, RNs indicated that finding nursing work was a growing concern. Employment rates for RNs rose in 2010 to 87.4 percent and many non-working RNs reported they were looking for nursing work. More RNs over the age of 50 were working than in previous years, while RNs under the age of 40 had lower levels of employment. Additionally, more nurses age 55 or older are not planning to leave nursing or to reduce their hours of work. RNs younger than 35 years of age are also planning to work more. In addition, salaries stabilized suggesting that the employers did not need to raise wages in order to attract nurses. Fewer working RNs felt they had adequate job security in 2010 than in 2008 – the first drop in this satisfaction question's level since 1993. Nearly 29 percent of working RNs experienced a job change in 2009, with the most common experience being a decrease in hours worked (26.3%). Nearly 20 percent who experienced a job change experienced an increase in hours, driven primarily by changes in financial status.

The increased RN employment and temporary difficulty of some RNs to find nursing work in California should be interpreted carefully. The recession is perceived by some as having abated the ongoing nursing shortage. The overall expenditures on health care costs in 2009 were lower than anticipated. However, as the country slowly moves out of recession, the primary drivers of increased RN demand (the aging of the nursing and general population, legislative mandates) remain strong. The strengths of the nursing profession, which include broad job opportunities, career mobility, commitment to ongoing education, increasing diversity, and high rates of professional satisfaction, must be sustained to ensure that California's nursing workforce thrives in the future. Employers and health care leaders can work to maintain the positive aspects of nursing, address the factors that may

be prompting nurses' decisions to work outside nursing, and actively strive to expand the supply of new graduates into the profession.

Chapter 1. Introduction and Methodology

This study of registered nurses with California licenses is the seventh in a series of surveys designed to describe licensed registered nurses in California and to examine changes over time. Surveys have been conducted in 1990, 1993, 1997, 2004, 2006, 2008, and 2010. The Board of Registered Nursing (BRN) has commissioned various organizations to conduct and analyze the surveys; the 2006, 2008, and 2010 surveys were conducted by the University of California, San Francisco (UCSF).

Purpose and Objectives

The purpose of the surveys is to collect and evaluate nursing workforce data to understand the demographics, education, and employment of registered nurses (RNs) with California licenses. Questions about perceptions of the work environment, reasons for discontinuing work in nursing, and plans for future employment are included in the surveys.

The 2010 study consisted of two surveys: (1) a survey sent to RNs with active California licenses, with both California and out-of-state addresses, and (2) a survey specifically for RNs whose California licenses had become inactive or lapsed in the two years prior to the survey. The 2004, 2006, and 2008 studies also consisted of two surveys of these same populations. The first three surveys (1990, 1993, and 1997) included only actively licensed RNs with California addresses.

Each time the survey has been conducted, the survey questions and content have been modified based on findings from the previous survey, and items of interest have been added. Generally, however, consistency of measures has been maintained, which permits the reliable, valid measurement and analysis of trends in California's nursing workforce over time.

The 2010 survey included a space for respondents to provide comments or share observations for the Board of Registered Nursing. These narrative comments are analyzed in Chapter 6 of this report.

Survey Development

UCSF worked with the BRN to update the survey questionnaires for 2010. Specifically, the survey update included the following steps:

- A review of past surveys conducted for the BRN, particularly surveys conducted in 2006 and 2008;
- A review of the National Sample Surveys of Registered Nurses (2004 and 2008), conducted by the United States Bureau of the Health Professions;
- Collaboration with staff at the BRN to identify current issues and draft the survey questionnaire;
- A review of draft questions by the BRN staff, UCSF staff, and other experts;
- Revision of the surveys based on feedback from BRN and UCSF staff, and other experts;
- Development of formatted survey instruments;
- Beta-testing of the survey instruments by nurses recruited by UCSF and the BRN;
- Development of the web-based surveys;
- Beta-testing of the web-based surveys by staff at the BRN and UCSF; and
- Editing the formatted surveys for printing, and editing of the web-based surveys for online use.

Process for Data Collection and Coding

All RNs selected for the surveys were mailed a cover letter from the Board of Registered Nursing, which included information about how to complete the survey online, the survey, and a postage-paid return envelope. The survey was mailed on April 23, 2010. A reminder postcard was sent on May 11, and the questionnaire was remailed on June 2 to non-respondents. Reminder postcards were sent on June 17 and July 2, 2010. Data collection ended on August 23, 2010.

All mailings were sent by first-class mail. Outgoing surveys were coded with a tracking number and completed surveys, along with ineligible and undeliverable cases, were logged into a response status file. The status file permitted close monitoring of the response rate. The web version of the survey was monitored as well. The first reminder postcard was sent to all nurses selected for the survey, but the remailing of the survey and last two reminder postcards were limited to nurses who had not yet responded to the survey.

Data from the web-based surveys were automatically entered into a database. All paper surveys were entered into a database by Office Remedies Inc, except the narrative comments, which were entered at UCSF. The paper data were entered twice, by two different people at two different times. The two entries for each survey respondent were compared, differences were checked against the paper survey, and corrections were made accordingly. After the comparisons were complete, discrepancies corrected, and duplicate records deleted, the data were checked again by another computer program to ensure only valid codes were entered and logical checks on the data were met. Approximately 15.4 percent of the respondents completed the survey online, an increase of 7.5 percentage points over 2008 levels.

The Active RN Sample

Selection of the Active RN Sample

The survey of nurses with active licenses was sent to 10,000 RNs with addresses in California and other states. The Board of Registered Nursing created a file of all RNs on February 18, 2010, and delivered this file to UCSF. This database included name, mailing address, birth date, date of licensure in California, date of last renewal, and license status. The database included 351,972 nurses with active licenses residing in the United States. Birthdates were missing or indicated an age of younger than 17 for 13 nurses in the database; these nurses were excluded from the survey. Thus, the working file from which nurses were sampled contained 351,959 RNs.

In order to obtain a survey dataset that could be used to examine the characteristics of nurses in different regions of California, we stratified the eligible population into nine regions, and selected the sample to be surveyed based on targets in each region. This type of sampling strategy, called a stratified random sample, is widely used in survey research and well documented in numerous textbooks. With this type of sampling, surveys returned from each stratum (region, in this case) are weighted to produce statistically valid estimates of the full population.

The original sample for the Active RN survey was planned to be 8,000 nurses. Our goal was to have at least 400 respondents per region. To reach this goal, we assumed that the response rate for each region would be the same as for the 2008 survey, thus requiring at least 630 surveys be mailed to nurses in each region. Some regions had lower response rates in 2008, and thus more surveys were allocated to those regions to obtain the targeted response of at least 400 respondents.

After developing our sampling scheme, we added 2,000 nurses to the sample, as requested and funded by the Gordon and Betty Moore Foundation. One thousand of these additional nurses resided in a portion of the San Francisco Bay Area (Alameda, Marin, San Francisco, San Mateo, and Santa Clara counties). The other 1,000 resided in portions of the Sacramento, Northern Counties, and Central Valley regions (Amador, El Dorado, Nevada, Placer, Sacramento, and Yolo counties). The regions required to meet the needs of the Moore Foundation required the addition of four regions to the strata for sampling.

The final sampling scheme had 13 regions, 12 of which were in California and one for RNs with mailing addresses outside California. The first four columns of Table 1.1 present our final sampling scheme. All tables and figures in this report use the nine regions originally designed for the Board of Registered Nursing.

Two Formats for the Active RN Survey

In 2010, we tested a revision of the RN survey in which survey questions were organized as in the National Sample Survey of Registered Nurses, which has been conducted by the U.S. Bureau of Health Professions since 1977. Questions about education were moved to the beginning of the survey, and questions about job satisfaction were moved to follow questions about nursing employment. In order to test whether the organizational change would result in substantive changes in the data, we sent half of the sample the “new format” and half of the sample the “old format.” After cleaning the data, we found the new format had a slightly better response rate (2.3 percentage points higher) than the old format, although the difference in response rates was not statistically significant. We found no significant differences in the distribution of respondents to the old and new format by age (Chi-squared=3.75, Pr = 0.44) and region (Chi-squared=5.44, Pr = 0.71). We found that more RNs completed the satisfaction questions in the new format, and t-testing of the satisfaction questions found that RNs who responded to the new format were more likely to report higher satisfaction levels for several questions. We also tested for differences in overall nursing profession satisfaction; this question remained in the first section for both questionnaire versions. We found new format RNs also responded with higher professional satisfaction than did RNs who answered the old version. Data from the two survey formats were combined for the analyses presented in Chapters 2 through 4.

Response Rates for the Active RN Survey

By the end of the data collection period (August 23, 2010), questionnaires were received from 6,302 of the actively licensed registered nurses to whom the survey packets were mailed. Two hundred and nine cases were determined ineligible for the survey due to being returned for lack of a current mailing address, reported death, or refusal to participate. Seventy-eight of the completed questionnaires were later determined to be unusable due to incomplete data, non-active RN status, or a written refusal to participate in the survey. Thus, the total number of usable responses from the 2010 survey was 6,224 of the 9,791 eligible nurses, which represents a 63.6 percent response rate for the eligible population and a 62.2 percent response rate when considering all surveys mailed. Table 1.2 details the survey response outcomes for all seven surveys (1990-2010).

Representativeness of Active RN Respondents

Survey responses were matched to the original sample database so that response bias could be examined. The last three columns of Table 1.1 present the regional distribution of survey respondents and the response rate for each region. There was some difference in response rates by region. Nurses in the northern part of California were more likely to respond to the survey, while the lowest response was from nurses residing outside California. The age distribution of respondents also is different from that of the sample, as seen in Table 1.3. Younger nurses were substantially less likely to respond to the survey, with only 47.6 percent of nurses under the age of 35 years completing the survey. In contrast, over 75 percent of nurses aged 55 to 64 responded to the survey. Thus, nurses in the younger age groups (ages 45 and under) are somewhat under-represented among respondents to the 2010 survey.

To address differential response rate by age group and account for the regional stratification of the sample design, post-stratification weights were used to ensure that all analyses reflect the full statewide population of RNs with active California licenses. The post-stratification weights are based on the numbers of nurses in each region and each age group. We used Stata SE 11.1, a commonly used statistical package, to analyze the data. The survey data analysis commands in this software (svy) were used to conduct all analyses of the data for nurses with active licenses, using the post-stratification weights.

Table 1.1 California’s nursing workforce, the survey sample, survey respondents, and the response rate, by region, 2010

Region	Counties	Actively Licensed RNs		Survey Sample		Survey Respondents		Response rate
		#	%	#	%	#	%	%
North of Sacramento, except Nevada County	Butte, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Plumas, Shasta, Siskiyou, Sierra, Tehama, Trinity	8,687	2.5%	630	6.3%	412	6.6%	65.4%
Sacramento, except Sutter and Yuba	El Dorado, Placer, Sacramento, Yolo	20,172	5.7%	1,644	16.4%	1007	16.2%	61.3%
5-County San Francisco Bay Area	Alameda, Marin, San Francisco, San Mateo, Santa Clara,	44,813	12.7%	1,750	17.5%	1075	17.3%	61.4%
Rest of San Francisco Area	Contra Costa, Napa, Santa Cruz, Solano, Sonoma	25,791	7.3%	425	4.3%	281	4.5%	66.1%
Central Valley & Sierra, except Amador	Alpine, Calaveras, Fresno, Inyo, Kern, Kings, Madera, Mariposa, Merced, Mono, San Joaquin, Stanislaus, Tulare, Tuolumne	28,200	8.0%	745	7.50%	452	7.3%	60.7%
Central Coast	Monterey, San Benito, San Luis Obispo, Santa Barbara	8,710	2.5%	725	7.30%	483	7.8%	66.6%
Los Angeles	Los Angeles, Orange, Ventura	100,474	28.5%	1,200	12.0%	767	12.3%	63.9%
Inland Empire	Riverside, San Bernardino	32,610	9.3%	775	7.8%	458	7.4%	59.1%
Border	Imperial, San Diego	28,552	8.1%	760	7.6%	484	7.8%	63.7%
Nevada County	Nevada	1,106	0.3%	131	1.3%	92	1.5%	70.2%
Sutter & Yuba Counties	Sutter, Yuba	1,091	0.3%	40	0.4%	25	0.4%	62.5%
Amador County	Amador	319	0.1%	25	0.3%	15	0.2%	60.0%
Outside California	All states other than California	51,434	14.6%	1,150	11.5%	673	10.8%	58.5%
TOTAL		351,959	100.0%	10,000	100.0%	6224	100.00%	62.2%

Note: The estimated number of RNs per region was taken from the California Board of Registered Nursing database.

Table 1.2 Survey outcomes and response rates for registered nurses with active California licenses

	1990*	1993	1997	2004	2006	2008	2010
Questionnaires mailed	5,400	3,685	4,000	8,796	9,000	10,000	10,000
In California				7,653	7,800	8,800	8,850
Outside California				1,143	1,200	1,200	1,150
Ineligible cases**	1,075	388	274	864	552	998	209
Eligible cases	4,680	3,297	3,726	7,932	8,448	9,002	9791
Surveys returned				5,182	5,078	5,455	6302
Refusals and incomplete surveys***				14	12	15	78
Total respondents	3,112	2,476	2,784	5,168	5,066	5,440	6224
In California				4,575	4,546	4890	5551
Outside California				593	520	550	673
Response rate of all surveys mailed	57.6%	67.2%	69.6%	58.8%	56.3%	54.4%	62.2%
Response rate of eligible population	66.5%	75.1%	74.7%	65.2%	60.0%	60.4%	63.6%

* The information displayed for 1990 was taken from Survey of Licensed Registered Nurses, California 1990. Different definitions were used in the computations for 1990. For more information, refer to the methodology section of the 1990 report.

**Ineligible cases include surveys that were undeliverable or surveys returned with an indication that the nurse was deceased or disabled. In 2008, some nurses with inactive licenses were mistakenly sent the active survey; these nurses were deemed ineligible. In 1990, 1993 and 1997, retired nurses were deemed ineligible; all ineligible cases are omitted from the analytical data. In 2004, 2006, 2008, and 2010 retired nurses were considered eligible and included in the data analysis.

***Individuals who responded that they did not wish to participate or who did not provide enough information for the survey to be useable were counted as eligible cases but removed from the analytic data. Individuals who completed one or more online surveys and a paper survey had their online responses removed. Individuals who completed more than one paper survey had their second survey removed. Individuals who completed one or more online surveys had their most complete online survey response used. Individuals who indicated they did not have a current Active RN license or for whom employment status could not be imputed also had their responses removed.

Table 1.3 California’s active nursing workforce, the survey sample, survey respondents, and the response rate, by age group, 2010

Age Group	Actively Licensed RNs		Survey Sample		Survey Respondents		Response rate
	#	%	#	%	#	%	%
Under 35 years	67,294	19.1%	1,818	18.2%	865	13.9%	47.6%
35-44 years	82,510	23.4%	2,287	22.9%	1251	20.1%	54.7%
45-54 years	94,526	26.9%	2,719	27.2%	1626	26.1%	59.8%
55-64 years	81,184	23.1%	2,410	24.1%	1812	29.1%	75.2%
65 years and older	26,445	7.5%	766	7.7%	670	10.8%	87.5%
TOTAL	351,959	100.0%	10,000	100.0%	6224	100.0%	62.2%

The Inactive/Lapsed RN Sample

Selection of the Inactive and Lapsed Sample

The Board of Registered Nursing provided UCSF with a file of nurses with inactive California licenses. Inactive licenses are renewed without supporting continuing education documentation; these licenses can be activated by providing evidence of completing continuing education. We limited the eligible population of inactive RNs to those who had unexpired inactive licenses – in other words, those who had renewed their license between February 2008 and February 18, 2010 – to ensure that the population included only RNs who are intentionally maintaining an inactive license. There were 18,445 RNs with inactive licenses in the file, of whom 11,339 had California addresses. We limited our sample to nurses residing in California, with the expectation that the majority of nurses with inactive licenses and out-of-state addresses had moved outside California and would not be likely to return to work in California. From this population, we selected a random sample of 500 RNs to receive the survey for registered nurses with inactive/lapsed licenses.

The BRN also provided a file of nurses with licenses that had lapsed between January 1, 2008, and December 31, 2009. The number of nurses in this file numbered 27,917, of whom 501 lived outside the United States and 16,270 lived outside California. A remaining 11,146 had California addresses. One RN was missing birth date and was dropped from the sample. From the California-resident nurses, we selected nurses whose licenses expired in 2009, which resulted in 6,367 eligible nurses with lapsed licenses. From the eligible population, we selected a random sample of 500 RNs to receive the survey for registered nurses with inactive/lapsed licenses.

Response Rates for the Inactive/Lapsed RN Survey

One thousand surveys were mailed to nurses with inactive or lapsed licenses on April 23, 2010. Reminder postcards and a re-mailing of the survey were conducted at the same time as for the survey of Active RNs. Data collection closed on August 23, 2010, at which time 351 completed questionnaires were received from the inactive sample and 223 were received from the lapsed license sample. The post office returned 6 inactive and 3 lapsed surveys as undeliverable and 16 RNs who were mailed surveys were deceased or disabled. Nearly 7 percent of the inactive and 11 percent of the lapsed RNs reported that their status had changed between sampling and their response. The response rates from the eligible populations were 66.4 percent for inactive RNs, and 42.6 percent for RNs with lapsed licenses, as seen in Table 1.4.

The sample for the inactive/lapsed survey was based on a database of nurse license data provided by the BRN on February 18, 2010. Some nurses listed in these data as having an inactive or lapsed license status may have reactivated or renewed their license between the date the licensure file was delivered and the date the survey was mailed. Table 1.5 presents the self-reported license status of respondents to the survey of inactive and lapsed RNs. Nearly 94 percent of nurses who were sampled as having an inactive license confirmed this status in the survey, 3.8 percent reported their license was lapsed at the time of the survey, and 2.6 percent reported they had an active license. Over 89 percent of nurses who were in the lapsed license sample reported their licenses were indeed lapsed at the time of the survey. Slightly under five percent reported they had active license, and 5.4 percent had an inactive license. In the 2010 analyses, nurses were considered inactive or lapsed based on how they self-reported with the exception of those who self-reported that their licenses were active (20 nurses). Thus, there are 12 nurses in the inactive respondent group who were sampled as lapsed and 13 nurses in the lapsed respondent group who were sampled as inactive. We included in the analyses fifty-three nurses (9.2%) who reported that they no longer resided in California; in 2008, fewer respondents lived outside California and were not included in the analysis. Because many of the responses of those who had moved outside California in the 2010 survey indicated that their relocation was related to characteristics of the California RN labor market, we determined that it was important to include their responses in 2010. The dataset used for analysis thus contained 332 nurses who were inactive and 213 RNs who were delinquent, representing a 66.4 percent and 42.6 percent response rate respectively when considering all surveys mailed.

Table 1.4 Survey outcomes and response rates for registered nurses with inactive or lapsed California licenses, based on sampling scheme, 2004-2010

	2004 – Inactive and lapsed	2006 – Inactive and lapsed	2008 – Inactive	2008 – Lapsed	2010 – Inactive	2010 – Lapsed
Questionnaires mailed	4,635	1,000	500	500	500	500
In California	2,109	1,000	500	500	500	500
Outside California	2,526	0	0	0	0	0
Ineligible cases*	1,869	217	28	161	6	16
Eligible cases	2,766	783	472	339	494	484
Surveys returned	1,044	417	303	169	352	224
Refusals, incomplete surveys, and duplicate responses**	26	1	0	0	10	1
Total respondents	1,018	416	303	169	342	223
In California	627	416	303	165	333	179
Outside California	391	0	0	4	9	44
Response rate of all surveys mailed	22.0%	41.6%	60.6%	33.8%	68.4%	44.6%
Response rate of eligible population	36.8%	53.1%	64.2%	49.9%	69.2%	46.1%
Nurses removed from analysis due to self-reported license status as active***			11	13	9	11
Nurses recategorized as inactive/lapsed based on self-reported status					-13 to lapsed	-12 to inactive
					+12 from lapsed	+13 from inactive
Final analytic sample			292	152	332	213
Response rate of analytic sample (all mailed surveys)			58.4%	30.4%	66.4%	42.6%

*Ineligible cases include surveys that were undeliverable or surveys returned with an indication that the nurse was deceased or disabled.

**Individuals who responded that they did not wish to participate or who did not provide enough information for the survey to be useable were counted as eligible cases but removed from the analytic data. Note: Nurses with a license designation of “retired” were not included in 2006, but were included in 2004. However, in both years, some nurses returned surveys indicating that they had been out of the field for so long that they did not feel as if their responses would be pertinent. These returned surveys are designated “refused”.

*** See Table 1.5.

Table 1.5 Self-reported license status by nurses responding to the Inactive/Lapsed survey, 2006-2010

Self-Reported Status	2006 – All respondents	2006 – Inactive	2006 – Lapsed	2008 – Inactive	2008 – Lapsed	2010 – Inactive	2010 – Lapsed
Active	7.5%	6.0%	11.7%	3.6%	7.7%	2.6%	4.9%
Inactive	68.8%	89.6%	12.6%	86.5%	8.3%	93.6%	5.4%
Lapsed	23.8%	4.4%	75.7%	9.9%	84.0%	3.8%	89.7%
Number of cases	416	303	113	303	169	342	223

Representativeness of Inactive/Lapsed RN Respondents

Survey responses were examined to determine whether response bias existed. Table 1.6 presents the regional and age distributions of inactive RNs in the eligible population, and the distributions of responses. The regional response distribution within California is not statistically significantly different from the population distribution (Chi-squared = 4.07, Pr<.77). The age group distribution is statistically significantly different for the survey respondents compared with the general population (Chi-squared = 24.38, Pr<0.01). Specifically, nurses in the oldest age category are over-represented, while those under the age of 54 are under-represented. We analyzed the data for nurses with inactive licenses using weights to adjust for different response rates among age categories; weights also were used in the analysis of the 2006 and 2008 survey data for inactive RNs. We did not develop weights for both age and region because the sample size was not sufficient to do so.

Table 1.7 presents the regional and age distributions of RNs with lapsed licenses (who did not renew their licenses before expiration). The regional distribution within California of respondents is not statistically significantly different from that of the population (Chi-squared = 10.47, Pr<0.16). The age distribution of

respondents (Chi-squared = 54.9, $P < 0.01$), however, is statistically significantly different from the distribution of the population. RNs with expired licenses age 65 or older made up more than two-thirds of those responding to the survey. RNs over the age of 55 made up more than 82 percent of respondents. RNs in all other age groups are underrepresented. We analyzed the data for nurses with lapsed licenses using weights to adjust for different response rates among age categories. We did not develop weights for both age and region because the sample size was not sufficient to do so.

Precision of Estimates

The size of the sample surveyed and high response rate contribute to this survey providing very precise estimates of the true values in the population. For nurses with active licenses, any discrepancies between the respondents to the survey and the population have been corrected by weighting the data, as discussed above. Analyses of the survey responses of nurses with inactive and lapsed licenses also were conducted with weights, to adjust for the age difference between respondents and the population. Weights were also used in the analysis of the 2008 survey data for lapsed RNs but were not used in 2006 because the sample size that year was not sufficient. The sample size and weighting ensure that the data presented in this report are representative of the statewide population of registered nurses.

Unweighted tables based on the full dataset of 6,224 nurses with active licenses may vary from the true population values by ± 1.3 percentage points from the values presented, with 95 percent confidence. Unweighted tables based on the dataset of 332 nurses with inactive licenses may vary from the true population values by ± 5.5 percentage points from the values presented, with 95 percent confidence. Tables based on the dataset of 213 nurses with lapsed licenses may vary from the true population values by ± 6.9 percentage points from the values presented, with 95 percent confidence. The surveys of registered nurses from 1990 through 2004 were not weighted. The use of weights improves the accuracy and representativeness of the reported tabulations and means presented in this report. However, because all previous surveys had relatively large sample sizes, they also provided estimates of the true population that are expected to be within a few percentage points of the true values.

Table 1.6 California’s inactive workforce, the survey sample, survey respondents, and the response rate, by region as self-reported by respondent, 2010

Region	Counties	Inactive RNs		Survey Sample		Survey Respondents		Response rate for analysis sample
		#	%	#	%	#	%	%
North of Sacramento	Butte, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Nevada, Plumas, Shasta, Siskiyou, Sierra, Tehama, Trinity	513	4.5%	22	4.4%	16	4.8%	72.7%
Sacramento	El Dorado, Placer, Sacramento, Sutter, Yolo, Yuba	786	6.9%	34	6.8%	22	6.6%	64.7%
San Francisco Bay Area	Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma	2,979	26.3%	132	26.4%	89	26.8%	67.4%
Central Valley & Sierra	Alpine, Amador, Calaveras, Fresno, Inyo, Kern, Kings, Madera, Mariposa, Merced, Mono, San Joaquin, Stanislaus, Tulare, Tuolumne	906	8.0%	40	8.0%	27	8.1%	67.5%
Central Coast	Monterey, San Benito, San Luis Obispo, Santa Barbara	443	3.9%	19	3.8%	16	4.8%	84.2%
Los Angeles	Los Angeles, Orange, Ventura	3,700	32.6%	163	32.6%	92	27.7%	56.4%
Inland Empire	Riverside, San Bernardino	901	7.9%	40	8.0%	23	6.9%	57.5%
Border	Imperial, San Diego	1,111	9.8%	50	10.0%	36	10.8%	72.0%
Outside of California		*	*	*	*	11	3.3%	*
TOTAL		11,339	100.0%	500	100.0%	332	100.0%	66.4%
Under 35 years		108	0.9%	5	1.0%	1	0.3%	20.0%
35-44 years		523	4.6%	21	4.2%	3	0.9%	14.3%
45-54 years		1,599	14.1%	70	14.0%	33	9.9%	47.1%
55-64 years		3,383	29.8%	150	30.0%	90	27.1%	60.0%
65 years and older		5,726	50.5%	254	50.8%	205	67.8%	80.7%
		11,339	100.0%	500	100.0%	332	100.0%	66.4%

Note: The estimated number of RNs per region was taken from the California Board of Registered Nursing database. In 2010 we had 11 self-reported Inactive RNs (3.3% of the Inactive sample (number of cases=332) who resided outside of California respond to the survey. The reports for 2006 and 2008 did not report information about RNs residing outside California. They have been included in this table to account for all inactive respondents who responded to the survey and indicated they were inactive.

*Data not available

Table 1.7 California’s lapsed workforce, the survey sample, survey respondents, and the response rate, by region, 2010

Region	Counties	Lapsed License RNs		Survey Sample		Survey Respondents		Response rate for analysis sample
		#	%	#	%	#	%	%
North of Sacramento	Butte, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Nevada, Plumas, Shasta, Siskiyou, Sierra, Tehama, Trinity	243	3.8%	18	3.6%	3	1.4%	16.7%
Sacramento	El Dorado, Placer, Sacramento, Sutter, Yolo, Yuba	441	6.9%	35	7.0%	14	6.6%	40.0%
San Francisco Bay Area	Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma	1,434	22.5%	112	22.4%	40	18.8%	35.7%
Central Valley & Sierra	Alpine, Amador, Calaveras, Fresno, Inyo, Kern, Kings, Madera, Mariposa, Merced, Mono, San Joaquin, Stanislaus, Tulare, Tuolumne	575	9.0%	47	9.4%	16	7.5%	34.0%
Central Coast	Monterey, San Benito, San Luis Obispo, Santa Barbara	237	3.7%	19	3.8%	6	2.8%	31.6%
Los Angeles	Los Angeles, Orange, Ventura	2,065	32.4%	162	32.4%	60	28.2%	37.0%
Inland Empire	Riverside, San Bernardino	646	10.1%	50	10.0%	17	8.0%	34.0%
Border	Imperial, San Diego	726	11.4%	57	11.4%	16	7.5%	28.1%
Outside California		*	*	*	*	41	19.3%	*
TOTAL		6,367	100.0%	500	100.0%	213	100.0%	42.6%
Under 35 years		739	11.6%	57	11.4%	14	6.6%	24.6%
35-44 years		656	10.3%	51	10.2%	10	4.7%	19.6%
45-54 years		857	13.5%	69	13.8%	14	6.6%	20.3%
55-64 years		1,397	21.9%	109	21.8%	31	14.6%	28.4%
65 years and older		2,718	42.7%	214	42.8%	144	67.6%	67.3%
		6,367	100.0%	500	100.0%	213	100.0%	42.6%

Note: The estimated number of RNs whose licensed expired in 2009, per region, was taken from the California Board of Registered Nursing database. In 2010 we had 41 self-reported lapsed RNs (19.3% of the lapsed sample (number of cases=213) who resided outside of California respond to the survey. 2006 and 2008 survey analysis did not report information about RNs residing outside California. RNs from outside of California have been included in this table to account for all delinquent respondents who were surveyed as lapsed.

*Data not available

Chapter 2. California’s Nursing Workforce

California’s registered nurse (RN) workforce is comprised of nurses who have active California RN licenses. Some nurses with active California licenses do not reside in California, as noted in Chapter 1, but these nurses are still considered part of the state’s RN workforce. Nurses residing outside California can commute from a neighboring state, work temporarily within California, or serve California patients through telenursing. California’s RN workforce includes nurses who are not currently working, because they have the potential to work in California as long as they maintain an active license. The population of nurses with active California RN licenses, which numbered 351,972 at the time this survey was conducted, is described in this chapter.

Employment Status of RNs with Active Licenses

A high share of nurses are currently employed in a nursing position, defined as a position that requires an RN license. Over 87 percent of nurses with active licenses and California addresses were working at the time of the survey (Table 2.1). This is the highest rate of employment observed since 2004. The share of nurses employed in nursing varies somewhat from year to year, but has consistently been over 82 percent of the actively licensed workforce.

Table 2.1 Employment status of RNs with active California licenses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010
Employed in nursing	82.6%	89.3%	84.2%	87.5%	86.7%	86.9%	87.4%
Not employed in nursing	17.4%	10.7%	15.8%	12.5%	13.3%	13.1%	12.6%
Number of respondents	2,724	2,476	2,955	4,280	4,346	4,890	5,551

Note: Data (2006-2010) are weighted to represent all RNs with active licenses.

There is some variation in employment rates according to the region, as shown in Table 2.2. Nurses living in the Border counties and Central Sierra are more likely to work than average, and nurses who reside outside California or in the Central Coast region are less likely to be employed in nursing.

Table 2.2 Employment status of RNs with active California licenses, by region, 2008 & 2010

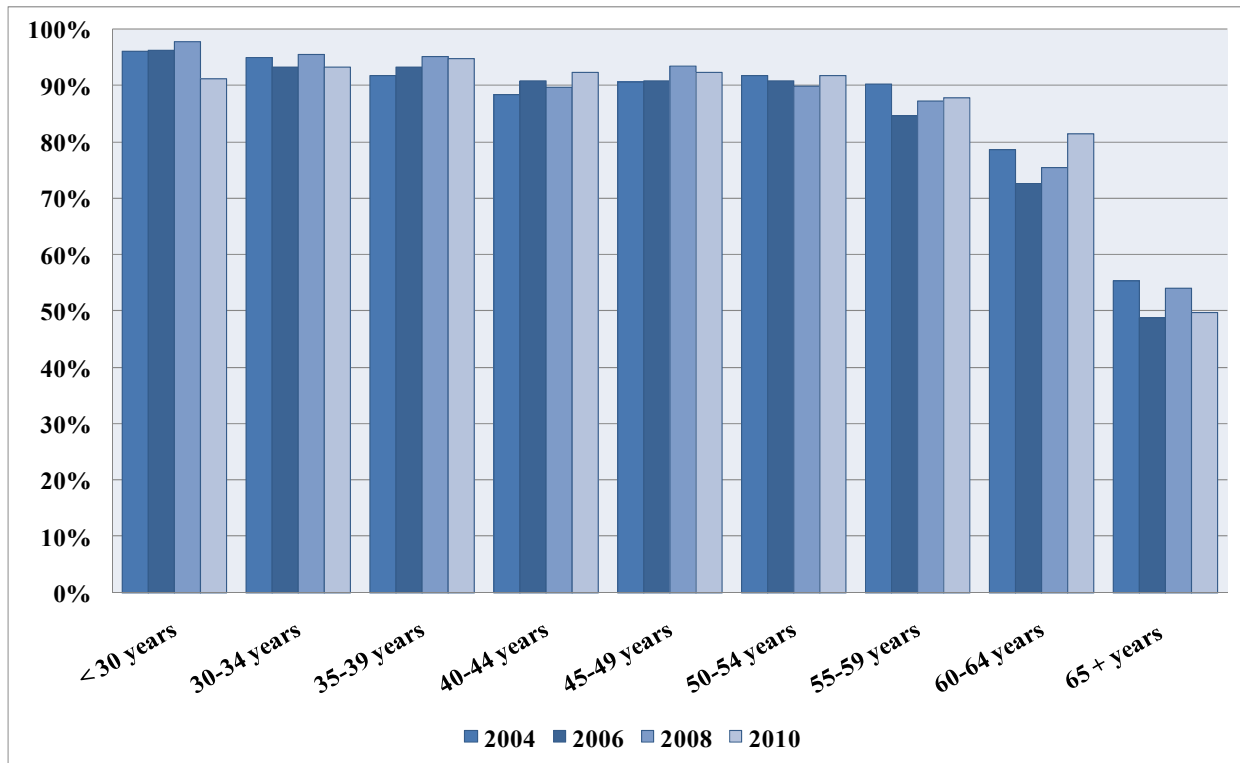
	2008		2010	
	Not Employed in Nursing	Employed in nursing	Not Employed in Nursing	Employed in nursing
Northern counties	14.9%	85.1%	12.1%	87.9%
Sacramento	12.2%	87.8%	12.8%	87.2%
San Francisco Bay Area	13.2%	86.8%	14.1%	85.9%
Central Valley & Sierra	12.2%	87.8%	10.0%	90.0%
Central Coast	17.4%	82.6%	16.3%	83.7%
Los Angeles	12.3%	87.7%	12.6%	87.4%
Inland Empire	10.7%	89.3%	12.0%	88.0%
Border Counties	17.4%	82.6%	10.8%	89.2%
Outside California	15.5%	84.5%	16.6%	83.4%

Note: Rows may not add to 100% due to rounding. Data are weighted to represent all RNs with active licenses.

The employment status of nurses with active licenses varies by age group, and some changes are apparent in the 2010 data, as seen in Figure 2.1 and Table 2.3. Over 90 percent of nurses under age 55 are working in nursing positions. The share of nurses 50 to 54 years old working in nursing positions had been declining since 2004, but increased between 2008 and 2010. Working nurses aged 60 to 64 also increased, while those 65 years and older and younger RNs, less than 40 years old, saw a decline in the share employed in nursing. In 2010, for the

first time since 2004, nurses under 30 years of age were not the group with the highest percentage working. Nurses aged 35-39 reported the highest employment percentage (94.7%), although employment in 2010 is lower than in 2008.

Figure 2.1 Employment status of the statewide population of RNs with active California licenses, by age group, 2004-2010



Note: Number of cases=5,551. Data (2006-2010) are weighted to represent all RNs with active licenses.

Table 2.3 Percent of RNs residing in California working in nursing, by age group, 2004-2010

	Employed in nursing, 2004	Employed in nursing, 2006	Employed in nursing, 2008	Employed in nursing, 2010
Under 30 years	96.1%	96.2%	97.7%	91.3%
30-34 years	95.0%	93.3%	95.5%	93.2%
35-39 years	91.8%	93.2%	95.2%	94.7%
40-44 years	88.4%	90.8%	89.7%	92.4%
45-49 years	90.6%	90.9%	93.4%	92.3%
50-54 years	91.8%	90.9%	89.8%	91.7%
55-59 years	90.3%	84.6%	87.2%	87.8%
60-64 years	78.7%	72.7%	75.5%	81.4%
65 years and older	55.4%	48.7%	54.0%	49.8%

Note: Data (2006-2010) are weighted to represent all RNs with active licenses.

Age Distribution of California RNs

As seen in Table 2.4, nearly 47 percent of nurses with active California licenses are 50 years or older. In 2008, 49 percent of RNs with active licenses were 50 years or older; thus, a larger share of RNs were younger in

2010 as compared with 2008. The population of nurses with California addresses has a similar age distribution to that of all nurses with California licenses.

Table 2.4 Age distribution of all RNs with active California licenses, 2006-2010

	All Active RNs			California Residents		
	2006	2008	2010	2006	2008	2010
Under 30 years	6.7%	6.1%	9.1%	7.5%	6.1%	9.3%
30-34 years	10.9%	10.0%	10.0%	10.3%	9.3%	9.4%
35-39 years	10.4%	11.9%	11.5%	10.6%	11.5%	11.2%
40-44 years	12.3%	11.1%	11.9%	12.3%	11.2%	12.1%
45-49 years	14.3%	12.0%	11.2%	13.9%	12.3%	11.2%
50-54 years	18.4%	17.1%	15.7%	19.1%	17.0%	15.6%
55-59 years	12.9%	13.8%	13.1%	12.6%	14.1%	13.2%
60-64 years	7.4%	9.8%	10.0%	7.7%	9.8%	10.2%
65 years and older	6.6%	8.3%	7.5%	6.1%	8.8%	7.9%
Number of cases	*	5,440	6,224	*	4,890	5,551

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

*Data not available

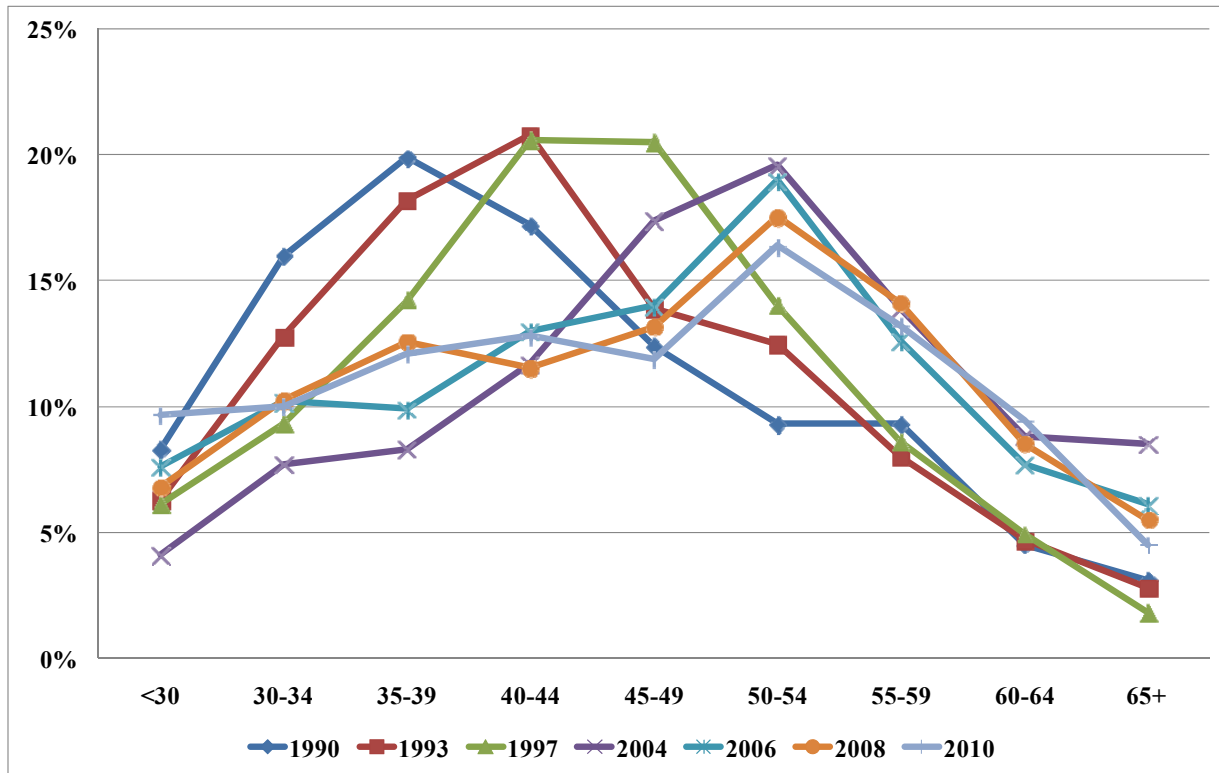
Figure 2.2 and Table 2.5 depict the age distribution of nurses who were employed in nursing and residing in California for each survey year. In 1990, the largest share of nurses was 35 to 39 years, and the largest age group steadily increased until 2004, when it reached 50 to 54 years. This age group has remained the largest since 2004. Between 2006 and 2008 there was growth in the share of nurses 35 to 39 years old, and between 2008 and 2010 there was growth in the under 30 cohort and the 40-44 years old cohort. Growth in the share of nurses under 40 years old is probably the result of expansions in the number of new RN graduates in California since 2000.

Table 2.5 Age distribution of working registered nurses residing in California, by survey year

Age Groups	1990	1993	1997	2004	2006	2008	2010
Under 30	8.3%	6.3%	6.1%	4.1%	7.6%	6.8%	9.7%
30-34	16.0%	12.8%	9.3%	7.7%	10.2%	10.3%	10.0%
35-39	19.9%	18.2%	14.2%	8.3%	9.9%	12.6%	12.1%
40-44	17.2%	20.8%	20.6%	11.7%	13.0%	11.5%	12.8%
45-49	12.4%	13.9%	20.5%	17.4%	14.0%	13.2%	11.9%
50-54	9.3%	12.5%	14.0%	19.6%	19.0%	17.5%	16.4%
55-59	9.3%	8.0%	8.6%	13.9%	12.6%	14.1%	13.2%
60-64	4.5%	4.7%	4.9%	8.8%	7.7%	8.5%	9.5%
65 or older	3.1%	2.8%	1.8%	8.5%	6.1%	5.5%	4.5%
Mean age of RNs working in nursing	42.9	43.6	44.6	47.6	47.1	47.1	46.3
Number of cases	2,226	2,192	2,451	3,020	3,732	4,890	4,726

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Figure 2.2 Age distribution of currently working nurses residing in California, by survey year



Note: 2010 number of cases=4,726. Data (2006-2010) are weighted to represent all RNs with active licenses.

The age distribution of actively licensed RNs varies by region in California, as seen in Table 2.6. The Northern Counties and Central Coast have a somewhat older population of nurses, on average, while nurses in the Central Valley, Inland Empire, and the Southern Border tend to be younger.

Table 2.6 Age distribution of RNs with active California licenses, by region, 2010

	Out of state	N. Counties	Sacramento	Bay Area	Central Valley/Sierra	Central Coast	Los Angeles	Inland Empire	Border Counties
Under 30 years	8.3%	6.2%	7.2%	8.5%	10.7%	6.9%	9.2%	10.0%	12.3%
30-34 years	13.7%	6.4%	9.2%	9.8%	8.6%	8.0%	10.1%	8.6%	9.3%
35-39 years	13.7%	8.3%	10.7%	12.3%	12.3%	8.4%	11.0%	10.7%	10.6%
40-44 years	10.7%	8.4%	13.5%	10.4%	11.8%	9.9%	13.1%	14.5%	11.3%
45-49 years	10.6%	13.8%	11.9%	11.0%	13.0%	12.5%	10.8%	11.1%	10.1%
50-54 years	16.1%	15.9%	15.8%	15.1%	15.0%	16.6%	15.4%	17.1%	16.2%
55-59 years	12.4%	17.2%	13.0%	13.0%	12.6%	16.3%	13.1%	12.2%	13.2%
60-64 years	9.2%	14.3%	11.2%	11.8%	9.3%	12.1%	8.9%	8.8%	9.9%
65 and over	5.2%	9.5%	7.6%	8.0%	6.7%	9.3%	8.4%	7.2%	7.2%
Number of Cases	673	504	1032	1356	467	483	767	458	484

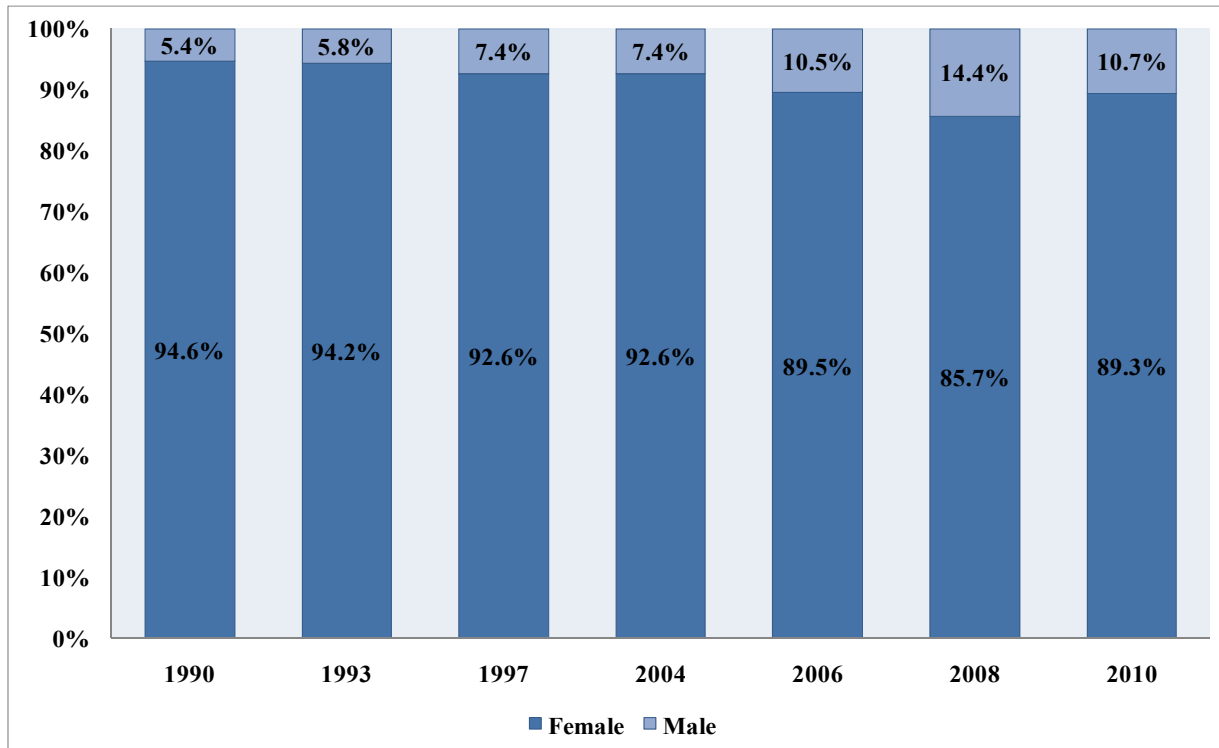
Note: Number of cases=6,224. Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Diversity of California's RN Workforce

Nursing continues to be predominantly female, although an increasing share of men has been entering the profession, as seen in Figure 2.3. In 2010, 10.7 percent of working RNs were male, an increase from 10.5 percent

in 2006 but a decrease from 2008. Table 2.7 presents the gender mix by age of all actively licensed RNs residing in California, both working and not working in nursing. Nurses under 45 years have the greatest share of men, who represent an average of 13.1 percent of nurses in this age group.

Figure 2.3 Gender of currently working registered nurses residing in California, by survey year



Note: 2010 number of cases=4,661. Data (2006-2010) are weighted to represent all RNs with active licenses.

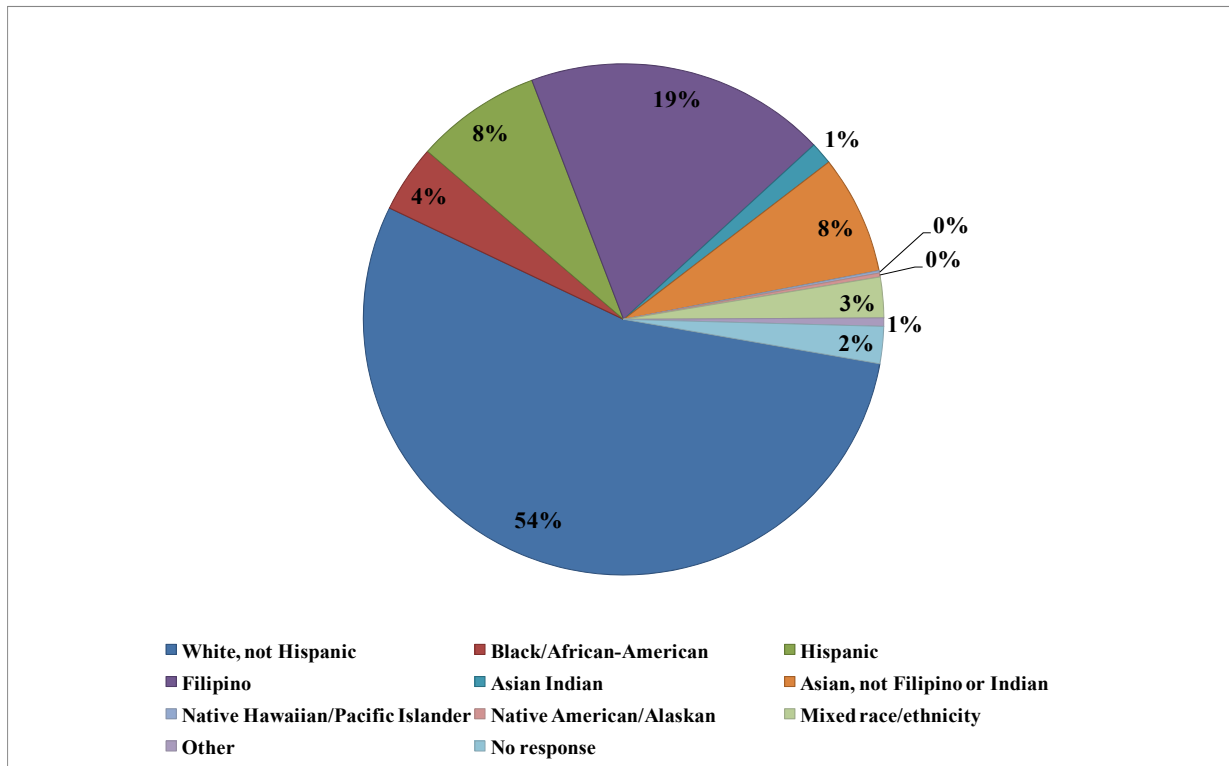
Table 2.7 Gender of active RNs who reside in California, by age group, 2010

	Female	Male	No response
All RNs	88.7%	10.0%	1.3%
Under 35 years	88.0%	11.3%	0.7%
35-44 years	84.1%	14.9%	1.0%
45-54 years	89.6%	9.2%	1.2%
55-64 years	90.4%	7.8%	1.8%
65 years and older	96.3%	1.3%	2.4%

Note: Data are weighted to represent all RNs with active licenses. Number of cases=5,551.

Figure 2.4 presents the racial and ethnic composition of RNs with active licenses who reside in California. Fifty-four percent of actively licensed RNs are non-Hispanic White, and Filipinos represent 18.8 percent of the RN workforce. Hispanic and Latino nurses account for 7.8 percent of the nursing workforce, and Asians who are not Filipino comprise 8.8 percent. Black/African-American nurses represent 4.2 percent of California’s active nurses.

Figure 2.4 Ethnic and racial composition of RNs with active California licenses residing in California, 2010



Note: Number of cases=5,551. Data are weighted to represent all RNs with active licenses.

The racial and ethnic backgrounds of nurses who are working are presented in Table 2.8. California’s employed RNs have become more diverse since 1990. In 1990, white RNs represented 77.2 percent of the workforce, and in 2010, only 53.8 percent of employed nurses were white. Filipinos make up the next largest ethnic group of nurses, accounting for 13.4 percent of working RNs in 1993 and 20.8 percent in 2010. There has been growth in the share of working RNs who are of Asian Indian or Other Asian descent as well, from 4.8 percent in 1993 to 9.3 percent in 2010. The share of nurses who are of Hispanic descent more than doubled between 1990 and 2010, reaching 8.5 percent. The shares of Black/African-American, Native American, and Pacific Islander nurses have remained stable from 1990 through 2010.

Table 2.8 Racial/ethnic backgrounds of currently working registered nurses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010
White, not Hispanic	77.2%	72.6%	64.5%	61.5%	62.0%	58.6%	53.8%
Hispanic	3.7%	4.5%	4.9%		5.7%	7.5%	8.5%
Hispanic or Latino of Mexican descent	*	*	*	5.3%	*	*	*
Other Hispanic	*	*	*	1.2%	*	*	*
Black/African American	4.7%	3.5%	4.8%	3.5%	4.6%	4.1%	4.2%
Asian, Southeast Asian or Pacific Islander	12.7%	*	*	*	*	*	*
Filipino	*	13.4%	15.9%	18.2%	17.7%	18.0%	20.8%
Asian Indian	*	0.4%	1.2%	1.0%	0.8%	1.4%	1.6%
Other Asian	*	4.4%	5.5%	5.9%	5.8%	7.1%	7.7%
Pacific Islander	*	0.3%	0.2%	0.2%	0.2%	0.1%	0.1%
Native American Indian/American Eskimo	0.6%	0.5%	0.5%	0.3%	0.8%	0.4%	0.3%
Mixed	*	*	*	1.6%	2.3%	2.0%	2.6%
Other	1.2%	0.5%	2.4%	1.3%	0.3%	0.8%	0.6%
Number of cases	2,251	2,179	2,458	2,948	3,712	4,756	4,610

* Racial/ethnic group was not included in the choices in that survey year.

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

The diversity of RNs with active licenses living in California is more prominent among younger nurses, as seen in Table 2.9. Non-Hispanic Whites account for fewer than 40 percent of RNs under age 45 years. Among this group, Filipino nurses represent nearly a quarter of this younger population, and non-Filipino Asians another 9 percent. Nearly twelve percent of nurses in this age group are Hispanic or Latino.

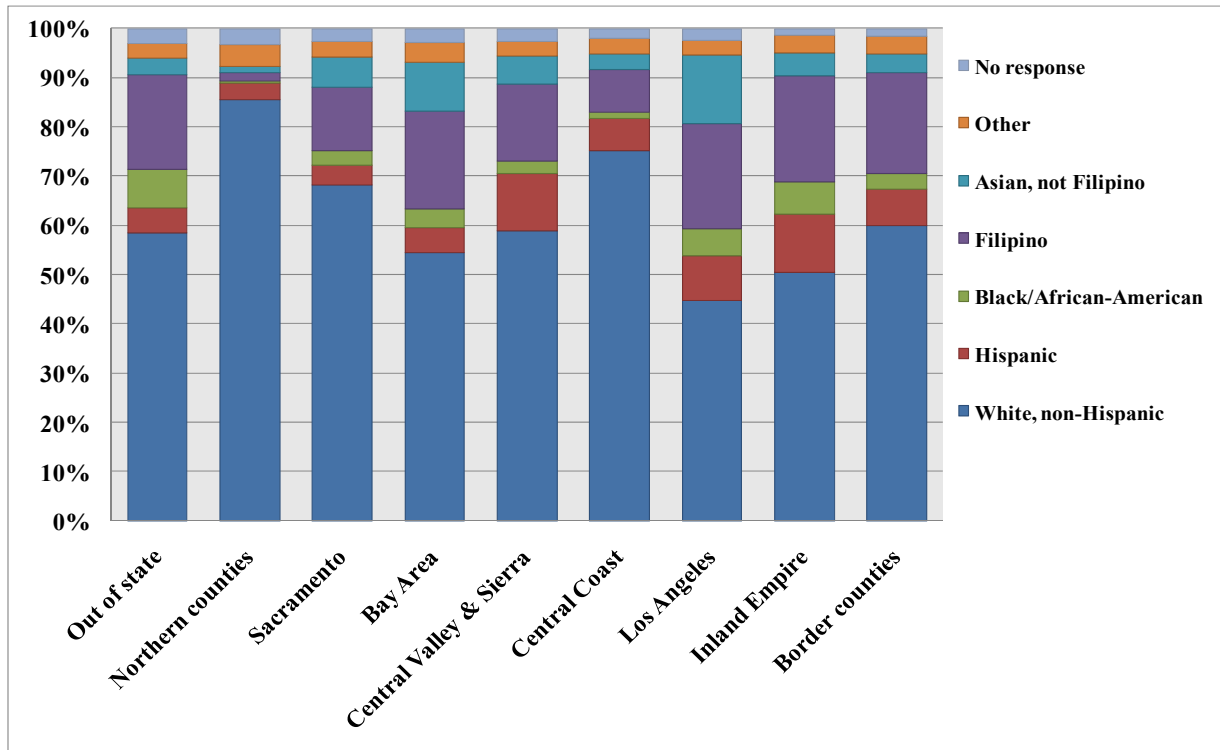
Table 2.9 Ethnic and racial composition of RNs with active California licenses residing in California, by age group, 2010

	Under 35 years	35-44 years	45-54 years	55-64 years	65 years and older
White, not Hispanic	44.7%	36.9%	60.1%	66.8%	72.6%
Black/African-American	3.8%	5.0%	3.4%	4.3%	5.8%
Hispanic/Latino	11.8%	11.7%	6.7%	3.7%	3.6%
Filipino	23.0%	28.5%	14.5%	13.7%	10.2%
Asian Indian	1.5%	2.7%	0.9%	1.0%	0.6%
Asian, not Filipino or Indian	8.9%	9.3%	7.9%	5.6%	2.9%
Native Hawaiian/Pacific Islander	0.4%	0.1%	0.2%	0.0%	0.2%
Native American/Alaskan	0.3%	0.0%	0.3%	0.3%	0.1%
Mixed race/ethnicity	3.4%	3.1%	3.1%	1.4%	0.8%
Other	0.3%	0.8%	0.9%	0.2%	0.1%
No response	1.9%	1.9%	2.1%	3.0%	3.3%

Note: Number of cases=5,551. Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

There are regional differences in the racial and ethnic composition of actively licensed RNs, as seen in Figure 2.5 and Table 2.10. Nurses in the Northern Counties and Central Coast are less diverse than RNs living in the Los Angeles region and Inland Empire. Asian and Filipino nurses comprise a greater share of the RN workforce in the Los Angeles, Inland Empire, and Border regions, while Hispanic/Latino nurses are better represented in the Inland Empire and Central Valley.

Figure 2.5 Ethnic and racial composition of RNs with active California licenses, by region, 2010



Note: Number of cases=6,224. Data are weighted to represent all RNs with active licenses. Data for Figure 2.5 can be found in Table 2.10.

Table 2.10 Ethnic and racial composition of RNs with active California licenses, by region, 2010

	White, non-Hispanic	Black/African-American	Hispanic	Filipino	Asian, not Filipino	Other	No response
Out of state	58.6%	7.7%	5.1%	19.3%	3.4%	2.9%	3.1%
Northern counties	85.5%	0.2%	3.5%	1.9%	1.3%	4.4%	3.3%
Sacramento	68.2%	2.8%	4.0%	13.1%	6.0%	3.3%	2.6%
San Francisco Bay Area	54.6%	3.9%	5.0%	19.8%	9.8%	4.1%	2.8%
Central Valley/ Sierra	58.9%	2.6%	11.6%	15.6%	5.8%	3.0%	2.6%
Central Coast	75.2%	1.3%	6.5%	8.6%	3.2%	3.0%	2.1%
Los Angeles	44.9%	5.6%	8.9%	21.4%	13.8%	3.1%	2.4%
Inland Empire	50.6%	6.6%	11.8%	21.6%	4.5%	3.7%	1.3%
Border counties	59.9%	3.0%	7.5%	20.5%	4.0%	3.6%	1.5%

Note: Number of cases=6,224. Rows might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Ethnic diversity is associated with language diversity among California’s registered nurses. As seen in Table 2.11, Tagalog and other Filipino languages are spoken by over 17 percent of all RNs living in California, and 19 percent of working RNs. Spanish is spoken by 11 percent of working RNs. Mandarin is spoken by 1.9 percent of working RNs, and Cantonese by 1.1 percent. Smaller shares of RNs speak Korean, Vietnamese, or South Asian languages. 6.1 percent of working RNs reported that they speak some other language fluently; the most-often cited languages were Japanese and Farsi.

Table 2.11 Languages spoken by RNs with active licenses who live in California, by employment group, 2006-2010

	All RNs			Working RNs		
	2006	2008	2010	2006	2008	2010
Tagalog	13.6%	*	*	15.8%	*	*
Tagalog or other Filipino language	*	16.6%	17.3%	*	18.1%	18.9%
Spanish	10.3%	11.4%	10.7%	11.1%	12.1%	10.8%
Mandarin	1.2%	2.2%	1.8%	1.4%	2.3%	1.9%
Korean	1.1%	1.1%	1.6%	1.1%	1.3%	1.5%
Hindi	0.8%	*	*	0.7%	*	*
Hindi or other S. Asian language	*	1.3%	1.4%	*	1.5%	1.6%
Cantonese	0.8%	1.5%	1.0%	0.8%	1.6%	1.1%
Vietnamese	0.5%	0.6%	0.8%	0.6%	0.7%	0.8%
French	*	*	1.4%	*	*	1.3%
German	*	*	0.7%	*	*	0.7%
Other	8.0%	8.0%	5.8%	8.1%	8.0%	6.1%

* Language was not listed in the survey in that year.

Note: The 2010 number of cases for all CA residing RNs = 5,551. The 2010 number of cases for working CA residing RNs = 4,726. Respondents could report fluency in multiple languages. Data are weighted to represent all RNs with active licenses.

Families of California's RNs

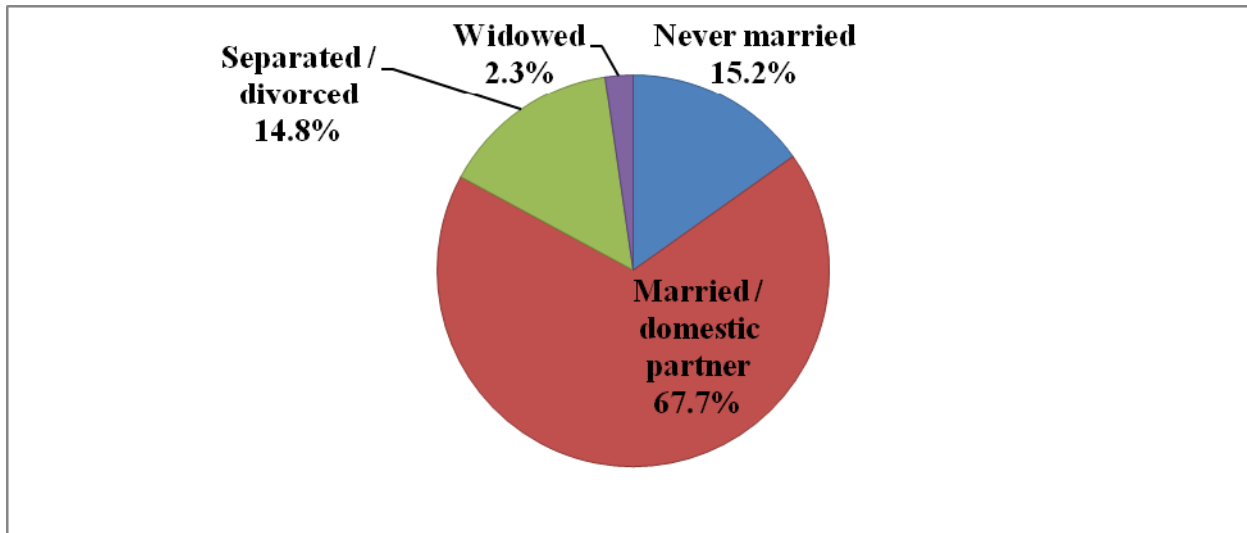
Most of California's actively licensed RNs (67.7%) are married or in a domestic partner relationship, as seen in Figure 2.6. Fifteen percent have never married and 14.8 percent are separated or divorced. The remaining 2.3 percent are widowed. The share of working RNs that is married has been stable since 1990, as presented in Table 2.12.

Table 2.12 Current marital status of currently working registered nurses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010
Never married	16.2%	12.2%	13.5%	12.3%	12.6%	13.9%	15.3%
Married	64.9%	66.4%	66.5%	68.2%	66.9%	67.6%	68.0%
Separated or divorced	16.3%	18.4%	17.6%	17.0%	16.7%	15.5%	14.9%
Widowed	2.7%	3.0%	2.4%	2.6%	3.8%	2.9%	1.8%
Number of cases	2,229	2,197	2,463	2,946	3,719	4,046	4,630

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Figure 2.6 Marital status of RNs with active California licenses who live in California, 2010



Note: Number of cases=5,551. Data are weighted to represent all RNs with active licenses.

Many of California’s nurses have children living at home, as seen in Table 2.13. In 2010, more than half of working nurses had at least one child living at home. The proportion of working RNs with children at home has declined since 1990, from 60 percent to 52.5 percent. There also has been a change in the ages of children living at home, as seen in Table 2.14. Between 2004 and 2010, the share of working nurses with children 2 years and younger increased from 13 percent to nearly 16.9 percent, and the share with children 3 to 5 years old grew from 14 percent to over 16 percent.

Table 2.13 Number of children living in the homes of currently working registered nurses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010
None	40.0%	38.1%	38.2%	45.7%	53.1%	49.2%	47.5%
One	25.2%	24.7%	22.9%	20.1%	18.4%	22.0%	22.3%
Two	23.3%	25.1%	26.3%	23.4%	20.0%	19.7%	21.4%
Three	9.0%	9.5%	9.7%	8.1%	6.4%	6.5%	6.6%
Four or more	2.5%	2.6%	2.9%	2.7%	2.1%	2.6%	2.2%
Number of cases	2,014	2,050	2,297	2,933	3,406	4,153	4,531

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Table 2.14 Percent of nurses with children in specified age groups living at home, for currently working registered nurses residing in California who have children living at home, 2004-2010

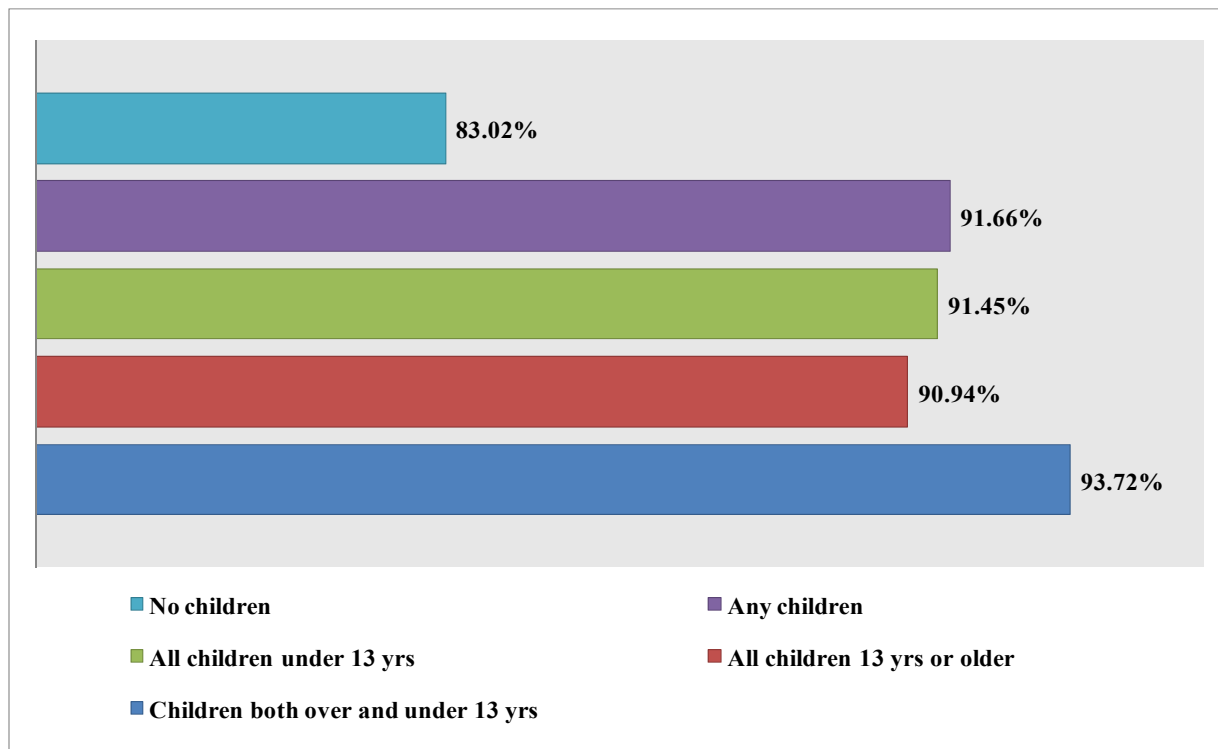
Ages of children	2004	2006	2008	2010
Birth to 2 years	13.0%	16.9%	18.9%	16.9%
3-5 years	14.2%	16.8%	16.3%	16.3%
6-12 years	34.2%	32.8%	33.5%	36.8%
13-18 years	39.2%	33.1%	37.4%	32.2%
Over 18	33.9%	38.3%	34.7%	31.0%

Note: 2010 number of cases=2,331. Some nurses have children in more than one age group, so columns will not total 100%. Data (2006-2010) are weighted to represent all RNs with active licenses.

California RNs with children at home were more likely to be employed in nursing than RNs with no children at home, as seen in Figure 2.7. Over 90 percent of RNs with children at home are employed in nursing,

compared with only 83 percent of those without children at home. This is likely associated with age; nurses without children at home tend to be older. Employment also is examined by whether the RN has children older or younger than 13 years, when children normally are at an age when paid childcare is not required. Nurses who had children both under thirteen and over thirteen were more likely to work than other nurses (93.7%).

Figure 2.7 Employment rates of RNs who live in California and have children at home, 2010



Note: Number of cases=5,551. Data are weighted to represent all RNs with active licenses.

For the first time in 2010, RNs were asked if any of their relatives were RNs. Over 54 percent of RNs indicated they had at least one relative who was an RN (Table 2.15). The most common relative to be an RN was a cousin (22.0%), followed closely by an aunt or uncle (18.2%). RNs who graduated from their nursing programs more recently (since 2000) reported a lower fraction of their relatives as RNs than did RNs who graduated before 2000 (50.2% vs. 56%). A larger fraction of pre-2000 graduates reported cousins (23.3%), siblings (18.6%), and children (4.8%) who are RNs than did post-2000 graduates. Recent graduates were more likely to report an older family member as a nurse, such as a parent (12.9%), aunt or uncle (21.9%), or grandparent (5.2%).

Table 2.15 RN status of the relatives of RNs residing in California, 2010

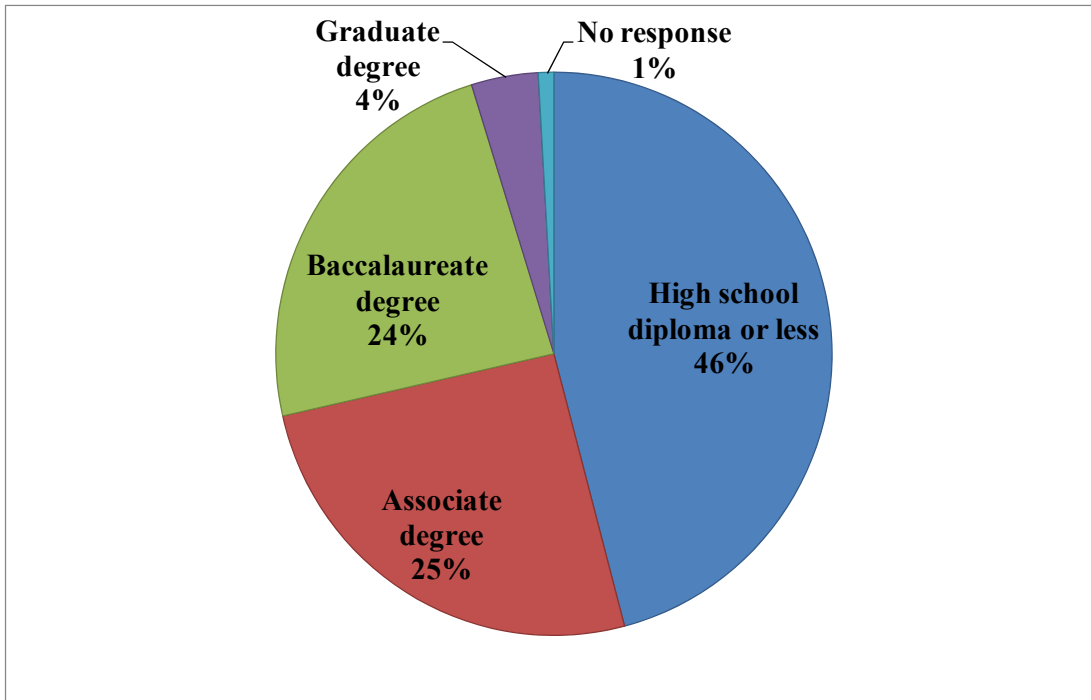
	All RNs	Graduated Before 2000	Graduated after 2000
No Relatives who are RNs	45.7%	44.0%	49.8%
A Parent is an RN	8.7%	7.0%	12.9%
A Aunt/Uncle is an RN	18.2%	16.7%	21.9%
A Grandparent is an RN	3.5%	2.8%	5.2%
A Cousin is an RN	22.0%	23.3%	19.2%
A Sibling is an RN	16.6%	18.6%	11.8%
A Child is an RN	3.6%	4.8%	0.9%
Number of cases	5551	4094	1369

Note: Number of cases=5,551, however 88 respondents did not indicate their year of graduation. Therefore, the Number of cases for the two columns of graduate data is 5463. Data are weighted to represent all RNs with active licenses.

Education and Licensure of California's Nursing Workforce

Over half of California's nurses with active licenses had a college degree before completing a pre-licensure nursing education program, as seen in Figure 2.8. An associate degree was held by 25.5 percent of nurses, 23.8 percent had a baccalaureate degree, and 3.9 percent had a graduate degree before attending nursing school.

Figure 2.8 Highest education obtained prior to basic nursing education for RNs with active California licenses who reside in California, 2010



Note: Number of cases=5,551. Data are weighted to represent all RNs with active licenses.

As seen in Table 2.16, the share of working RNs who had completed a college degree prior to enrolling in their basic nursing education increased from 1990 to 2008, with a particularly notable increase between 2004 and 2006. The proportion of working RNs who had a baccalaureate degree prior to basic nursing education increased from 11 percent in 1990 to 24.7 percent in 2010. This trend suggests that there are increasing numbers of nursing students who may be entering nursing as a second career. However, the share of RNs who had a postsecondary degree prior to entering their pre-licensure RN education program declined between 2008 and 2010, from 57.9 percent to 54.0 percent, which may reflect growing interest and opportunities for new high-school graduates to enter RN programs.

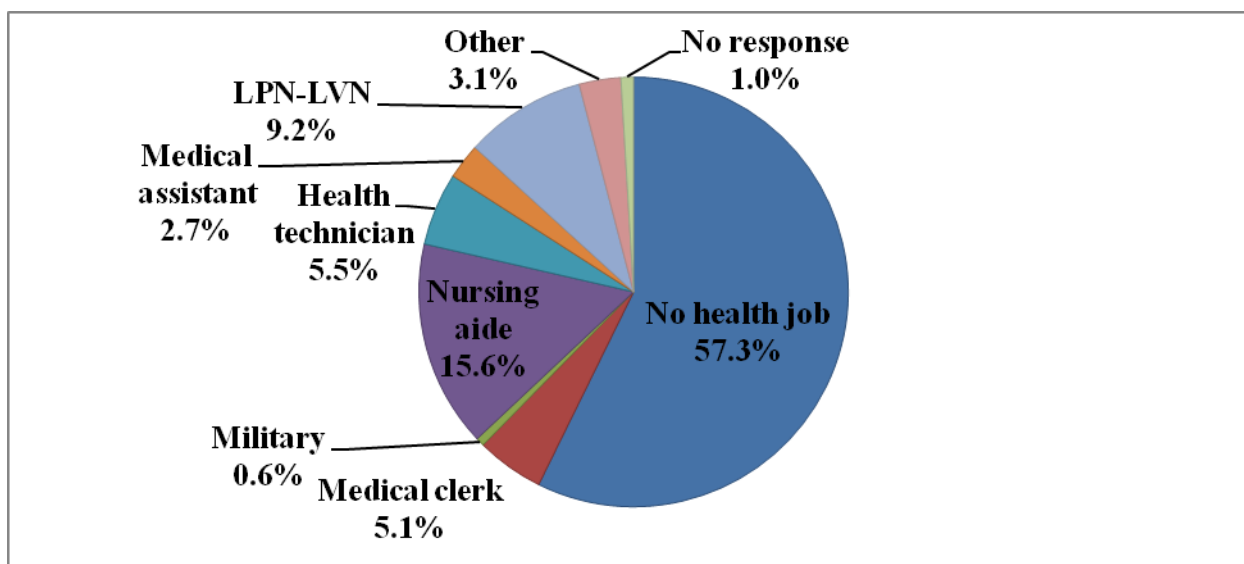
Table 2.16 Highest levels of education completed prior to basic nursing education by currently working registered nurses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010
Less than a High School Diploma	0.6%	0.5%	0.8%	0.3%	0.4%	0.3%	0.7%
High School Diploma	69.0%	62.9%	57.4%	56.4%	43.2%	40.4%	45.3%
Associate Degree	18.6%	22.7%	22.4%	24.5%	27.0%	29.1%	25.6%
Baccalaureate Degree	11.0%	13.2%	17.6%	16.6%	25.0%	26.5%	24.7%
Master's Degree	0.7%	0.6%	1.6%	2.1%	3.9%	3.0%	2.9%
Doctoral Degree	0.1%	0.0%	0.3%	0.2%	0.5%	0.8%	0.9%
Number of cases	2,237	2,197	2,455	2,939	3,692	4,114	4,691

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Over 40 percent of RNs who live in California worked in a health occupation before attending a nursing program, as seen in Figure 2.9. Nearly 16 percent of RNs worked as a nursing aide prior to completing basic RN education, and 9.2 percent were licensed practical/vocational nurses. Five percent worked as clerks, 2.7 percent were medical assistants, and 5.5 percent were health care technicians such as radiology technicians or laboratory technicians. Fewer than one percent reported prior military health experience. “Other” previous work included working as a nurse or physician in another country prior to completing an education program to be licensed as an RN in the United States.

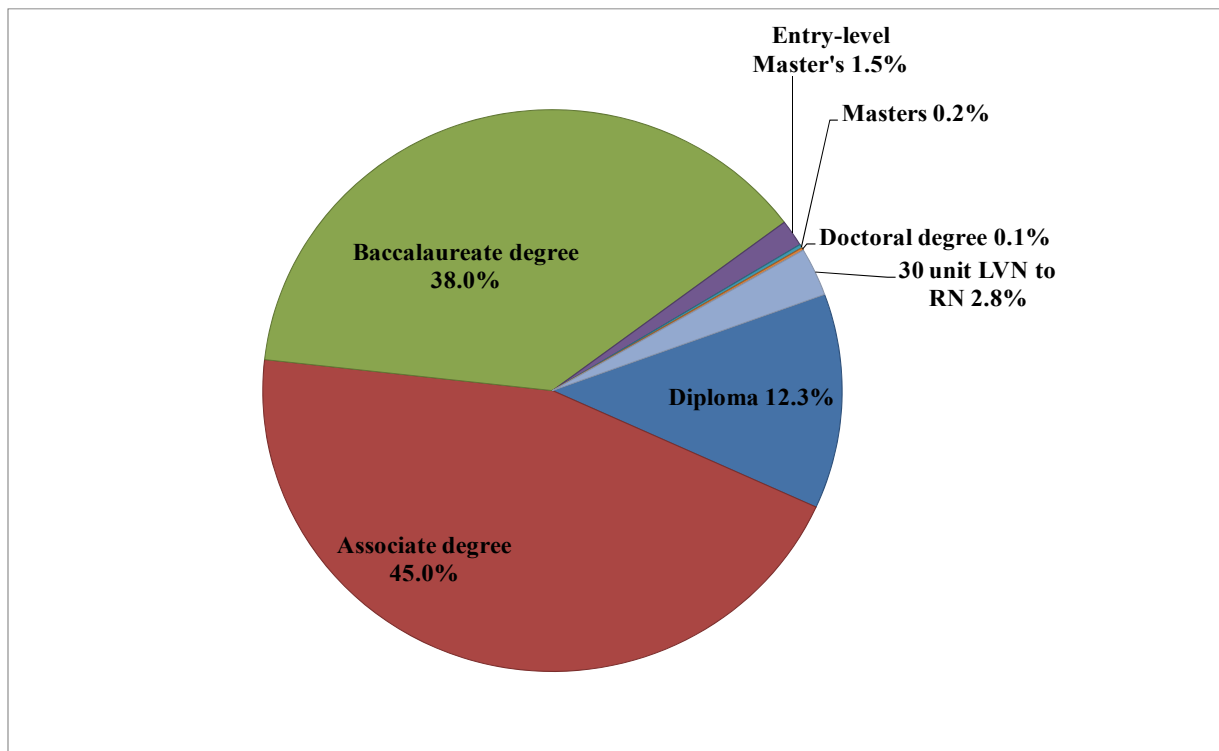
Figure 2.9 Employment in health occupations prior to basic nursing education for RNs with active California licenses who live in California, 2010



Note: Number of cases=5,551. Data are weighted to represent all RNs with active licenses.

Figure 2.10 presents the shares of nurses who completed each type of pre-licensure RN education program. Most of California’s RNs entered the profession with an Associate Degree (45.0%). Baccalaureate RN education served as basic education for thirty-eight percent of RNs, and twelve percent received diplomas in nursing. Diploma programs were dominant in nursing education through the 1950s, after which time Community College-based Associate Degree programs grew rapidly. At this time, there are no diploma programs operating in California, and few nationwide.

Figure 2.10 Pre-licensure RN education completed by the statewide population of RNs with active California licenses, 2010

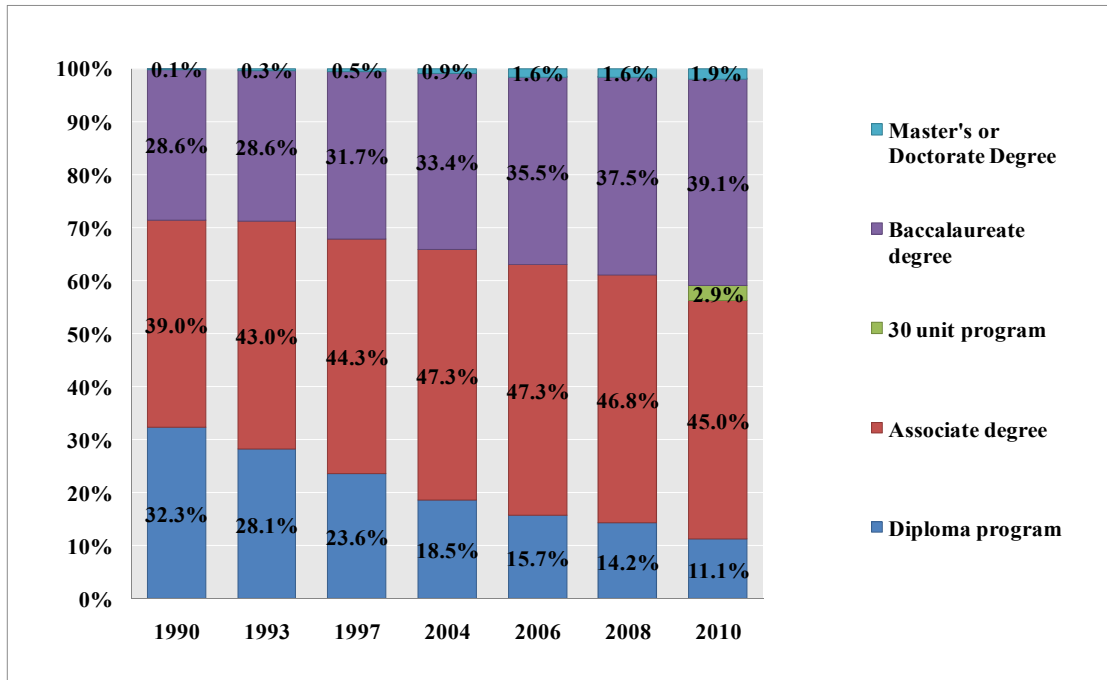


Note: Number of cases=5,476. Data are weighted to represent all RNs with active licenses.

As seen in Figure 2.11, 32 percent of working RNs had received their pre-licensure education in a diploma program in 1990; this share decreased to 11.1 percent in 2010. Simultaneously, the shares of RNs whose pre-licensure education was in baccalaureate or graduate degree programs increased, while the associate degree share declined slightly from 2004 levels. For the first time in 2010, RNs were also given the option of indicating their pre-licensure education was a thirty unit LVN to RN program. Nearly three percent (2.9%) of RNs reported their pre-licensure education as a LVN-to-RN program.

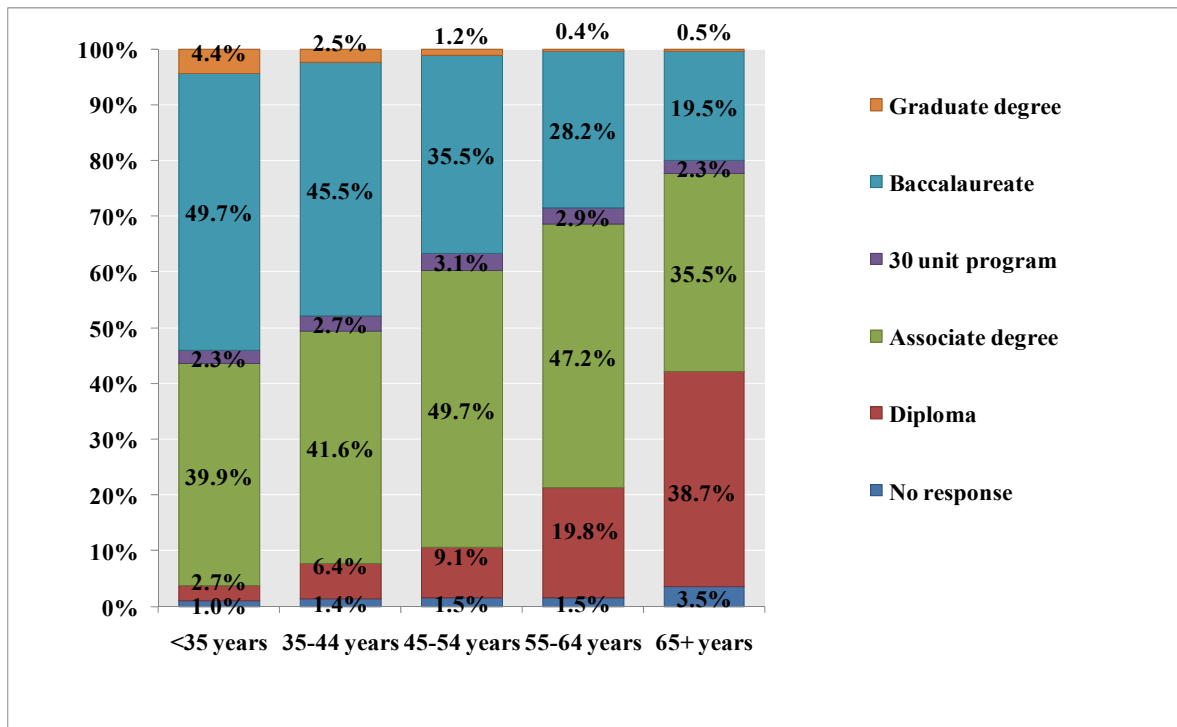
Figure 2.12 presents pre-licensure nursing education by age group, for all nurses with active licenses residing in California. Unsurprisingly, older nurses are more likely to have received their initial nursing education in a diploma program, while only 2.6 percent of California's nurses under 35 years old received a diploma. Nearly half of nurses under 35 years old received a BSN for their pre-licensure education.

Figure 2.11 Basic pre-licensure education of currently working RNs residing in California, by survey year



Note: 2010 number of cases=4,662. Data (2006-2010) are weighted to represent all RNs with active licenses..

Figure 2.12 Basic pre-licensure RN education completed by the statewide population of RNs with active California licenses, by age group, 2010



Note: Number of cases=5,551. Data are weighted to represent all RNs with active licenses.

Table 2.17 presents the average age of nurses at the time they graduated from their pre-licensure RN education program from 1990 through 2010; the average age has increased from 25.4 years in 1990 to 27.3 years in 2010.

Table 2.17 Average age at the time of graduation from their pre-licensure education of currently working registered nurses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010
Mean	25.4	26.0	26.3	26.9	27.1	27.0	27.3
Standard Deviation	6.7	6.9	6.8	7.1	*	*	*
Number of cases	2,665	2,435	2,854	2,852	3,624	3,998	4,652

*A standard deviation computation was not feasible with the weighting scheme used with the 2006, 2008, and 2010 data.
 Note: Data (2006-2010) are weighted to represent all RNs with active licenses.

The age distribution of RNs at the time of their graduation is provided in Table 2.18, both overall and by age group. The first column, labeled “All nurses” shows that 50.2 percent of California’s active RNs completed their nursing education when they were younger than 25 years. An additional 21.2 percent were between 25 and 29 years. The average age at graduation has been rising over the decades. In the 1950s and 1960s, over 90 percent of nursing graduates were in their early 20s. This pattern changed in the 1970s, when 76 percent of RN graduates were under 25 years. By the 2000s, only 30.6 percent of pre-licensure graduates were under 25 years old, and 43.7 percent of pre-licensure graduates were 30 years or older.

Table 2.18 Age distribution at time of graduation from pre-licensure RN education, for RNs with active California licenses who reside in California, 2010

Age at graduation	Decade of graduation						
	All nurses	1950s	1960s	1970s	1980s	1990s	2000s
Under 25	50.2%	94.7%	94.3%	75.9%	51.0%	42.0%	30.6%
25-29 years	21.2%	4.9%	4.0%	15.2%	24.0%	23.0%	25.8%
30-34 years	12.2%	0.4%	1.2%	5.5%	13.3%	15.7%	15.3%
35-39 years	8.5%	0.0%	0.2%	2.4%	7.9%	10.3%	13.1%
40-44 years	4.6%	0.0%	0.3%	0.9%	2.6%	5.9%	8.1%
45 and older	3.2%	0.0%	0.0%	0.1%	1.2%	3.1%	7.2%

Note: Number of cases=5,461. 5 RNs reported graduating in 2010; they were excluded from the decade of graduation portion of the table because there were insufficient observations to calculate a total for the 2010s. RNs who did not report a year of graduation were also excluded from the table. Columns may not add to 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Over half of California’s working RNs received their basic nursing education in California (56.2%), as seen in Table 2.19. About 21 percent were educated in other states and 23 percent are international graduates. The share of working California RNs who were initially educated overseas increased between 1990 and 2010, while the share educated in other states has declined from 33.3 percent in 1990 to 20.8 percent in 2010. The other states and countries in which most of California’s nurses received their pre-licensure education include New York (2.0%), Illinois (1.2%), Korea (1.2%), and the Philippines (15.2%).

Table 2.19 Locations where currently working registered nurses residing in California received basic nursing education, by survey year

	1990	1993	1997	2004	2006	2008	2010
California	53.3%	53.2%	55.1%	58.3%	56.7%	55.1%	56.2%
Other States	33.3%	30.4%	24.0%	22.2%	25.6%	21.4%	20.8%
International	13.0%	16.3%	20.9%	19.4%	17.8%	23.5%	23.0%
Number of respondents	2,240	2,201	2,366	2,894	3,732	4,076	4,665

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

In 2010, RNs were asked for the first time to indicate their country of birth (Table 2.20). Over 65 percent of RNs with active licenses who are residing in California were born in the United States. Nearly 18 percent of RNs indicated they were born in the Philippines. Nearly two percent were born in South Korea or Mexico, and slightly more than one percent was born in Canada, India, or the United Kingdom.

Nurses were also asked where they received their initial RN education. Of RNs reporting they were born in the United States, nearly 70 percent of them were educated in California, and 29.8 percent were educated in another US location. Of RNs reporting they were born in the Philippines, 17.4 percent were educated in California. While most foreign-born RNs were educated outside of California, 83 percent of RNs born in Mexico reported graduating from a Californian pre-licensure program.

Table 2.20 Top five countries of birth and country of education for RNs residing in California, 2010

	Share with country of birth	Educated in California	Educated in other US location	Internationally educated
United States	65.5%	69.9%	29.8%	0.3%
Philippines	17.9%	17.4%	4.2%	78.4%
Korea	1.6%	13.7%	6.3%	80.0%
Mexico	1.6%	83.2%	10.0%	6.9%
Canada	1.3%	19.3%	17.1%	63.6%
India	1.1%	28.1%	7.1%	64.7%
United Kingdom	1.0%	19.5%	9.9%	70.6%

Note: Number of birth country cases=5,427. Number of educated country cases=5,370. Rows might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Many California nurses maintain licenses in other states. Table 2.21 presents the share of working nurses who reside in California who have a nursing license in at least one other state. In 2010, 10 percent had at least one other license; this share has fluctuated substantially over the years and declined in 2008 and again in 2010. Nurses can easily maintain licenses in multiple states, regardless of whether they plan to work in those states. Some nurses maintain multiple licenses because they work as traveling nurses or telemedicine nurses; others want to maintain a license in the state in which they were first licensed for sentimental reasons. These issues are discussed later in this report.

Table 2.21 Currently working registered nurses residing in California who also hold a nursing license in another state, by survey year

	1990	1993	1997	2004	2006	2008	2010
No	86.6%	82.8%	85.3%	87.0%	80.6%	88.1%	90.0%
Yes	13.4%	17.2%	14.7%	13.0%	19.4%	11.9%	10.0%
Number of cases	2,251	2,194	2,468	2,906	3,699	4,052	4,726

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Many nurses pursue additional education after their pre-licensure education, as seen in Table 2.22. About 37 percent of nurses with active California licenses received some additional post-licensure education. The most commonly received degree is a baccalaureate of science in nursing (BSN), with 14.8 percent of RNs receiving this after obtaining their RN license. Over ten percent of nurses eventually receive a master’s degree in nursing. Some nurses pursue additional education in non-nursing fields; for example, 4.3 percent of RNs received a master’s degree in a non-nursing field after their initial RN education. For many nurses, this education is in a field related to nursing, such as public health or health management.

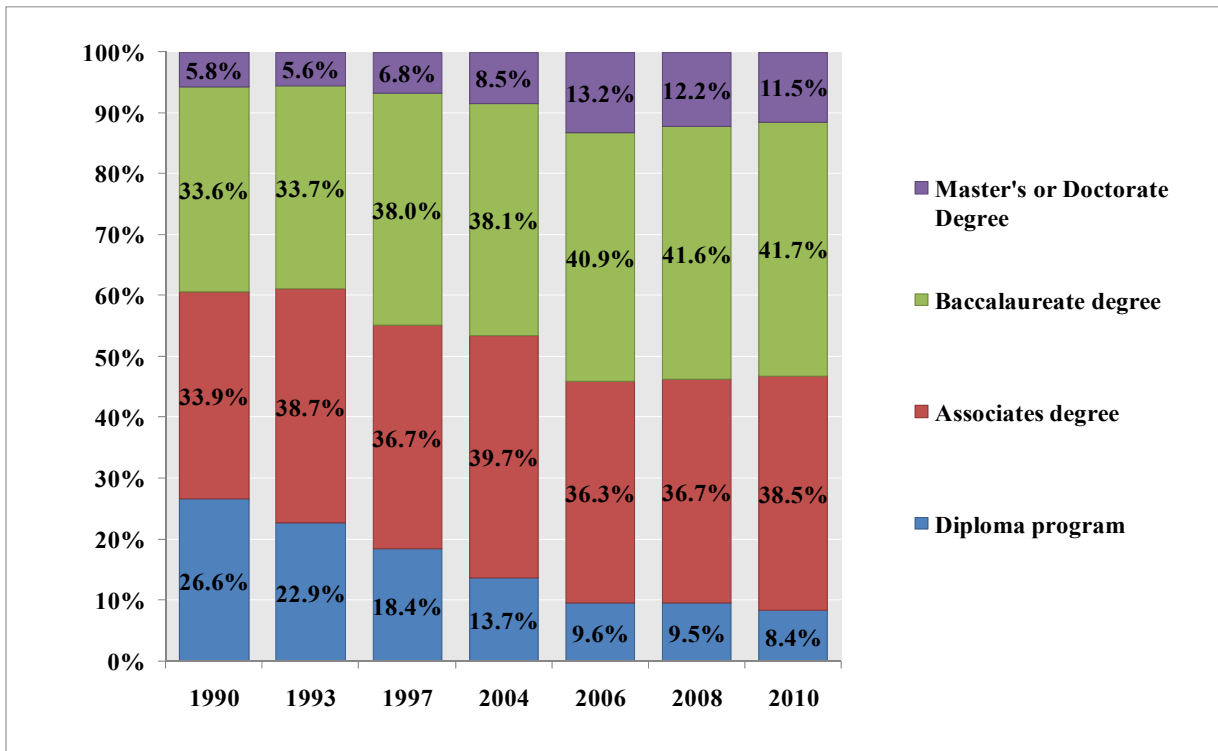
Table 2.22 Additional degrees completed after pre-licensure education by RNs with active California licenses who reside in California, 2010

	All	Under 35 years	35-44 years	45-54 years	55-64 years	65 years and older
No additional degrees	62.7%	77.0%	64.0%	63.7%	54.5%	46.0%
AD – Nursing	4.1%	3.7%	4.2%	4.5%	4.0%	4.2%
BSN	14.8%	8.1%	15.9%	14.5%	17.3%	20.7%
MSN	10.0%	6.4%	10.1%	9.5%	13.4%	9.6%
Doctorate in nursing	0.4%	0.0%	0.0%	0.2%	1.2%	0.0%
AD – Non-nursing	1.9%	1.6%	1.3%	2.1%	2.3%	3.0%
BS/BA – Non-nursing	4.3%	0.8%	2.3%	3.5%	7.3%	12.2%
MS/MA – Non-nursing	4.3%	0.4%	1.7%	5.2%	7.7%	7.9%
Doctorate – Non-nursing	0.9%	0.3%	0.7%	0.8%	1.5%	1.8%

Note: Number of cases=5,551. Respondents could report obtaining multiple additional degrees, so columns will not add to 100%. Data are weighted to represent all RNs with active licenses.

Figure 2.13 presents the highest level of nursing education received by working nurses, from 1990 through 2010. The share of RNs with a graduate degree in nursing has risen from 5.8 percent in 1990 to 11.5 percent in 2010. Fewer than half of California’s nurses report that their highest nursing education is an Associate Degree or Diploma.

Figure 2.13 Highest nursing degree earned by currently working registered nurses residing in California, by survey year



Note: 2010 number of cases=4,662. Data (2006-2010) are weighted to represent all RNs with active licenses..

Table 2.23 provides more detail about the trend toward higher education levels among California’s working RNs. Each column of the table presents the highest education level of RNs for a particular type of basic nursing education. The first column presents the educational attainment of nurses whose pre-licensure education was in a diploma program. In the 1990 survey, 82.4 percent of diploma graduates had not obtained additional nursing degrees, while 14.3 percent had baccalaureate degrees and 3.3 percent had graduate degrees. In 2010, many more diploma graduates had obtained additional nursing education; only 75.3 percent had not. The share of nurses whose initial education was an associate degree in nursing who obtained additional degrees also have risen, from 13 percent in 1990 to nearly 20.8 percent in 2010.

Table 2.23 Highest level of nursing education obtained since initial licensure by currently working registered nurses residing in California, by basic nursing education, by survey year

Highest Current Level of Nursing Education	Initial Pre-Licensure RN Education		
	Diploma program	Associate degree	Baccalaureate degree
1990 Survey (# cases)	721	869	637
Diploma program	82.4%	-----	-----
Associate degree	0.0%	87.0%	-----
Baccalaureate degree	14.3%	11.4%	86.0%
Master's or Doctorate Degree	3.3%	1.6%	14.0%
1993 Survey (# cases)	617	945	627
Diploma program	81.4%	-----	-----
Associate degree	0.3%	87.6%	-----
Baccalaureate degree	13.5%	10.2%	89.6%
Master's or Doctorate Degree	4.9%	2.2%	10.4%
1997 Survey (# cases)	575	1,080	774
Diploma program	77.9%	-----	-----
Associate degree	1.4%	82.2%	-----
Baccalaureate degree	14.4%	14.4%	89.0%
Master's or Doctorate Degree	6.3%	3.3%	11.0%
2004 Survey (# cases)	414	1,147	755
Diploma program	65.9%	-----	-----
Associate degree	5.3%	78.1%	-----
Baccalaureate degree	21.3%	15.5%	83.8%
Master's or Doctorate Degree	7.5%	6.4%	0.2%
2006 Survey (# cases)	606	1,761	1,275
Diploma program	61.0%	-----	-----
Associate degree	8.8%	74.0%	-----
Baccalaureate degree	20.2%	17.4%	81.4%
Master's or Doctorate Degree	10.1%	8.6%	18.6%
2008 Survey (# cases)	578	1,903	1,520
Diploma program	67.5%	-----	-----
Associate degree	6.1%	76.4%	-----
Baccalaureate degree	19.5%	15.9%	83.5%
Master's or Doctorate Degree	7.0%	7.8%	16.2%
2010 Survey (# cases)	553	2,112	1,772
Diploma program	75.3%	-----	-----
Associate degree	1.4%	79.2%	-----
Baccalaureate degree	15.3%	14.2%	85.7%
Master's or Doctorate Degree	7.9%	6.6%	14.3%
No Response	0.0%	0.0%	0.0%

Note: Data (2006-2010) are weighted to represent all RNs with active licenses.

In 2010, RNs were also asked to indicate the year in which they graduated from their post-licensure degree programs. Table 2.24 shows the average number of years since initial RN education and the completion of an additional degree program. The average number of years for a diploma nurse to receive a BSN is nearly 14 years

after graduation from their nursing program. The average number of years an RN holding an associate degree takes to achieve a baccalaureate in nursing is nearly a decade.

Table 2.24 Average years between initial education nursing education and additional nursing education for all RNs, 2010

Initial RN Education	Additional Degrees			
	ADN	BSN	MSN	PhD
Diploma	3.1	13.6	19.8	28
Associates Degree, Nursing		9.5	16.1	24.9
Baccalaureate Degree, Nursing			9.3	22.5

Note: 2010 data are weighted to represent all RNs with active licenses.

Nurses can specialize in a variety of fields, and obtain certification to demonstrate advanced practice or specialized knowledge. Table 2.25 presents information about certifications in various specializations received from the California Board of Registered Nursing by working RNs. The share of RNs who have such certification has risen over time. In 1993, fewer than 17 percent of working RNs reported they had additional certification, but by 2010, 22.7 percent had some sort of certification. The share of working RNs with a Nurse Practitioner certification has increased, from 3.5 percent in 1990 to 5.6 percent in 2010. There also has been growth in Public Health Nursing, although fewer nurses in 2010 reported having a Public Health Nurse certification than in prior years.

Table 2.25 Certifications received from the California Board of Registered Nursing by currently working registered nurses residing in California, by survey year

	1993	1997	2004	2006	2008	2010
No additional certifications	83.6%	79.0%	75.6%	76.3%	77.9%	77.3%
Nurse Anesthetist	0.9%	0.5%	0.3%	0.6%	0.4%	0.4%
Nurse Midwife	1.2%	1.5%	0.2%	2.0%	0.6%	0.4%
Nurse Midwife with Furnishing Number	0.4%	0.1%	0.0%	*	*	*
Nurse Practitioner	2.2%	3.2%	1.5%	6.6%	7.1%	5.6%
Nurse Practitioner with Furnishing Number	1.3%	2.4%	2.3%	*	*	*
Public Health Nurse	11.1%	14.1%	15.7%	15.5%	16.9%	14.9%
Psychiatric/Mental Health Nurse	2.2%	2.2%	1.0%	3.4%	1.1%	1.2%
Clinical Nurse Specialist	*	*	3.4%	2.8%	2.7%	2.7%
Number of cases	2,212	2,489	2,698	3,282	3,532	4,368

* Item was not requested in the survey year.

Note: Information about additional certifications was not obtained in the 1990 survey. Nurses can have more than one certification, so columns will not total 100%. Data (2006-2010) are weighted to represent all RNs with active licenses.

Some of California's nurses are currently enrolled in a nursing degree or specialty certification program. Table 2.26 provides information about these nurses. Overall, 8.1 percent of RNs report being enrolled in school, with a higher share among younger RNs. Of those enrolled, most are working toward a BSN (30.7%) or master's degree (43.3%).

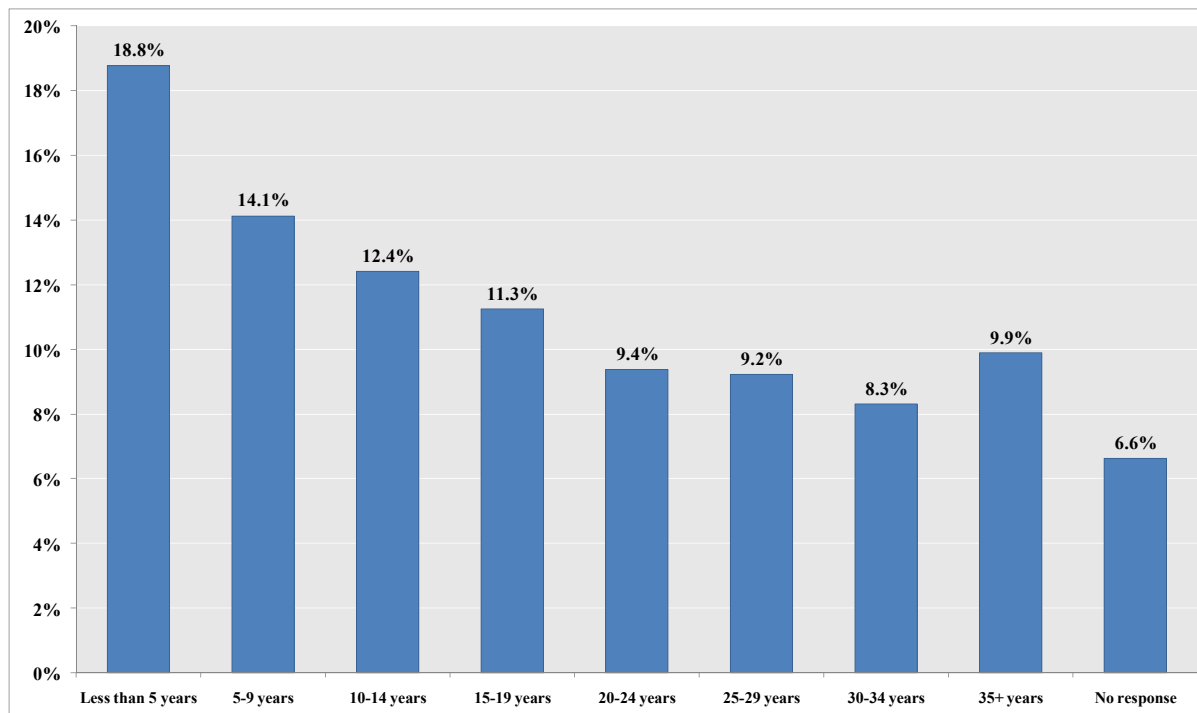
Table 2.26 Current enrollment in nursing degree or specialty certification program among the statewide population of RNs with active California licenses, by age group, 2010

	All nurses	Under 35 years	35-44 years	45-54 years	55-64 years	65 years and older
Currently enrolled	8.1%	16.3%	8.3%	8.0%	4.0%	0.7%
Of those enrolled, objective is...						
Associate Degree	0.3%	0.8%	0.0%	0.0%	0.0%	0.0%
Baccalaureate Degree	30.7%	34.4%	33.3%	24.8%	27.3%	17.4%
Master's Degree	43.3%	52.0%	48.6%	37.1%	18.2%	63.2%
Doctoral Degree	6.7%	2.5%	9.8%	7.6%	12.0%	0.0%
Non-degree specialty certification	17.4%	7.5%	8.4%	29.0%	41.3%	10.7%
No response	1.7%	2.9%	0.0%	1.5%	1.2%	8.7%

Note: Number of cases= 5,551. Number of enrolled cases = 365. Data are weighted to represent all RNs with active licenses.

Nursing competency is achieved through both education and experience. Figure 2.14 presents reported years of experience, excluding years during which nurses did not work in nursing. Nearly thirty-three percent of California's active nurses have fewer than 10 years of experience, while 36.8 percent have at least 20 years of experience.

Figure 2.14 Years of experience in nursing among RNs with active California licenses who reside in California, 2010



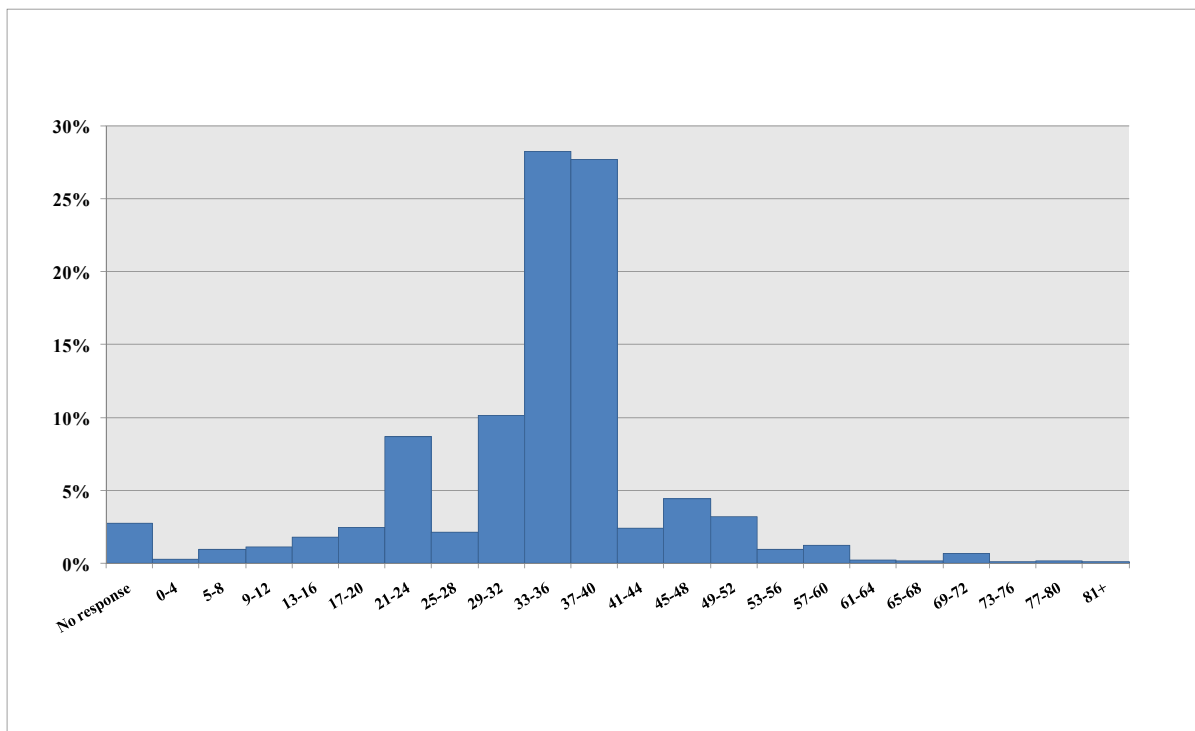
Note: Number of cases=5,551. Data are weighted to represent all RNs with active licenses.

Chapter 3 Employment, Wages, and Satisfaction of Registered Nurses

How Much Do RNs Work?

As discussed in Chapter 2, large shares of RNs work in the nursing field. The number of hours of work provided by these nurses also is high. Figure 3.1 presents the distribution of hours worked in a “normal” week for RNs holding California licenses, working in nursing, and residing in California. Over 41 percent of working RNs who reside in California work more than 36 hours per week; however, the most common workweek contains between 33 and 36 hours. The average number of hours worked per week has changed slightly over time, as seen in Table 3.1. In 1990, the average number of hours worked per week was 36.1; in 2010, it was 36.0.

Figure 3.1 Distribution of hours per week worked by nurses, for California residents, 2010



Note: Number of cases=4,726. Data are weighted to represent all RNs with active licenses.

Table 3.1 Number of hours per week usually worked by registered nurses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010
Mean in hours	36.1	36.3	36.3	35.6	35.2	36.5	36
Standard deviation	12.9	12.3	11	11.9	*	*	*
Number of cases	2,251	2,212	2,470	3,064	3,510	3,984	4,605

*A standard deviation computation was not feasible with the weighting scheme used with the 2006-2010 data.

Note: Data (2006-2010) are weighted to represent all RNs with active licenses.

Table 3.2 presents the shares of nurses working full-time versus part-time, and the average number of hours per week worked by these groups. The share of California resident RNs who reported that they work full-time

changed very little between 2004 and 2010. Over the same period, the hours worked by full-time nurses was stable, while hours for part-time nurses rose from 22.8 hrs in 2004 to 24.7 hours in 2010.

Table 3.2 Number of hours per week usually worked by registered nurses residing in California, 2004-2010

	2004	2006	2008	2010
Working full-time (more than 32 hours per week)	58.80%	61.90%	60.30%	60.90%
Mean hours per week	41.8	40.9	41.1	40.6
Working part-time (32 hours or less per week)	28.70%	24.80%	23.30%	24.10%
Mean hours per week	22.8	22.4	24.4	24.7
Working, unknown hours	*	*	3.40%	2.40%
Not working	12.50%	13.30%	13.10%	12.60%

* Data not available.

Note: Data (2006-2010) are weighted to represent all RNs with active licenses..

Nurses were asked to report the number of hours per day they usually work; these data are presented in Table 3.3. Over 40 percent of working RNs residing in California normally work 12-hour shifts, and 41.7 percent work 8-hour shifts. Note that the dramatic difference in shift lengths reported in 2004 is suggestive of a survey-scanning problem and should be interpreted with caution.

Table 3.3 Number of hours per day usually worked by registered nurses residing in California, 1997-2010

	1997	2004	2006	2008	2010
Under 5 hours	2.50%	2.00%	1.70%	0.70%	1.10%
5-7.5 hours	6.80%	4.70%	4.00%	3.90%	3.80%
8 hours	45.00%	0.30%	42.80%	39.50%	41.70%
8.5-11.5 hours	18.60%	57.90%	15.30%	13.50%	11.60%
12 hours	24.40%	31.40%	34.70%	40.80%	40.10%
More than 12 hours	2.60%	3.80%	1.60%	1.50%	1.80%
Number of cases	2,433	3,038	3,109	3,559	3,986

Note: This question was not asked in 1990 or 1993. Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses. It is suspected that in 2004 respondents who entered 8 hours were miscoded with 9 or 10 hours per shift.

BRN surveys have had different questions about overtime hours worked by RNs. In 1997, the survey requested overtime worked “without advance notice;” in 2004, the question asked for “mandatory overtime;” and in 2006, 2008, and 2010, survey respondents were asked to report the number of hours of overtime “normally” worked per week. The data from these surveys for working RNs residing in California are presented in Table 3.4. The share of RNs who work one hour or more of overtime per week dropped between 1997 and 2010, from 63 percent to 34.5 percent. This change is mostly seen by a decrease in the share of RNs working less than 6 hours per week of overtime. There has been substantial variation in the percent of RNs working more than 8 hours of overtime per week, ranging from a low of 6.4 percent in 1997 to a high of 19.9 percent in 2004. The share working more than 8 hours of overtime per week was relatively stable from 2006 through 2008, and dropped by over three percentage points, to 8.7 percent, in 2010.

Table 3.4 Number of overtime hours per week worked by registered nurses residing in California, 1997-2010

	1997 overtime without advance notice	2004: mandatory overtime	2006: any overtime	2008, any overtime	2010, any overtime
None or less than one hour	36.60%	64.00%	50.90%	57.00%	65.50%
1-2.5 hours	31.30%	6.70%	14.60%	14.30%	11.80%
3-4 hours	15.10%	4.80%	10.60%	7.60%	6.60%
5-6 hours	6.70%	1.60%	6.40%	4.30%	3.40%
7-8 hours	4.00%	3.00%	4.10%	4.60%	4.00%
More than 8 hours	6.40%	19.90%	13.40%	12.20%	8.70%
Number of cases	2,309	3,095	3,313	3,952	4,605

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Some RNs make themselves available to work “on call.” Nurses who are paid on a wage schedule usually are paid a nominal wage for on-call hours that are not worked, and then are paid their regular wage or a premium wage when they are called to work. Nurses who are salaried may consider some of their time “on-call” but are not paid specifically for on-call time. As seen in Table 3.5, 86.6 percent of RNs are not normally on call. Among those who are on call, the number of hours per week on call varies widely. Six percent of RNs are on call up to 10 hours per week, while 2.3 percent are on call 30 or more hours per week.

Table 3.5 Number of on-call hours unworked per week by registered nurses residing in California, 2008 and 2010

	Unworked on-call	
	2008	2010
No on-call hours	86.20%	86.60%
0.5-10 hours	5.70%	6.00%
10-19 hours	4.30%	3.70%
20-29 hours	1.00%	1.40%
30 or more hours	2.90%	2.30%
Number of cases	3,951	4,615

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Most working RNs are employed the full year, as seen in Table 3.6. In 2006 and 2008, RNs were asked to report the number of weeks they worked per year, and in 2010, they were asked to report the number of months per year. Over ninety-eight percent of employed RNs living in California work a “full year” job, defined as at least 46 weeks of work or 11 months per year (up to 6 weeks of vacation would be possible). Less than one percent of RNs work 9 to 10 months of the year, and only 1.1 percent work less than 9 months per year. The increase in the share of RNs working a “full year” position between 2008 and 2010 might be the result of the change in the question from weeks per year to months per year, but could also represent a true change in the likelihood of RNs working full-year jobs.

Table 3.6 Number of weeks per year registered nurses work as a registered nurse, California residents, 2006-2010

	2006	2008	2010
46-52 weeks per year (11-12 months)	86.3%	85.3%	98.0%
36-45 weeks per year (9-10 months)	7.7%	10.6%	0.8%
Less than 36 weeks per year	4.6%	4.1%	1.1%

Note: 2010 number of cases = 4,629. Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Nurses' Principal Nursing Positions

Nurses were asked to provide information about their principal nursing position, which is the RN position in which they spend most of their working time. Information about other positions was requested separately. Table 3.7 presents the type of employment arrangement for nurses' principal nursing positions, by residence. Nearly 95 percent of working RNs residing in California are regular employees in their principal positions. Only 1.3 percent are employed through temporary agencies, 1.9 percent are self-employed, and less than one percent reported working as a travel nurse. In contrast, 9.9 percent of employed, non-California resident RNs hold their primary positions through travel nursing agencies. These data support findings from previous years that indicate that a substantial fraction of RNs residing outside California who have California licenses work in California on a traveling basis.

Table 3.7 Employment status in principal nursing positions for currently working RNs, California residents and non-residents, 2010

	California residents	Non-California residents
Regular employee	94.8%	83.8%
Employed through a temporary service agency	1.3%	2.3%
Self-employed	1.9%	2.7%
Travel nurse or employed through a traveling nurse agency	0.5%	9.9%
No response	1.5%	1.3%

Note: Number of cases for both residents and non-residents=5,274. Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

The job titles that best describe nurses' principal nursing positions are presented in Table 3.8. Most RNs report that they are staff nurses or direct patient care providers; the share has ranged between 58 and 63 percent in every survey year except 2004. In 2004, nurses were not given the option of reporting that they were a "staff nurse" as in previous years, and instead were asked if they were a "direct patient care provider." Many nurses thus selected "other" and wrote that they were staff nurses. This explains the lower share of nurses identified as staff nurses in 2004, and the correspondingly higher share of "other" titles. The share of RNs in management positions declined to less than 11 percent in 2008 and 2010, although this might not represent a true drop because nurses were allowed the opportunity to report their job title as "Charge Nurse" for the first time in 2008; Charge Nurses represented 8.4 percent of working RNs residing in California. In 2006, some charge nurses may have reported their title as "front-line management," while others may have chosen "staff nurse." There has been an increase in the share of RNs with a job title of "nurse practitioner" (2.2% in 1990; 3.4% in 2010).

Table 3.8 Job title that best describes the principal nursing position of working registered nurses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010
Direct patient care provider/staff nurse	62.6%	59.5%	62.1%	53.3%	61.2%	58.5%	59.8%
Charge Nurse	*	*	*	*	*	7.6%	8.4%
Senior management, any setting	*	*	*	*	1.0%	1.9%	1.5%
Senior management, service setting	4.0%	3.5%	4.6%	1.7%	*	*	*
Middle management, any setting	*	*	*	*	7.7%	5.8%	6.0%
Middle management, service setting	12.5%	14.5%	11.4%	6.3%	*	*	*
Front-line management	*	*	*	11.1%	5.9%	3.0%	2.9%
Management/Administration, academic setting	0.7%	0.2%	0.3%	0.1%	*	*	*
Direct care and Charge Nurse (both)	*	*	*	*	*	0.8%	*
Clinical Nurse Specialist	3.2%	3.2%	3.1%	2.3%	1.6%	1.1%	0.8%
Certified Registered Nurse Anesthetist	0.5%	0.5%	0.3%	0.4%	0.4%	0.4%	0.4%
Certified Nurse Midwife	0.4%	0.2%	0.1%	0.2%	0.2%	0.3%	0.2%
Nurse Practitioner	2.2%	1.8%	3.2%	3.6%	4.7%	4.1%	3.4%
Educator, service setting/clinical nurse educator	1.7%	2.0%	0.9%	2.0%	1.7%	1.6%	1.3%
Educator, academic setting	1.2%	1.3%	1.0%	1.0%	2.5%	1.5%	1.4%
School Nurse	2.0%	1.2%	2.0%	1.9%	1.8%	1.8%	1.5%
Public Health Nurse	2.2%	2.2%	1.5%	1.7%	1.9%	1.3%	1.5%
Patient care coordinator/case manager/discharge planner	*	*	*	*	3.9%	4.2%	4.0%
Discharge Planner	*	*	*	0.1%	*	*	*
Case Manager	2.7%	4.5%	5.6%	3.9%	*	*	*
QI/Utilization Review Nurse	*	*	*	0.7%	1.7%	1.9%	1.3%
Occupational Health Nurse	*	*	*	*	0.3%	0.2%	0.2%
Telenursing	*	*	*	*	0.7%	1.3%	1.1%
Nurse Coordinator	*	*	*	*	*	0.2%	1.0%
Consultant	0.8%	0.9%	1.1%	0.7%	*	0.3%	*
Researcher	0.2%	0.8%	0.4%	0.6%	*	0.2%	0.2%
Other	3.1%	3.3%	2.6%	8.3%	2.9%	2.0%	2.7%
Number of cases	2,227	2,190	2,375	2,925	3,675	4,108	4,689

* Question was not asked in the survey year.

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Hospitals are the dominant employers of RNs, as seen in Table 3.9. In 2010, 64.3 percent of RNs reported that they worked in some department of a hospital; this share has been stable since 2006, after having declined from 1990 to 1997. The percent of RNs who work in nursing homes, extended care, or skilled nursing facilities has dropped, from 5.6 percent in 1990 to 4.4 percent in 2010. Furthermore, the percentage of RNs working in public health has dropped from 3.4 percent in 1990 to 1.7 percent in 2010. Other common workplaces of RNs residing in California include ambulatory care settings, such as clinics and outpatient surgery centers (8.1%), home health agencies (3.3%), and case management (2.2%).

Table 3.9 Types of organizations in which registered nurses residing in California work the most hours each month, by survey year

	1990	1993	1997	2004	2006	2008	2010
Acute hospital	67.9%	64.3%	60.2%	60.9%	62.70%	64.40%	64.3%
Hospital, acute care department	*	*	*	*	55.6%	56.3%	53.4%
Hospital, nursing home unit	*	*	*	*	0.5%	0.5%	0.4%
Hospital-based ambulatory care department	*	*	*	*	4.8%	5.5%	7.8%
Hospital-based ancillary department	*	*	*	*	1.8%	1.4%	2.3%
Hospital, other department	*	*	*	*	*	0.7%	0.4%
Skilled nursing/extended care / rehabilitation	5.6%	5.1%	7.1%	4.4%	2.3%	3.0%	4.4%
University or college	*	*	*	*	3.3%	*	*
Academic nursing program	1.3%	1.5%	0.8%	0.9%	*	1.4%	1.6%
Public health dept/community health agency	3.4%	2.5%	2.7%	2.1%	2.5%	2.6%	1.7%
Home health nursing agency or service	3.8%	5.9%	6.8%	3.3%	3.0%	2.5%	3.3%
Hospice	*	*	*	1.3%	1.7%	1.4%	1.4%
Ambulatory care setting (office, surgery center)	11.8%	10.9%	9.0%	10.8%	6.3%	9.3%	8.1%
Dialysis	*	*	*	*	1.5%	1.2%	1.6%
Telenursing organization / call center	*	*	*	0.6%	*	1.1%	0.7%
Occupational health/employee health	1.5%	0.8%	0.7%	0.3%	0.5%	0.3%	0.3%
School health (K-12 or college)	2.1%	1.6%	1.5%	2.0%	1.8%	2.1%	1.7%
Mental health/drug and alcohol treatment	*	2.9%	1.8%	2.0%*	3.8%	0.8%	1.9%
Forensic setting (correctional facility, prison, jail)	*	*	*	1.1%	2.0%	1.2%	1.9%
Government agency (local, state, federal)	*	*	*	2.7%	1.4%	1.0%	1.7%
Case management/ disease management	*	*	*	*	*	2.3%	2.2%
Self employed	1.1%	0.7%	0.5%	0.8%	0.5%	0.7%	0.7%
Other	1.5%	3.8%	8.9%	6.9%	6.9%	4.7%	2.6%
Number of cases	2,212	2,164	2,444	2,971	3,661	4,080	4,671

* Question was not asked in the survey year.

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses. Some organizations listed in the survey were combined with others to produce this table; in 2008 and 2010, urgent care was included as part of ambulatory care. Nurses who reported that their setting was an inpatient mental health facility (1.3%) were combined with those who reported outpatient mental health (0.6%). Nurses who reported working in long-term acute care settings (0.6%) per grouped with “other” in 2008, but in 2010 were grouped with skilled nursing/extended care/ rehabilitation.

Twelve percent of RNs reported that they do not provide direct patient care at their primary place of employment. Among those who do provide patient care, a variety of clinical areas are represented, as seen in Table 3.10. Medical-surgical nursing is reported by the greatest share of RNs, with 11.7 percent working in this area. Other common areas include critical care (10.7%), ambulatory care (9.3%), perioperative care (7.8%), obstetrics/gynecology (5.5%), emergency (6.8%), telemetry (4.8%), psychiatrics (3.6%), pediatrics (3.2%), and neonatal (3.3%). There has been a trend since 1990 toward a smaller share of RNs working in medical-surgical and critical care.

Table 3.10 Clinical area in which working registered nurses residing in California most frequently provide care, for those who provide direct patient care, by survey year

	1990	1993	1997	2004	2006	2008	2010
Medical/surgical	34.0%	31.0%	26.3%	16.0%	17.1%	13.1%	11.7%
Ambulatory care	*	*	*	*	*	11.6%	9.3%
Cardiology	*	*	*	*	*	2.2%	2.6%
Corrections/forensic setting	*	*	*	*	1.4%	0.9%	1.6%
Critical care / ICU	15.9%	16.3%	17.1%	13.1%	11.8%	11.4%	10.7%
Dialysis	*	*	*	*	1.7%	1.4%	1.9%
Emergency/trauma/urgent care	5.4%	6.1%	5.8%	5.4%	6.4%	6.6%	6.8%
Geriatrics	5.6%	6.5%	10.3%	4.2%	2.5%	2.5%	2.7%
Home Health	*	*	*	3.2%	2.8%	2.7%	2.9%
Hospice	*	*	*	1.4%	1.7%	1.6%	1.4%
Mother-baby/newborn nursery	*	*	*	*	*	3.1%	2.8%
Neonatal/newborn	*	*	*	4.3%	4.1%	3.8%	3.3%
Obstetrics/labor & delivery/reproductive health	9.4%	10.1%	9.7%	8.2%	6.9%	4.6%	5.5%
Oncology	*	*	*	*	*	2.4%	2.2%
Pediatrics	5.6%	4.5%	6.3%	4.9%	4.5%	3.3%	3.2%
Perioperative/post-anesthesia/anesthesia	6.3%	7.2%	8.4%	7.8%	9.1%	6.8%	7.8%
Public health/community health	7.7%	7.9%	3.7%	1.9%	1.8%	1.5%	1.3%
Psychiatric/mental health/substance abuse	5.8%	4.7%	3.9%	3.8%	6.0%	3.1%	3.6%
Rehabilitation	*	*	*	1.8%	2.1%	1.6%	1.6%
School health (K-12 or postsecondary)	*	*	*	1.7%	2.3%	2.2%	1.8%
Step-down or transitional bed unit	*	*	*	*	2.4%	1.9%	1.6%
Telemetry	*	*	*	*	*	5.1%	4.8%
Work in multiple areas, do not specialize	*	*	*	*	1.5%	2.3%	2.3%
Other	4.2%	5.8%	8.5%	21.9%	13.9%	4.3%	6.6%
Number of cases	2,233	2,186	2,347	2,841	3,248	3,546	4,044

* Question was not asked in the survey year.

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses. In 2008 and prior years some clinical areas, such as mother-baby/neonatal, did not appear as a check box on the survey. However, they occurred often enough in the handwritten “other” category to be segregated from “other” and given their own categories. Some clinical areas specified on surveys were grouped for this table because of very small numbers of RNs reporting the category. In 2010, Labor & Delivery was combined with Obstetrics/Gynecology.

The job titles held by nurses vary by type of employer, as seen in Table 3.11. Each row of this table provides the shares of RNs in each job title for the employment setting. Over three-fourths of nurses working in hospital acute care departments are staff nurses, while only 7.2 percent are in management. The mix is similar in ambulatory departments of hospitals. In these settings, 70.1 percent of RNs residing in California are staff nurses, while 8.3 percent are involved in management. There is a greater share of advanced practice nurses (4.5%) in hospital-based ambulatory departments.

In skilled nursing and extended care facilities, 26.8 percent of RNs are in management positions, and 31.0 percent work as staff nurses. In home health agencies, many nurses have management, case management, and related job titles, while nearly 45 percent report that they are staff nurses. Fifteen percent of nurses in home health agencies are in management. Many nurses working in non-hospital ambulatory care settings are advanced practice nurses (26.3%), such as nurse practitioners and midwives.

Table 3.11 Job title that best describes the principal nursing position of working registered nurses residing in California, by work setting, 2010

	Staff nurse	Management (any level)	Advanced practice nursing	Case manager, UR, QI	Other	No Response	Number of cases
Hospital, acute care department	76.8%	7.2%	1.8%	1.1%	11.4%	1.8%	2,381
Hospital-based ambulatory	70.1%	8.3%	4.5%	1.2%	10.4%	5.5%	367
Skilled nursing/extended care	31.0%	26.8%	0.8%	1.6%	31.7%	8.2%	149
Home health agency	44.5%	15.1%	9.1%	16.8%	3.2%	11.3%	158
Ambulatory care setting	46.1%	8.3%	26.3%	3.1%	10.5%	5.7%	372

Note: Work settings with fewer than 100 observations were excluded. Advanced practice nursing includes nurse practitioners, nurse midwives, clinical nurse specialists, and nurse anesthetists. Case manager, UR, QI includes case manager, patient care coordinator, discharge planner, utilization review, infection control, and quality improvement nurse. Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Nurses with different education levels exhibit some differences in their work settings. Table 3.12 presents the work settings of RNs residing in California by the highest nursing education received. Acute care departments of hospitals employ the majority of RNs with associate degrees and baccalaureate degrees. Only 44.5 percent of diploma RNs and 35.2 percent of nurses with a MSN work in hospital acute-care departments. The second most common setting for RNs with a nursing diploma was hospital ambulatory care departments (10.4%). Nearly 9 percent of master’s-educated RNs work in universities and colleges, most likely as educators, and 20.2 percent are in ambulatory care settings. The work settings of associate degree and baccalaureate degree RNs are similar to each other, although associate degree nurses are slightly more likely to work in ambulatory care settings (7.8% vs. 5.7%) and bachelor degree nurses are slightly more likely to work in skilled nursing facilities (3.6% vs. 1.9%).

Table 3.13 presents analogous information for nurses with specific certifications. Large shares of respondents with public health certifications reported working in acute-care departments in hospitals (38.8%), public health departments (8.0%), ambulatory care settings (8.1%), and school nursing (7.5%). Nurse practitioners tend to work in ambulatory care settings (39.4%), acute care departments of hospitals (22.6%), hospital-based ambulatory care departments (6.6%), outpatient and inpatient mental health (3.3%), and school nursing (5.3%). Clinical nurse specialists are most often employed in acute care departments of hospitals (53.0%), universities (9.7%), ambulatory care settings (7.5%), and mental health (4.0%).

Table 3.12 Types of organizations in which registered nurses residing in California work the most hours each month, by highest level of nursing education, 2010

	Diploma	ADN	BSN	MSN
Hospital, acute care department	44.5%	57.4%	56.0%	35.2%
Hospital, nursing home unit	0.7%	0.2%	0.4%	0.8%
Hospital-based ambulatory care department	10.4%	8.0%	7.7%	5.9%
Hospital-based ancillary department	2.7%	2.1%	2.4%	2.8%
Skilled nursing/extended care facility	4.8%	1.9%	3.6%	1.0%
University or college	0.0%	0.4%	0.8%	8.9%
Public health department/community health agency	1.1%	0.9%	2.4%	2.7%
Home health nursing agency	3.1%	3.9%	3.2%	1.7%
Hospice	2.2%	1.4%	1.2%	1.8%
Ambulatory care setting	7.8%	7.8%	5.7%	20.2%
Dialysis	1.9%	2.3%	1.3%	0.3%
Occupational health/employee health	0.7%	0.3%	0.1%	0.4%
School nursing (K-12)	1.4%	0.7%	1.9%	4.9%
Mental health	2.0%	2.5%	1.2%	2.5%
Forensic setting (correctional facility, prison, jail)	2.2%	2.0%	1.9%	1.3%
Government agency (local, state, federal)	2.8%	1.2%	1.8%	2.3%
Self employed	2.4%	0.5%	0.4%	1.0%
Long Term Acute	0.0%	0.5%	0.5%	0.4%
Rehabilitation	1.1%	1.1%	1.4%	0.4%
Telenursing	0.2%	0.6%	0.8%	0.5%
Case Management	2.9%	2.1%	2.3%	1.3%
Other	5.4%	2.3%	2.9%	4.2%
Number of Cases	407	1787	1878	524

Note: There are not enough doctoral nurses to tabulate their work settings. Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Table 3.13 Types of organizations in which registered nurses residing in California work the most hours each month, by specialty certification, 2010

	Public health nurse (certified)	Nurse Practitioner	Clinical nurse specialist
Hospital, acute care department	38.8%	22.6%	53.0%
Hospital-based ambulatory care department	6.5%	6.6%	6.3%
Hospital-based ancillary department	2.2%	1.0%	2.4%
Skilled nursing/extended care facility	0.5%	2.0%	0.8%
University or college	4.0%	2.7%	9.7%
Public health department/community health agency	8.0%	3.0%	0.4%
Home health nursing agency	5.2%	0.6%	3.0%
Hospice	1.5%	1.0%	0.6%
Ambulatory care setting	8.1%	39.4%	7.5%
Occupational health/employee health	0.1%	0.1%	0.4%
School nursing (K-12)	7.5%	5.3%	0.9%
Mental health	1.6%	3.3%	4.0%
Forensic setting (correctional facility, prison, jail)	1.8%	1.0%	0.3%
Government agency (local, state, federal)	3.8%	1.8%	0.4%
Self employed	0.7%	1.3%	3.6%
Other category	8.8%	6.7%	6.8%
No Response	0.9%	1.7%	0.0%
Number of Cases	720	254	128

Note: Columns might not total 100% due to rounding. Other categories may include hospital nursing home units, long-term acute care, rehabilitation services, dialysis, telenursing, and case management. Data are weighted to represent all RNs with active licenses.

Tenure in Primary Nursing Position

Every survey of registered nurses has asked how long the respondent has been employed with their current principal employer. The responses have consistently shown a tendency toward high job turnover, as seen in Table 3.14. The largest share of registered nurses who live in California has been with their current employer for less than five years (45.2%). However, the mean number of years nurses have worked with their current employer has increased somewhat over time, from 7 years in 1990 to 8.7 years in 2010.

Table 3.14 Length of time that working registered nurses residing in California have been employed in their principal nursing position, by survey year

	1990	1993	1997	2004	2006	2008	2010
Less than 5 years	49.4%	50.4%	40.8%	47.1%	46.3%	46.1%	45.2%
5-9 years	22.1%	24.1%	24.8%	20.4%	21.4%	19.4%	22.7%
10-14 years	14.4%	14.1%	13.9%	13.2%	8.7%	8.2%	11.9%
More than 14 years	14.1%	11.3%	20.5%	19.3%	23.6%	26.3%	20.2%
Mean Number of Years	7.0	6.5	8.2	8.1	8.7	8.7	8.7
Number of cases	2,222	2,168	2,424	3,016	3,598	4,020	4,617

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Tenure with an employer varies by employment setting. Each row of Table 3.15 presents the distribution of job tenure of nurses in a specific employment setting. Ambulatory care departments of hospitals have the highest share of nurses employed for 15 or more years, with 35.5 percent of RNs in this setting reporting such a long tenure. Public and community health agencies also have a relatively high share of RNs with a long tenure (25.5%). Skilled nursing facilities exhibit the lowest employer tenures, with 61.8 percent of RNs who work in this setting having been with their employer for less than five years.

Table 3.15 Length of time that working registered nurses residing in California have been employed in their principal nursing position, by work setting, 2010

	Less than 5 years	5-9 years	10-14 years	15 or more years	No Response
Hospital, acute care department	45.5%	22.2%	10.0%	20.4%	2.0%
Hospital-based ambulatory	27.3%	23.5%	13.5%	35.5%	0.1%
Skilled nursing/extended care	61.8%	17.5%	12.8%	6.2%	1.8%
Public/community health agency	28.8%	24.0%	19.3%	25.5%	2.5%
Home health agency	48.1%	21.6%	14.3%	13.7%	2.3%
Ambulatory care setting	47.3%	23.6%	12.6%	14.2%	2.3%
Case/disease management company	42.2%	23.9%	10.0%	23.4%	0.6%
Number of Cases	1494	836	444	852	63

Note: Rows might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Job title is also associated with the length of time a nurse who lives in California has been with a current employer, as seen in Table 3.16. Nurses in front-line management positions tend to have the longest tenure with their current employer, suggesting that more nurses in leadership positions are being promoted within their organizations. However, nearly 51 percent of nurses in senior management positions report being with their current employer for less than five years; this may indicate that senior nurse leaders are often recruited from other organizations. Nearly 51 percent of nurses in staff nurse positions have been with their employers less than five years.

Table 3.16 Length of time that working registered nurses residing in California have been employed with their principal nursing employer, by job title, 2010

	Less than 5 years	5-9 years	10-14 years	15 or more years	No response
Direct patient care provider/staff nurse	50.9%	21.3%	9.5%	16.4%	1.9%
Senior management	50.7%	15.5%	18.2%	12.4%	3.3%
Front-line management	22.5%	24.6%	21.5%	31.4%	0.0%
Nurse Practitioner	40.8%	21.2%	16.5%	20.3%	1.3%
School Nurse	34.3%	30.2%	24.3%	9.3%	2.0%
Public Health Nurse	34.9%	25.7%	15.3%	21.4%	2.8%
Patient care coordinator/case manager/discharge planner	42.7%	28.7%	12.3%	14.7%	1.7%
Number of Cases	1498	775	402	667	61

Note: Rows might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Hours and Weeks Worked in Primary Job

In 2008 and 2010, registered nurses were asked to provide information about how much they work in their principal nursing position. Table 3.17 presents the number of weeks per year that nurses work in their principal position, by state of residence. Over 93.5 percent of California, residents work a full-year job, and 4.2 percent work in positions that are less than a full year. The share of non-California residents that works part-year jobs is slightly higher, at 7 percent. Note that the jobs of non-California residents are likely to be outside California; non-California residents are discussed in more detail below.

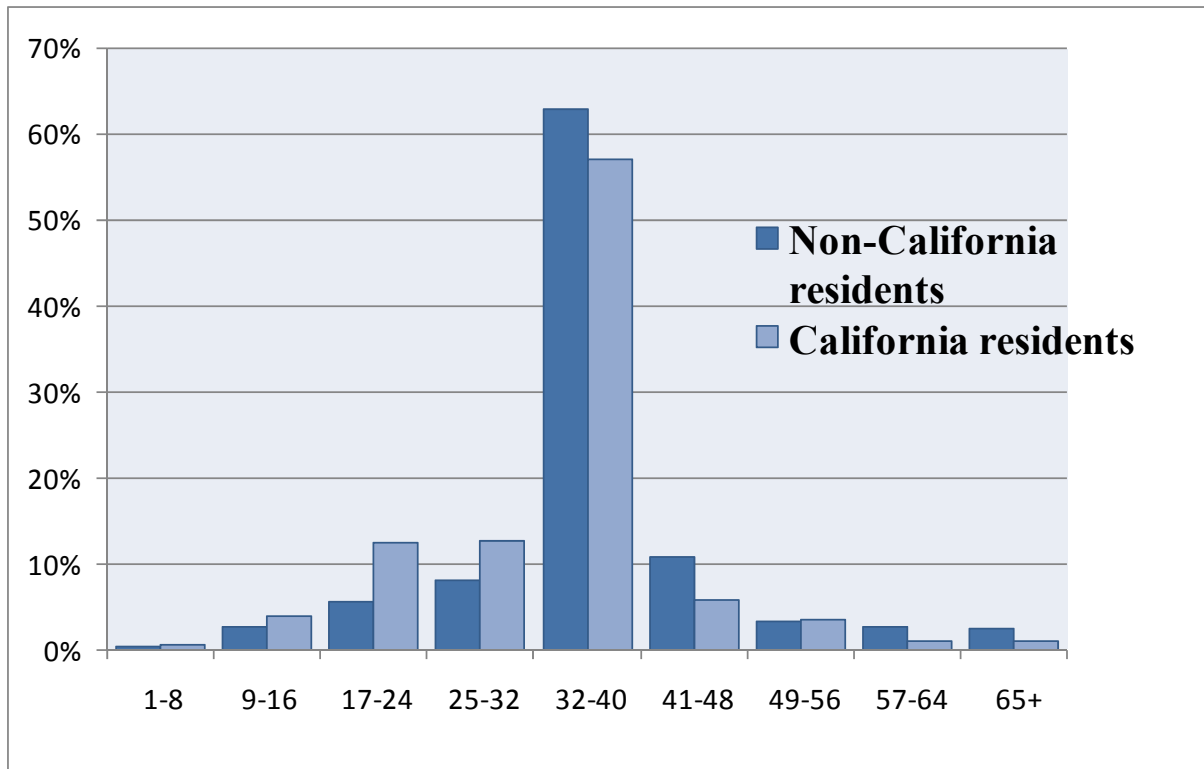
Table 3.17 Number of weeks per year registered nurses work in their primary nursing position, California residents and non-residents, 2010

	California residents	Non-California residents
46-52 weeks per year	93.5%	91.7%
36-45 weeks per year	3.1%	5.0%
Less than 36 weeks per year	1.1%	1.9%
No Response	2.3%	1.4%

Note: Number of total cases for both residents and non-residents=5,274 Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Figure 3.2 presents the distribution of hours worked per week in a primary nursing job for RNs with active California licenses, by whether they reside in California. Over 68 percent of nurses who live in California work more than 32 hours per week. The share of non-resident RNs who work more than 32 hours per week in a principal nursing position is higher, at 82.2 percent.

Figure 3.2 Distribution of hours per week in principal nursing position, for California residents and non-residents, 2010



Note: Number of cases for both residents and non-residents=5,274. Data are weighted to represent all RNs with active licenses.

The number of hours worked per week and per day varies with job title, as seen in Table 3.18. RNs in staff nurse positions averaged 10.3 hours per day and 34.9 hours per week. Staff nurses averaged 2.2 hours of overtime per week. In contrast, school nurses average 7.2 hours per day, and 32.1 hours per week; these figures indicate that school nurses work shorter days, but more days per week, than staff nurses do. Nurses in senior management positions work an average of 9.1 hours per day and 45.4 hours per week. Front-line managers average 40.2 hours of work per week. School nurses work the fewest overtime hours on average (1.0), and have the shortest average workweek.

Table 3.18 Average hours normally worked per day and per week by registered nurses residing in California, by job title, 2010

	Hours per day	Hours per week	Overtime per week
Direct patient care provider/staff nurse	10.3	34.9	2.2
Senior management, any setting	9.1	45.4	1.3
Front-line management	9.3	40.2	2.5
Charge Nurse	10.2	37.0	2.8
Nurse Practitioner	8.2	35.9	1.5
School Nurse	7.2	32.1	1.0
Public Health Nurse	8.7	36.5	1.4
Patient care coordinator/case manager/discharge planner	8.3	37.5	1.8

Note: All job titles in this table have more than 50 observations. Data are weighted to represent all RNs with active licenses.

Table 3.19 presents the average number of hours normally worked by nurses living in California, by work setting. Nurses employed in acute care departments of hospitals work an average of 10.8 hours per day, which is

the longest average workday of all the settings. The shortest workdays are seen in school nursing positions. The longest average workweeks are found in correctional facilities at 41.4 hours per week and hospice at 39.8 hours per week. Forensic and hospice settings have the highest average number of overtime hours per week (4.9 and 2.5 hours, respectively).

Table 3.19 Average hours normally worked per day and per week for registered nurses residing in California, by work setting, 2010

	Hours per day	Hours per week	Overtime per week
Hospital, acute care department	10.8	36.0	2.3
Hospital, ambulatory care department	8.8	35.9	1.9
Skilled nursing/extended care facility	8.7	38.0	2.0
University or college	8.6	35.9	1.1
Public health department/community health agency	8.5	37.3	1.0
Home health nursing agency	7.5	33.6	1.6
Hospice	8.7	39.8	2.5
Ambulatory care setting	8.3	33.0	1.5
School nursing (K-12)	7.3	32.9	1.0
Mental health	8.2	34.3	0.8
Forensic setting (correctional facility, prison, jail)	8.5	41.4	4.9

Note: Data are weighted to represent all RNs with active licenses.

Nurses were asked to report the percent of time spent on each of several functions: direct patient care and charting, indirect patient care (consultation, planning, evaluating care), teaching (including preparation time), supervision, patient education, non-nursing tasks (housekeeping, etc.), administration, and “other.” As seen in Table 3.20, there was wide variation in the share of time spent on direct patient care, with the largest share of RNs saying they spent 61 to 80 percent of their time on this activity (28.6%).

Table 3.20 Share of time nurses residing in California spent on specific job functions during a typical work week, 2010

	0%	1-20%	21-40%	41-60%	61-80%	81-100%
Direct patient care & charting	13.2%	9.8%	9.3%	19.2%	28.6%	14.8%
Indirect patient care	37.2%	47.6%	5.2%	2.3%	1.4%	1.3%
Teaching	49.9%	40.2%	2.1%	0.8%	0.6%	1.3%
Patient education	18.8%	62.7%	10.6%	2.3%	0.4%	0.2%
Supervision	63.8%	20.2%	3.8%	3.0%	2.4%	1.7%
Administration	80.9%	10.2%	1.6%	1.3%	0.4%	0.7%
Non-nursing tasks	53.1%	40.6%	1.0%	0.2%	0.1%	5.0%
Research	81.9%	12.5%	0.3%	0.1%	0.0%	0.1%
Other	86.0%	5.2%	1.2%	0.7%	0.3%	1.7%

Number of cases=4,726. 5% of the sample of employed California residing RNs did not respond to these questions. Data are weighted to represent all RNs with active licenses.

Geographic Location of Primary Position

Nurses were asked to provide the city, county, and zip code of their primary nursing position, and these were sorted by the urban nature of the location. As seen in Table 3.21, most RNs who lived in California reported their principal nursing position was in a large metropolitan area with over one million residents, such as the Los Angeles region (69.0%). Another 18.7 percent worked in large metropolitan counties with over 400,000 residents, such as Monterey or Fresno. Over 11 percent work in smaller metropolitan counties. Less than one percent of RNs work in rural areas or small cities and towns.

Table 3.21 Urban/rural status of locations where RNs residing in California were primarily employed, by survey year

	1990	1993	1997	2004	2006	2008	2010
Consolidated metropolitan area (over 1 million pop)	*	*	*	*	84.1%	84.0%	69.0%
Large metropolitan county (400,000 to 1 million)	*	*	*	*	7.6%	8.1%	18.7%
Small metropolitan county (50,000 to 400,000)	*	*	*	*	4.4%	5.1%	11.6%
Large central city (over 250,000 population)	38.8%	40.5%	41.4%	37.3%	*	*	*
Suburbs of a large city	17.6%	15.6%	14.1%	15.9%	*	*	*
Medium sized city (50,000-250,000)	28.7%	30.8%	31.0%	22.1%	*	*	*
Suburbs of a medium sized city	2.9%	3.1%	2.9%	5.7%	*	*	*
Population less than 49,999	11.6%	9.8%	10.1%	18.1%	4.0%	2.8%	0.7%
Other	0.4%	0.1%	0.5%	0.9%	*	*	*
Number of cases	2,197	2,147	2,403	3,557	3,427	3,916	4,606

* Data was not tabulated in this category.

Note: The 2004 data include nurses who do not reside in California. Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses. Population less than 49,999 includes small cities, towns, and rural areas. In 2006 and 2008, geographic location for RNs was determined by metropolitan statistical areas (MSAs). In 2010, the estimated census population was used to perform the analysis.

Over 61 percent of California’s working RNs commute 10 miles or more each way to their jobs, as seen in Table 3.22. Very long commutes of over 40 miles each way are made by 7.1 percent of RNs. There has been little change in the average commuting distance since 2004.

Table 3.22 Number of miles that registered nurses residing in California commute one way to their primary nursing jobs, by survey year

	1990	1993	1997	2004	2006	2008	2010
Less than 5 miles	21.5%	21.6%	16.4%	16.9%	16.5%	17.7%	17.7%
5-9 miles	24.0%	22.2%	20.5%	21.9%	23.0%	21.4%	20.7%
10-19 miles	31.8%	30.1%	31.7%	31.5%	30.7%	30.7%	31.8%
20-39 miles	18.4%	20.2%	24.2%	23.0%	22.7%	23.9%	22.7%
40 or more miles	4.3%	5.9%	7.2%	6.6%	7.2%	6.4%	7.1%
Mean in Miles	13.1	14.4	15.9	15.9*	15.8*	15.8*	15.6*

* Persons listing commutes greater than 150 miles were not considered to be making daily commutes in these surveys.

Note: 2010 number of cases = 4,203. Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Use of Health Information Technologies

Nurses were asked whether they use specific health information systems in their principal nursing position, and about their experience with these systems. There were increases between 2008 and 2010 in the shares of RNs who use nearly every type of health information technology, as seen in Figure 3.3. Over half of RNs who live in California use electronic patient records, and 56.9 percent report using records that include electronic nurse charting. Sixty-three percent of RNs use computerized laboratory reports. Fewer nurses in 2010 used computerized medical distribution systems than in 2008 (49.6% vs. 54.1%).

Nurses were asked whether they think the computer systems that they use work well. Table 3.23 presents the responses of nurses who reported working with a health information system from 2006 through 2010. There has been an increase in the share of RNs that reports that systems work well or are at least generally helpful, from 73.6 percent in 2006 to 79.9 percent in 2010. In 2010, only 3.7 percent of RNs thought electronic systems

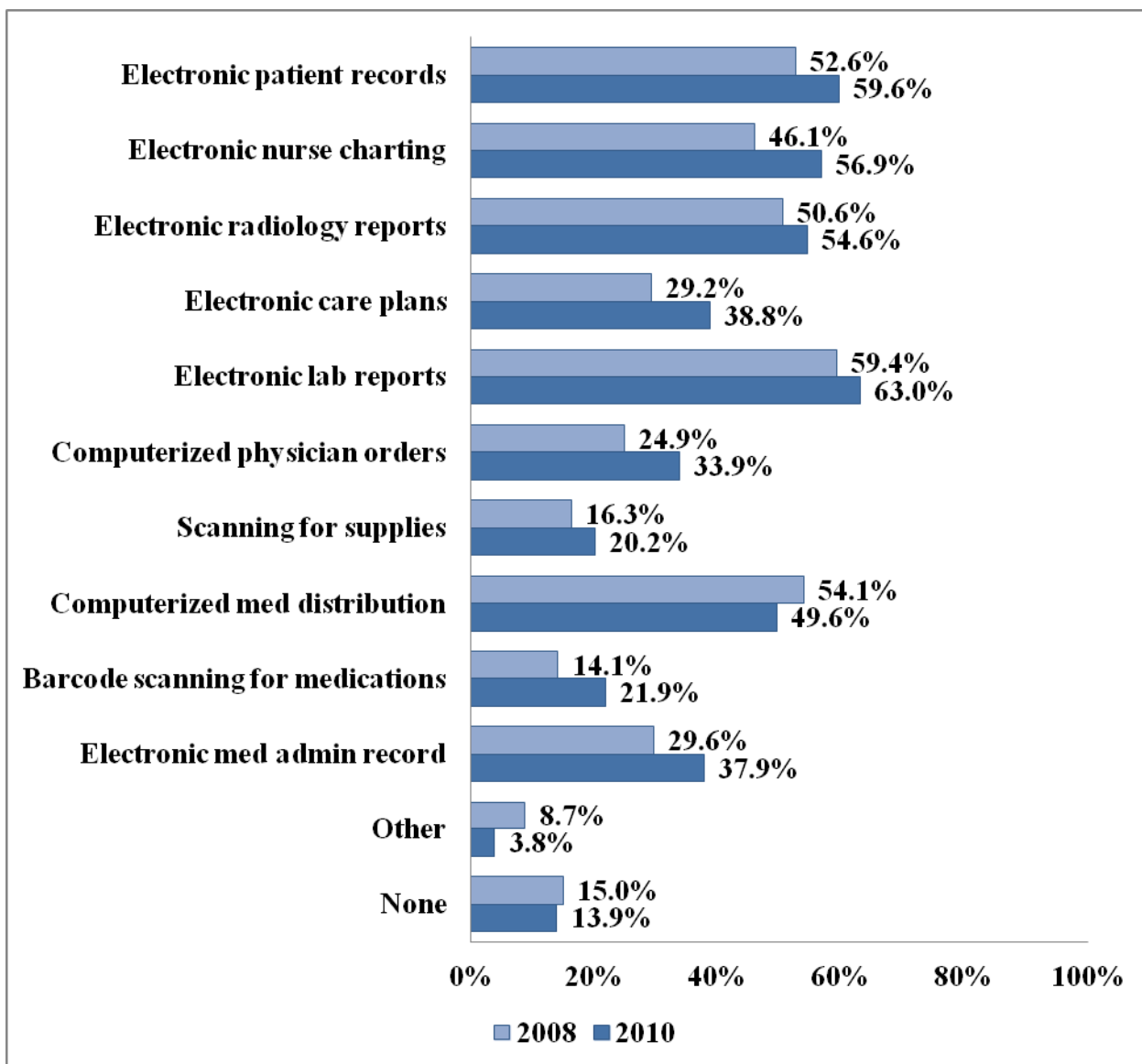
interfered with their delivery of patient care, which is an improvement over the 7.4 percent of RNs in 2006 who thought systems interfered with delivery of care.

Table 3.23 Perceived usefulness of computerized health information systems, among working nurses who use them, California residents, 2006-2010

	2006	2008	2010
All systems work well	15.7%	12.3%	16.4%
Systems are generally helpful, but have some flaws	57.9%	61.0%	63.5%
Systems have problems that affect my work	19.1%	20.1%	16.4%
Systems interfere with my delivery of care	7.4%	6.5%	3.7%

Note: 2010 number of cases=3,856. Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Figure 3.3 Use of computerized health information systems in a principal nursing position, for California residents, 2008 and 2010

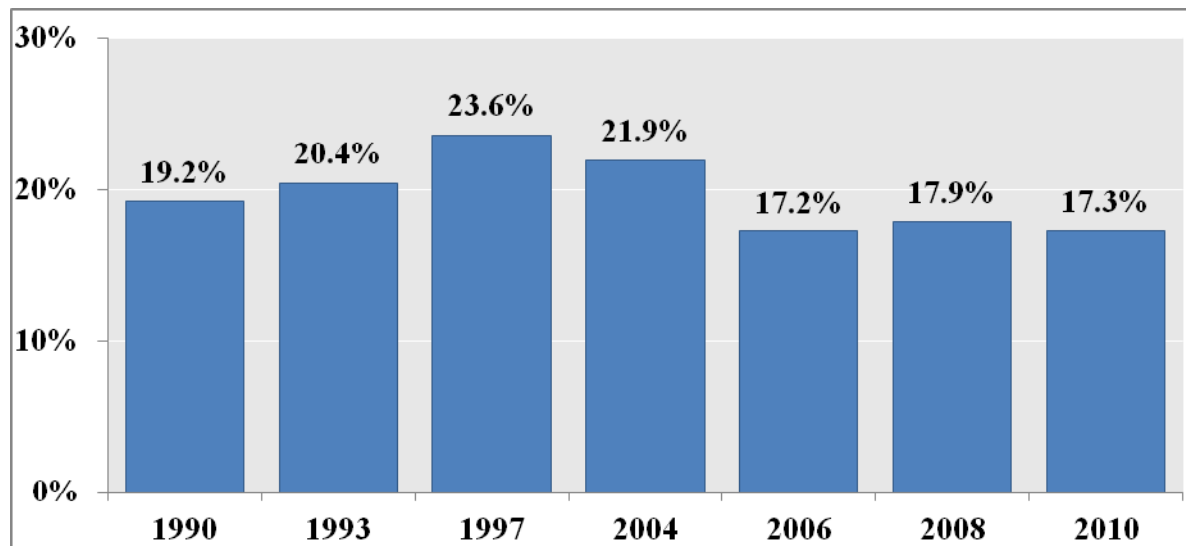


Note: 2010 Number of cases=4,640. Data are weighted to represent all RNs with active licenses.

Additional Jobs Held by RNs

In 2010, over 17 percent of RNs who worked and resided in California reported they held more than one nursing position (Figure 3.4). This rate of holding multiple positions is somewhat lower than reported from 1990 through 2004. Among RNs who hold additional positions, 75.6 percent hold one more job, while nearly 24 percent have two or more additional positions (Table 3.24).

Figure 3.4 Percentage of working registered nurses residing in California that holds more than one nursing position, by survey year



Note: 2010 number of cases=4,628. Data (2006-2010) are weighted to represent all RNs with active licenses..

Table 3.24 Number of additional jobs held by RNs who hold multiple positions and reside in California, by survey year

	1990	1993	1997	2004	2006	2008	2010
One	83.7%	88.4%	83.4%	84.8%	76.7%	80.3%	75.6%
Two	13.9%	10.3%	14.7%	12.3%	20.9%	18.7%	21.3%
Three or more	2.4%	1.3%	1.9%	2.9%	2.4%	1.0%	2.2%
Number of cases	424	447	518	784	627	652	696

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Nurses were asked to report the types of employment relationships they have for their additional nursing positions (Table 3.25). Most California residents and non-residents reported that they were regular employees in their additional nursing position(s). Over thirteen percent of California residents were employed through a temporary agency for at least one of their additional positions, and 11.4 percent were self-employed. Among RNs residing outside California, 33.8 percent were employed through a temporary agency, and 11.9 percent reported that they were self-employed. A larger fraction of nurses outside of California reported being travel nurses at 12.7 percent compared to 2.5 percent of California Nurses.

Table 3.25 Type of employment relationships for non-primary nursing positions, for California residents and non-residents, 2006-2010

	California residents			Non-California residents		
	2006	2008	2010	2006	2008	2010
Regular employee	72.0%	73.7%	77.1%	55.7%	60.8%	50.3%
Employed through a temporary service agency	17.4%	15.3%	13.3%	41.4%	30.7%	33.8%
Self-employed	17.1%	14.1%	11.4%	11.0%	11.1%	11.9%
Employed through traveling agency	*	*	2.5%	*	*	12.7%

Note: The 2010 number of in-state cases=690. The 2010 number of out of state cases=95. Columns will not total 100% because respondents could select multiple categories, due to holding more than one additional job. Data are weighted to represent all RNs with active licenses.

*Question not asked in this survey year.

A large share of RNs works as hospital staff for their additional nursing positions, as seen in Table 3.26. About 40 percent of California residents and 53.2 percent of non-California residents report that at least one of their secondary nursing positions is in a hospital. Eleven percent of California's nurses are engaged in teaching nursing or students in other health professions in a secondary position, while 5.2 percent of non-residents teach. Over fifteen percent of residents work in ambulatory care, and 7.6 percent do home health or hospice work.

Table 3.26 Type of work done in non-primary nursing positions, for California residents and non-residents, 2006-2010

	California residents			Non-California residents		
	2006	2008	2010	2006	2008	2010
Hospital staff	43.7%	44.0%	40.4%	58.5%	53.5%	53.2%
Public health/community health	2.0%	1.1%	1.4%	3.8%	4.3%	0.8%
Mental health/substance abuse	3.0%	3.1%	3.2%	3.4%	2.9%	4.6%
Nursing home/skilled nursing facility staff	4.6%	8.7%	6.5%	13.8%	9.8%	7.0%
Home health or hospice	8.5%	7.5%	7.6%	3.0%	0.0%	5.7%
Teaching health professions/nursing students	11.3%	9.4%	11.4%	7.8%	3.6%	5.2%
Ambulatory care, school health, occupational health	8.2%	8.9%	15.5%	7.8%	6.3%	9.6%
Long term acute	*	*	2.5%	*	*	1.9%
School health	*	*	1.4%	*	*	0.0%
Telehealth	*	*	2.0%	*	*	4.9%
Self-employed	*	*	3.8%	*	*	4.1%
Other	32.3%	26.8%	17.2%	23.6%	25.9%	15.0%

Note: The 2010 number of in-state cases=690. The 2010 number of out of state cases=95. Columns will not total 100% because respondents could select multiple categories, due to holding more than one additional job. Data are weighted to represent all RNs with active licenses. In 2010, school health was listed twice in survey.

*No Data Available

Employment through Temporary Agencies

Nurses were asked whether they worked with a temporary agency, traveling agency, or registry, and were asked specific questions about their temporary/traveling work. This section of this chapter focuses on nurses who work for temporary or traveling agencies and who reside in California. Nurses who live outside California are described in detail later in this chapter.

Table 3.27 presents the shares of nurses with active California licenses who work for temporary or traveling agencies. In 2006 and 2008, respondents could select either a temporary agency or traveling agency, but not both; in 2010, respondents could indicate both a temporary and a traveling agency and thus totals do not add to 100 percent in that year. Only 3.3 percent of RNs residing in California work for a temporary agency or registry, and less than one percent work for a traveling agency. In comparison, 8.7 percent of non-California resident RNs

with active California licenses work for traveling agencies, and 7.8 percent work for temporary agencies or registries.

Table 3.27 Shares of nurses that work with a temporary agency, traveling agency, or registry for any job, 2006-2010

	California residents			Non-California residents		
	2006	2008	2010	2006	2008	2010
Temporary agency or registry	3.4%	2.9%	3.3%	9.5%	6.6%	7.8%
Traveling agency	1.2%	1.2%	0.6%	19.8%	15.0%	8.7%
Neither temporary nor traveling agency	95.4%	95.9%	96.3%	70.7%	78.5%	84.8%

Note: 2010 Total number of cases for both residents and non-residents=5,013. Data are weighted to represent all RNs with active licenses. In 2010, respondents could select both a temporary and traveling agency so the total will not add to 100%. Columns might not total 100% due to rounding in 2006 and 2008.

Nurses were asked the reasons they work for a temporary agency, traveling agency, or registry; the findings are presented in Table 3.28. For nurses residing in California in 2010, control of their schedule was the dominant reason (52.6%), followed by supplemental income (46.2%). Other common reasons for temporary and traveling work were to have control of work location (31.1%), wage (28.0%), and to maintain skills or get experience (25.9%). Sixteen percent said they were doing agency/registry work while waiting for a desirable permanent position, and another thirteen percent were doing such work because they were unable to find a permanent RN position or they did not have enough work hours at their primary job.

Table 3.28 Reasons why working registered nurses residing in California chose to work for temporary agencies, traveling agencies, or registries, by survey year

	1990	1993	1997	2004	2006	2008	2010
Wages	75.0%	68.5%	59.4%	58.4%	59.5%	58.6%	28.0%
Benefits	4.3%	2.1%	4.4%	3.1%	5.7%	7.9%	1.1%
Control of schedule	85.3%	68.5%	56.9%	60.1%	57.2%	56.9%	52.6%
Control of work location	58.6%	32.2%	30.6%	42.3%	54.1%	39.8%	31.1%
Supplemental income	*	*	*	48.2%	36.6%	42.6%	46.2%
Control of work conditions	*	*	*	26.3%	26.1%	24.2%	9.3%
Maintain skills/get experience	*	*	*	25.6%	27.3%	22.5%	25.9%
Waiting for a desirable permanent position	6.0%	14.4%	19.4%	15.0%	12.8%	16.1%	16.5%
Travel/see other parts of the country	*	*	*	*	15.4%	15.8%	6.7%
Unable to find permanent RN job/insufficient primary hours	*	*	*	*	*	*	13.8%
Other	24.1%	17.8%	21.9%	10.8%	16.1%	12.9%	5.3%
Number of cases	116	146	160	198	114	125	121

Note: Columns will not total 100% because respondents could select multiple items. Data (2006-2010) are weighted to represent all RNs with active licenses.

*Data not available.

Income and Earnings of Registered Nurses

Nurse incomes have risen dramatically since 1990. In 2006, 2008, and 2010, RNs were asked to report annual earnings from their primary position, and each of their additional nursing positions. In the 1990, 1993, 1997, and 2004 surveys, nurses were asked to report their annual income by category. Average earnings were estimated by assuming nurses earned the midpoint of the income category for the surveys. The income categories changed for the 2004 survey to accommodate for income growth.

Table 3.29 presents the total annual income received from all nursing positions by currently working RNs residing in California, for each survey year, and Figure 3.5 depicts the 2010 data. As seen in this table, there was modest growth in nurse earnings between 1993 and 1997, rapid growth between 1997 and 2008, and modest growth between 2008 and 2010. The slow growth in earnings between 2008 and 2010 is not surprising because reports of nursing shortage abated during this period. Twenty-two percent of RNs reported that they earned \$100,000 or more in 2010 and over half (54.5%) of nurses reported earning between \$60,000 and \$100,000 in 2010.

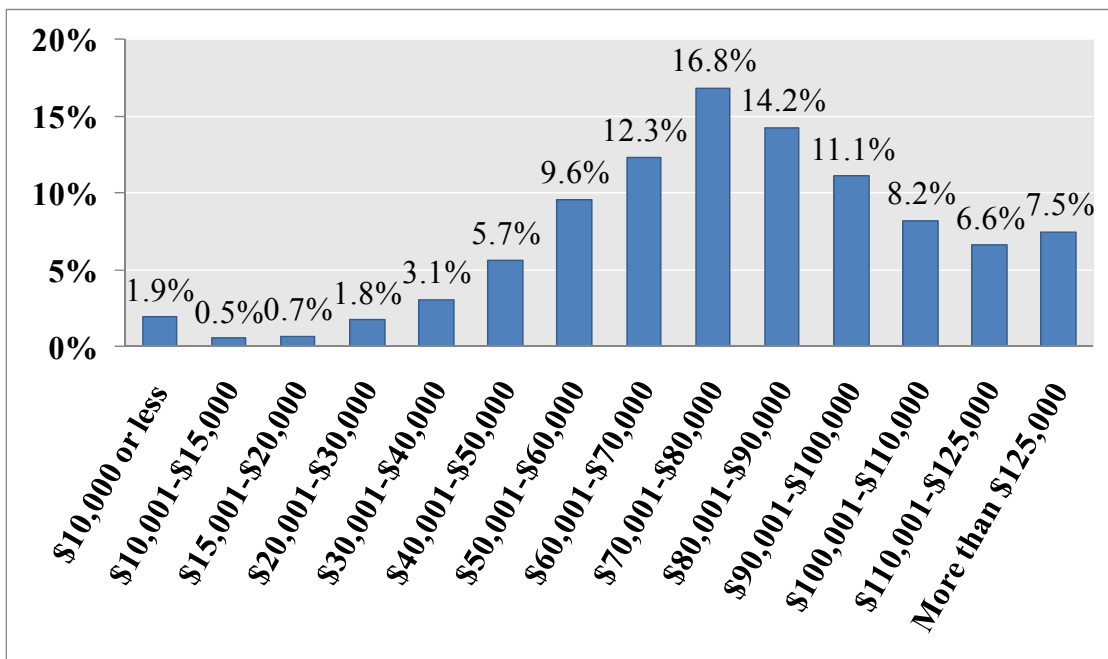
Table 3.29 Total annual income received from all nursing positions by currently working registered nurses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010
\$20,000 or less	18.0%	10.2%	10.0%	4.9%	4.6%	2.4%	3.1%
\$20,001 to \$30,000	27.6%	11.1%	9.0%	3.5%	2.1%	1.8%	1.8%
\$30,001 to \$40,000	33.2%	24.3%	20.0%	8.6%	5.5%	3.5%	3.1%
\$40,001 to \$55,000	18.3%	35.9%	34.5%	*	*	*	*
\$40,001 to \$50,000	*	*	*	14.2%	7.8%	6.0%	5.7%
\$50,001 to \$60,000	*	*	*	20.2%	12.5%	10.0%	9.6%
\$55,001 to \$75,000	2.3%	15.3%	22.6%	*	*	*	*
\$60,001 to \$70,000	*	*	*	16.4%	17.8%	13.8%	12.3%
\$70,001 to \$80,000	*	*	*	12.2%	15.6%	17.0%	16.8%
More than \$75,000	0.5%	3.3%	4.5%	*	*	*	*
\$80,001 to \$90,000	*	*	*	8.5%	12.8%	14.1%	14.2%
\$90,001 to \$100,000	*	*	*	4.5%	8.0%	11.6%	11.1%
\$100,001 to \$110,000	*	*	*	2.2%	5.6%	6.6%	8.2%
\$110,001 to \$125,000	*	*	*	1.4%	3.5%	6.6%	6.6%
More than \$125,000	*	*	*	1.1%	4.1%	6.6%	7.5%
Mean Annual Income	\$31,504	\$42,163	\$45,073	\$59,937	\$73,542	\$81,428	\$82,134
Number of cases	2,186	2,141	2,420	2,885	3,447	3,728	3,738

* Surveys in 1990, 1993, 1997, and 2004 asked nurses to report by income category. The categories changed in 2004. The 2006 survey asked nurses to report exact income for each nursing position.

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Figure 3.5 Total annual income received from all nursing positions by currently working registered nurses residing in California, 2010



Note: Number of cases=3,738. Data are weighted to represent all RNs with active licenses.

Annual nursing incomes vary by region of California, as seen in Table 3.30. Total nursing incomes are highest in the San Francisco Bay Area (\$93,547), and lowest in the counties north of Sacramento (\$70,546). Between 2006 and 2010, the Central Valley and Sierra regions experienced the greatest increase in average earnings from principal nursing position, rising 24.8 percent (\$16,284). The least growth occurred in the Border counties, where average earnings from the principal position grew only 13.1 percent (\$8,820). In many regions of California, earnings from all nursing positions did not increase appreciably between 2008 and 2010; in fact, they were stable for RNs employed in the Central Coast, Sacramento, and San Francisco Bay areas, but declined in the Inland Empire.

Table 3.30 Annual income received from nursing by currently working registered nurses, by region, 2006-2010

	Primary nursing position			All nursing positions		
	2006	2008	2010	2006	2008	2010
Northern counties	\$60,160	\$66,291	\$70,763	\$61,868	\$69,142	\$70,546
Sacramento	\$72,594	\$79,453	\$82,498	\$75,508	\$82,122	\$82,232
San Francisco Bay Area	\$78,319	\$89,984	\$93,406	\$82,514	\$93,564	\$93,547
Central Valley & Sierra	\$65,689	\$77,730	\$81,973	\$70,252	\$79,995	\$81,553
Central Coast	\$65,715	\$74,801	\$76,563	\$69,208	\$76,809	\$76,536
Los Angeles	\$67,207	\$74,188	\$79,381	\$71,822	\$77,167	\$79,288
Inland Empire	\$66,938	\$77,904	\$77,913	\$70,602	\$81,176	\$77,786
Border Counties	\$67,188	\$71,226	\$76,008	\$70,046	\$72,850	\$75,895
Outside California	\$59,696	\$64,198	\$67,847	\$62,467	\$67,026	\$68,158

Note: Data are weighted to represent all RNs with active licenses.

Nursing incomes for California residents vary with age, as seen in Table 3.31. Average incomes are highest for the group of nurses between 55 and 64 years old. Annual earnings are lowest for nurses 65 years and older, but this may be related to these nurses working fewer hours, on average.

Table 3.31 Total annual income received from all nursing positions by currently working registered nurses residing in California, by age group, 2006-2010

	2006	2008	2010
Under 35 years	\$68,307	\$74,632	\$74,982
35-44 years	\$75,113	\$81,318	\$80,008
45-54 years	\$78,530	\$84,711	\$85,718
55-64 years	\$74,411	\$85,696	\$88,169
65 years and older	\$52,888	\$65,790	\$71,636

Note: Data are weighted to represent all RNs with active licenses.

There is some variation in average annual nursing income by education. As seen in Table 3.32, nurses with graduate degrees enjoy higher annual nursing income than other RNs, averaging \$91,225. RNs with baccalaureate nursing degrees earn higher average incomes than RNs whose highest education level is a diploma or associate degree. Nurses with special certifications also have higher annual incomes, with clinical nurse specialists averaging \$89,953 per year, public health nurses averaging \$83,746 per year, and nurse practitioners averaging \$88,087 per year.

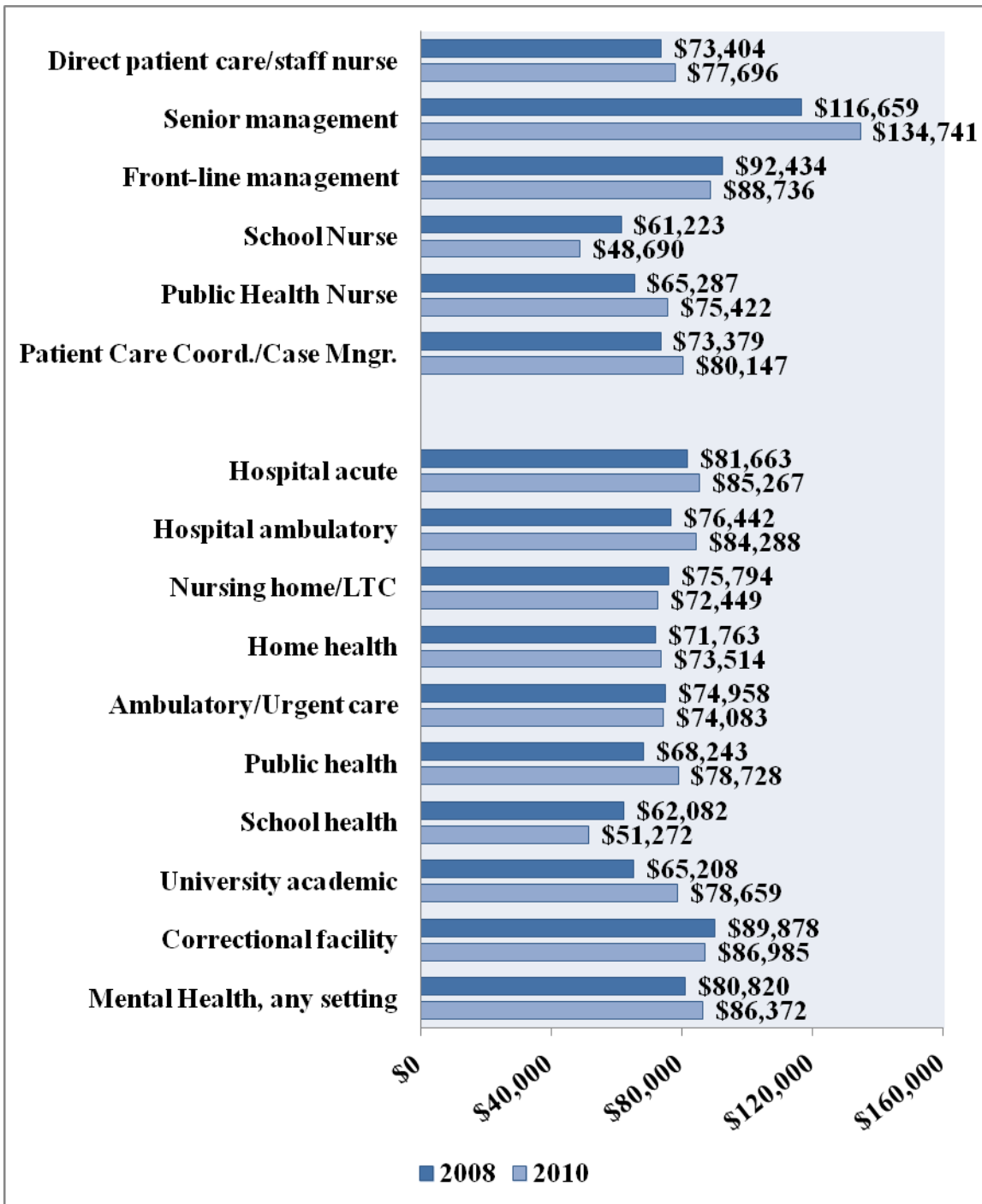
Table 3.32 Total annual income received from all nursing positions by currently working registered nurses residing in California, by highest level of nursing education and specialty certification, 2006-2010

	2006	2008	2010
Diploma	\$70,840	\$79,824	\$83,209
Associate Degree	\$70,804	\$76,995	\$78,228
Baccalaureate Degree	\$75,017	\$82,362	\$83,441
Master's Degree	\$82,638	\$93,378	\$91,225
Public Health Nurse	\$72,285	\$81,413	\$83,746
Nurse Practitioner	\$73,138	\$88,135	\$88,087
Clinical Nurse Specialist	\$82,323	\$88,077	\$89,953

Note: There are not enough doctorally prepared nurses to calculate their average earnings. Data are weighted to represent all RNs with active licenses.

Job title and work setting are associated with differences in annual nursing income, as seen in Figure 3.6. For nurses residing in California, nurses in senior management have incomes from their principal nursing position averaging over \$134,000. In contrast, school nurses reported annual earnings of under \$55,000. RNs employed in acute care departments of hospitals report an average income of \$85,267.

Figure 3.6 Income received from principal nursing position by currently working registered nurses residing in California, by job title and work setting, 2008 and 2010



Note: Data are weighted to represent all RNs with active licenses.

The total household incomes of currently working RNs residing in California are examined in Table 3.33. The income categories were revised in 2006. The household incomes of nurses have risen since 1990, and by 2010, over 30 percent of working RNs who lived in California had household incomes over \$150,000.

Table 3.33 Total household incomes of currently working registered nurses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010
Less than \$30,000	13.3	5.1	5.5	2.1	1.0%	0.3%	0.7%
\$30,001 to \$40,000	19.1%	10.3%	7.5%	2.8%	*	*	*
\$30,000 to \$44,999	*	*	*	*	3.9%	1.6%	1.4%
\$40,001 to \$55,000	23.0%	19.7%	18.1%	*	*	*	*
\$40,001 to \$50,000	*	*	*	5.5%	*	*	*
\$45,000 to \$59,999	*	*	*	*	6.6%	3.2%	3.0%
\$50,001 to \$60,000	*	*	*	8.7%	*	*	*
\$55,001 to \$75,000	24.3%	27.5%	25.1%	*	*	*	*
\$60,001 to \$70,000	*	*	*	9.9%	*	*	*
\$60,000 to \$75,000	*	*	*	*	13.8%	10.0%	9.0%
\$70,001 to \$80,000	*	*	*	10.9%	*	*	*
More than \$75,000	20.4%	37.3%	43.7%	*	*	*	*
\$75,000 to \$99,999	*	*	*	*	20.5%	20.1%	18.6%
\$80,001 to \$90,000	*	*	*	10.0%	*	*	*
\$90,001 to \$100,000	*	*	*	10.9%	*	*	*
\$100,001 to \$110,000	*	*	*	10.9%	*	*	*
\$100,000 to \$124,999	*	*	*	*	21.8%	23.4%	22.6%
\$110,001 to \$125,000	*	*	*	8.8%	*	*	*
More than \$125,000	*	*	*	19.7%	*	*	*
\$125,000 to \$149,999	*	*	*	*	13.5%	13.9%	14.4%
\$150,000 to \$174,999	*	*	*	*	8.6%	11.5%	11.1%
\$175,000 to \$199,999	*	*	*	*	4.3%	6.1%	6.9%
\$200,000 or more	*	*	*	*	6.0%	10.0%	12.2%
Number of cases	2,182	2,128	2,415	2,864	3,608	3,838	4,323

* Income categories changed in 2004 and 2006.

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Earnings from nursing are increasingly important to the households of nurses (Table 3.34). In 1990, 36 percent of RNs reported that their nursing income accounted for more than 75 percent of their household's income. In 2010, 48.1 percent of nurses said their nursing income comprised at least 80 percent of household income.

Table 3.34 Percentage of total household income that was derived from nursing for currently working registered nurses residing in California, by survey year

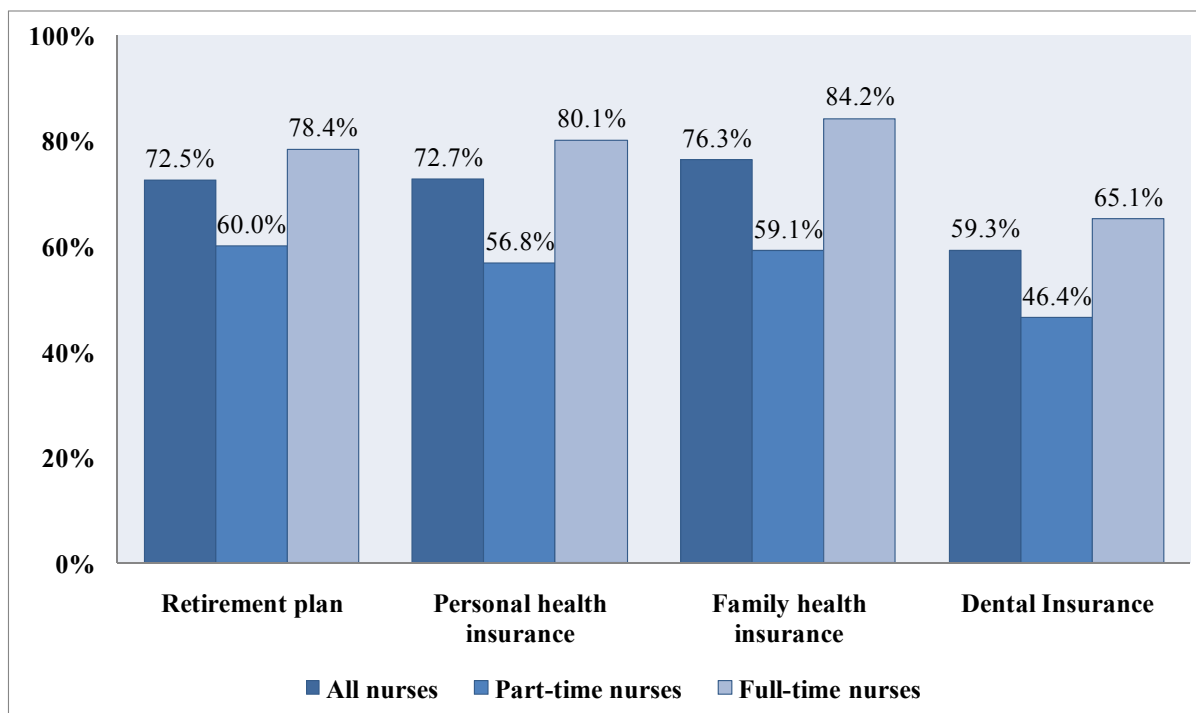
	1990	1993	1997	2004	2006	2008	2010
Less than 25 percent	13.2%	8.7%	9.3%	8.1%	*	*	*
25 to 50 percent	32.3%	28.4%	26.2%	24.3%	*	*	*
51 to 75 percent	18.4%	25.1%	23.7%	24.7%	*	*	*
76 to 99 percent	8.8%	10.9%	13.2%	15.0%	*	*	*
Less than 20 percent	*	*	*	*	4.1%	3.4%	3.9%
20 to 39 percent	*	*	*	*	9.7%	9.3%	7.7%
40 to 59 percent	*	*	*	*	23.9%	21.5%	20.0%
60 to 79 percent	*	*	*	*	17.7%	19.5%	20.4%
80 to 99 percent	*	*	*	*	14.6%	13.9%	13.8%
100 percent	27.3%	26.9%	27.6%	27.9%	30.1%	32.5%	34.3%
Number of cases	2,209	2,150	2,448	2,915	3,676	3,983	4,568

Note: Percent of income from nursing was reported by category. The categories changed in 2006. Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses. *No Data Available

Benefits Received by Registered Nurses

As presented in Figure 3.7, over 70 percent of RNs receive personal health insurance, family health insurance, and/or a retirement plan from their employer. Nearly 60 percent received dental insurance from their employer. Nurses working part-time are much less likely to receive family insurance, health, and dental benefits than are full-time RNs.

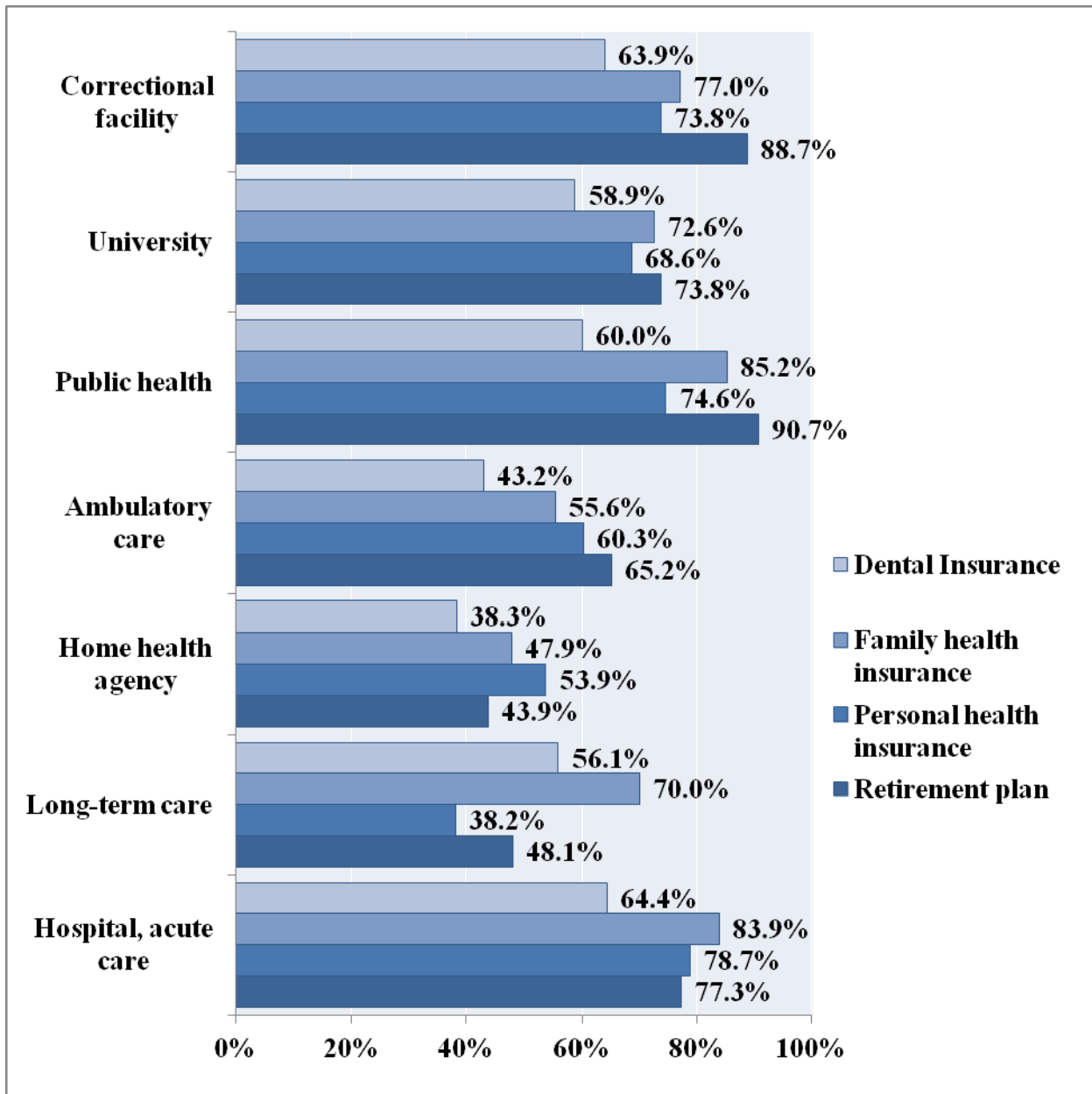
Figure 3.7 Benefits received from all nursing positions by currently working registered nurses residing in California, 2010



Note: Number of cases=4,726. Data are weighted to represent all RNs with active licenses.

Receipt of fringe benefits from employers varies by work setting, as seen in Figure 3.8. Nurses working in public health agencies are most likely to receive benefits, with 90.7 percent having a retirement plan and 85.2 percent being offered family health insurance. Only 47.9 percent of RNs working for home health agencies have family health insurance and only 43.9 percent report having retirement plans provided by their employer.

Figure 3.8 Benefits received by currently working registered nurses residing in California, by setting of principal nursing position, 2010



Note: Number of cases=4,726. Data are weighted to represent all RNs with active licenses.

Nurses Who Live Outside California

Nearly 15 percent of RNs with active California licenses live in other states (51,434 RNs in 2010). Table 3.35 presents information about the employment of nurses with California licenses who lived outside the state, from 2004 through 2010. In 2010, most out-of-state nurses (64.4%) did not work in California in the year prior to completing the survey. Over 11 percent had worked in California, but subsequently moved out of state. Sixteen percent worked in California as a traveling nurse. Seven percent worked in telenursing for a California employer or serving California patients. A small share commutes to California from a neighboring state such as Nevada (2.0%).

Table 3.35 Employment in California during the past twelve months of registered nurses with active California licenses who are currently employed and residing outside of California, 2004-2010

	2004	2006	2008	2010
Did not work as an RN in California	43.1%	58.0%	59.3%	64.4%
Worked as an RN in California, but subsequently moved out of the state	16.2%	15.7%	15.7%	11.4%
Worked as an RN in California for a temporary/traveling agency/registry	23.6%	19.9%	19.5%	16.3%
Worked as RN for out-of-state telenursing/telemedicine employer w/ Calif. clients	4.4%	5.9%	6.0%	7.4%
Worked as an RN for a California employer in a telenursing capacity	1.9%	2.2%	1.4%	2.7%
Lived in a border state and commuted to California to work as an RN	2.1%	3.2%	2.6%	2.0%
Other	9.4%	*	*	*

Note: 2010 number of cases=452. Columns may total more than 100% because respondents were allowed to select more than one category. Data (2006-2010) are weighted to represent all RNs with active licenses.

* Question not asked in survey.

Nurses residing outside California who worked for temporary or traveling agencies in the previous 12 months reported that they worked in California an average of 2.1 months and 39.7 hours per week, as seen in Table 3.36. The number of months worked in California was lower in 2010 than in 2006 or 2008.

Table 3.36 Average months per year and hours per week worked by RNs residing outside California who worked in California for a temporary agency in the previous year, 2006 and 2008

	2006	2008	2010
Months worked in California	7.6	5.1	2.1
Hours worked in usual week (average)	37.4	41.0	39.7
Number of cases	82	95	74

Note: Data are weighted to represent all RNs with active licenses.

Among nurses who lived outside California, 58.8 percent report wages as a reason for working in California on a temporary basis (Table 3.37). The share of RNs noting that wages influenced their choice of temporary work rose between 2006 and 2008 from 58.8 to 74.1 percent and dropped back to 58.8 percent in 2010. Other reasons frequently noted included control of work schedule (57.6%), control of work location (54.6%), and to travel or see other parts of the country (49.0%). Sixteen percent reported they were a temporary or traveling nurse because they could not find a permanent RN position or their primary job did not offer enough hours. The fraction of RNs reporting they work for registries because they need supplemental income, or are waiting for a desirable permanent position increased in 2008 and again in 2010.

Table 3.37 Reasons why registered nurses who reside outside California and worked in California the previous year chose to work for temporary/traveling agencies or registries, 2006-2010

	2006	2008	2010
Wages	58.8%	74.1%	58.8%
Benefits	16.0%	14.3%	12.0%
Control of schedule	42.7%	61.1%	57.6%
Control of work location	52.4%	64.3%	54.6%
Supplemental income	7.9%	25.1%	29.7%
Control of work conditions	21.3%	34.6%	31.4%
Maintain skills/get experience	22.0%	34.4%	41.8%
Waiting for a desirable permanent position	15.3%	17.7%	25.4%
Travel/see other parts of the country	65.7%	72.7%	49.0%
Unable to find RN position/not enough hours at primary job	*	*	16.0%
Other	15.1%	4.6%	6.4%
Number of cases	55	83	68

Note: Columns will not total 100% because respondents could select multiple items. Data are weighted to represent all RNs with active licenses.

*Item was not included in the survey that year

Nurses who live outside California were asked about their plans regarding work in California for the next five years, as seen in Table 3.38. In 2010, 30.5 percent reported that they plan to travel to California to work as an RN intermittently and this percentage has remained stable since 2004, however, nurses who plan to perform telenursing for an out-of-state employer with California clients has increased from 1.3 percent in 2004 to 6.4 percent in 2010. Nearly 25.9 percent plan to relocate to California to work, an increase from 14.3 percent in 2004. Over 33.9 percent plan to renew their California license, but have no plan to work in California, which is a decline from previous years.

Table 3.38 Plans for the next five years for registered nurses with active California licenses who lived outside the state, 2004-2010

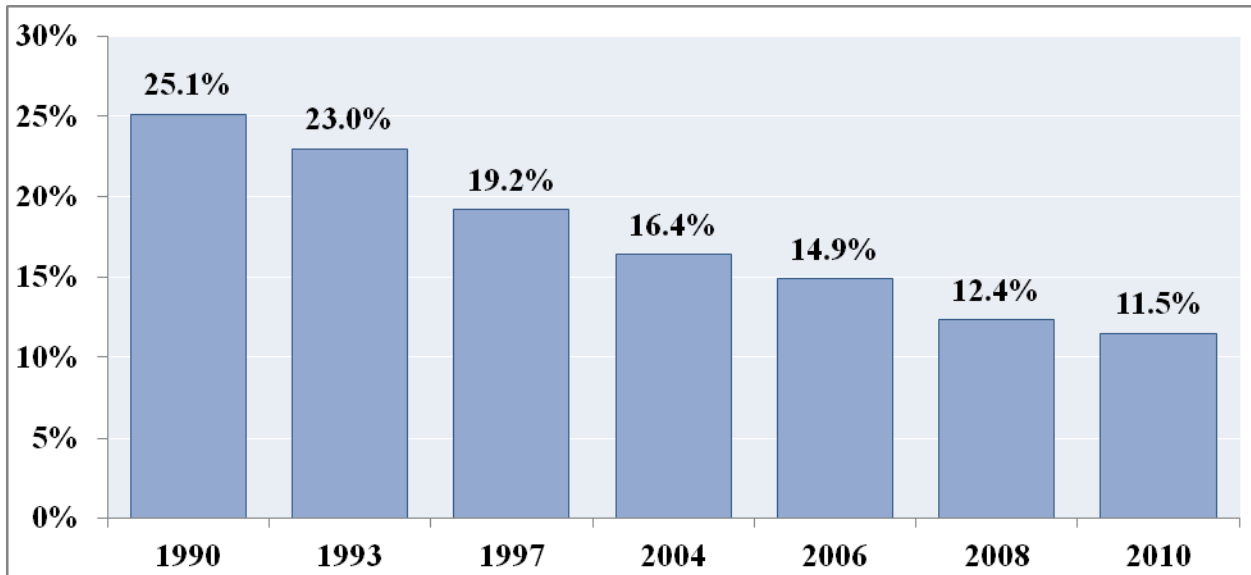
	2004	2006	2008	2010
Yes, I plan to travel to California to work as an RN intermittently	33.2%	30.6%	32.4%	30.5%
Yes, I plan to relocate to California and work as an RN	14.3%	14.3%	21.7%	25.9%
Yes, I plan to perform telenursing/telemedicine for a California employer	0.0%	6.1%	1.9%	3.2%
Yes, I plan to perform telenursing/telemedicine for an out-of-state employer with California clients	1.3%	0.6%	4.1%	6.4%
Yes, I plan to commute from a border state	1.3%	4.2%	2.2%	1.7%
No, I plan to keep my California RN license renewed, but have no plans to work there as an RN	40.8%	41.8%	39.3%	33.9%
No, I plan to let my California RN license lapse and have no plans to work there as an RN	7.0%	8.3%	6.5%	8.1%
Number of cases	385	407	413	457

Note: Columns will not total 100% because respondents could select multiple items. Data (2006-2010) are weighted to represent all RNs with active licenses. In 2006, there was a six-month gap between when the survey sample was identified and the survey was mailed; thus, a relatively large share of nurses had moved out of California during the interval.

Breaks in Nursing Employment

In every survey since 1990, nurses were asked whether they had stopped working as a registered nurse for a period of more than one year. The proportion of California-resident RNs who stopped working as registered nurses for more than a year has decreased continuously from 25.1 percent in 1990 to 11.5 percent in 2010, as seen in Figure 3.9.

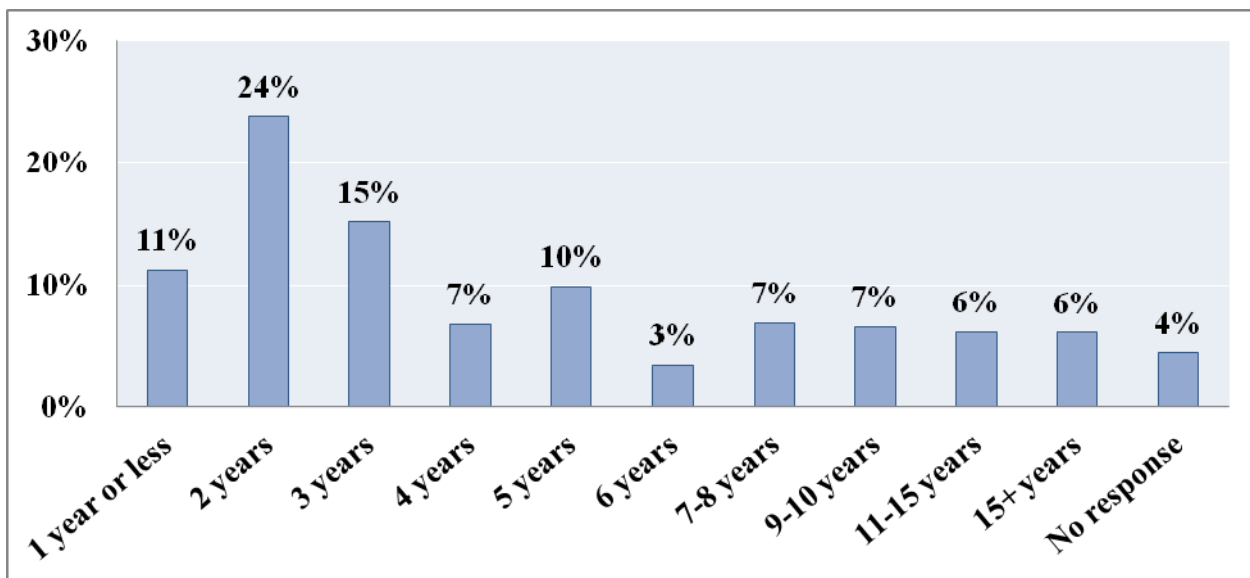
Figure 3.9 Percent of nurses who stopped working as a registered nurse for more than one year, but are currently working as RNs and reside in California, by survey year



Note: 2010 number of cases=4,561. Data (2006-2010) are weighted to represent all RNs with active licenses.

Figure 3.10 presents the length of time that nurses who live in California and now work were away from nursing. The largest share – 24 percent – was out of nursing for at least two years, and another 15 percent stopped working for three years. Relatively few RNs with active California licenses stopped working for more than five years.

Figure 3.10 Number of years nurses temporarily stopped working in nursing, for currently working California residents, 2010



Note: Number of cases=612. Data are weighted to represent all RNs with active licenses.

Nurses were asked about the factors that influenced their decision to leave nursing. Prior to the 2006 survey, RNs were asked to mark all the items that applied to their decision; in 2006, 2008, and 2010, nurses were asked to rate the degree of importance of each item. In Table 3.39, the survey responses are presented over time, with the data for 2006 through 2010 representing the percent of nurses who reported the item as being “important” or “very important.” Comparisons between data before 2004 and 2006 or later should be made with caution due to changes in these particular survey questions.

In 2010, childcare responsibilities were cited by 58.8 percent of the nurses who left nursing for more than one year; this share has decreased from 71.9 percent in 1990, but has seen a slight increase since 2006. A rising share of nurses have noted other family responsibilities as being important to the decision to temporarily stop nursing, with 44.6 percent citing this reason in 2010. Other often-noted reasons include job stress (26.7%), moving to a different area (27.7%), and desire to try another occupation (18.7%).

Table 3.39 Reasons currently working registered nurses residing in California stopped working as registered nurses for a period of more than one year, by survey year

	1990	1993	1997	2004	2006	2008	2010
Child care responsibilities	71.9%	68.7%	62.7%	59.8%	52.5%	56.8%	58.8%
Other family responsibilities	19.0%	14.0%	10.8%	15.0%	39.5%	42.8%	44.6%
Moving to a different area	30.2%	31.5%	29.1%	24.3%	26.7%	27.1%	27.7%
Stress on the job	*	9.0%	10.5%	11.4%	27.8%	24.4%	26.7%
Job-related injury or illness	*	*	*	5.9%	16.0%	13.2%	11.7%
Non-job-related injury or illness	*	*	*	5.1%	11.3%	14.2%	12.6%
Injury or illness	9.8%	11.6%	9.1%	*	*	*	*
Salary	*	1.8%	2.3%	5.5%	14.8%	18.7%	14.5%
Decreased benefits	*	*	*	0.8%	*	*	*
Dissatisfied with benefits	*	*	*	*	11.0%	11.8%	8.0%
Laid off	*	*	1.7%	2.8%	5.9%	8.2%	5.3%
Return to school	10.0%	12.2%	14.8%	12.0%	17.5%	17.6%	14.9%
Travel	5.0%	6.4%	6.3%	4.4%	11.7%	9.8%	11.0%
To try another occupation	12.9%	14.2%	15.2%	14.0%	20.9%	19.9%	18.7%
Other dissatisfactions with your job	*	*	7.0%	10.2%	19.2%	14.1%	17.2%
Dissatisfaction with the nursing profession	16.6%	12.4%	8.4%	12.5%	26.8%	17.7%	13.0%
Other	5.5%	2.8%	3.2%	13.1%	18.8%	7.3%	6.3%
Number of cases	559	501	474	527	569	572	606

* Item was not included in the survey that year.

Note: In 1990, 1993, 1997, and 2004, respondents checked items that had any importance. In 2006, 2008, and 2010, they were asked to rate the degree of importance. The 2006 - 2010 columns present the share who reported the item was “important” or “very important”. Data (2006-2010) are weighted to represent all RNs with active licenses.

Job Satisfaction of Working Registered Nurses

Registered nurses with active California licenses were asked to indicate their degree of satisfaction with a variety of aspects of nursing employment on a five-point Likert-type scale ranging from “very dissatisfied” to “very satisfied.” Table 3.40 presents the responses for working RNs residing in California. A “mean score” for each item can be obtained by computing the average score, with 1 point given for “very dissatisfied” and 5 points for “very satisfied.” An average score of 3 would indicate neutrality, meaning that on average, nurses were neither satisfied nor unsatisfied. Figure 3.11 presents the summary scores for all 30 items. Since 1990, nurses have reported increases in satisfaction in all areas.

Four of the five aspects of nursing that received the highest average satisfaction ratings in 2010 were the same items receiving the highest ratings in 2008 and 2006. In 2010, job security was replaced as one of the top five satisfying aspects of their jobs by teamwork between coworkers.

- Interactions with patients (4.34)

- Feeling that work is meaningful (4.23)
- Job overall (4.19)
- Team work between coworkers (4.15)
- Work schedule (4.11)

Four of the five aspects of nursing receiving the lowest average ratings in 2010 also received the lowest ratings in 2008. In 2008, satisfaction with amount of clerical support was one of the lowest-rated aspects of RNs' jobs; this was replaced by recognition for a job well done in 2010. The five aspects of nursing receiving the lowest average ratings in 2010 are:

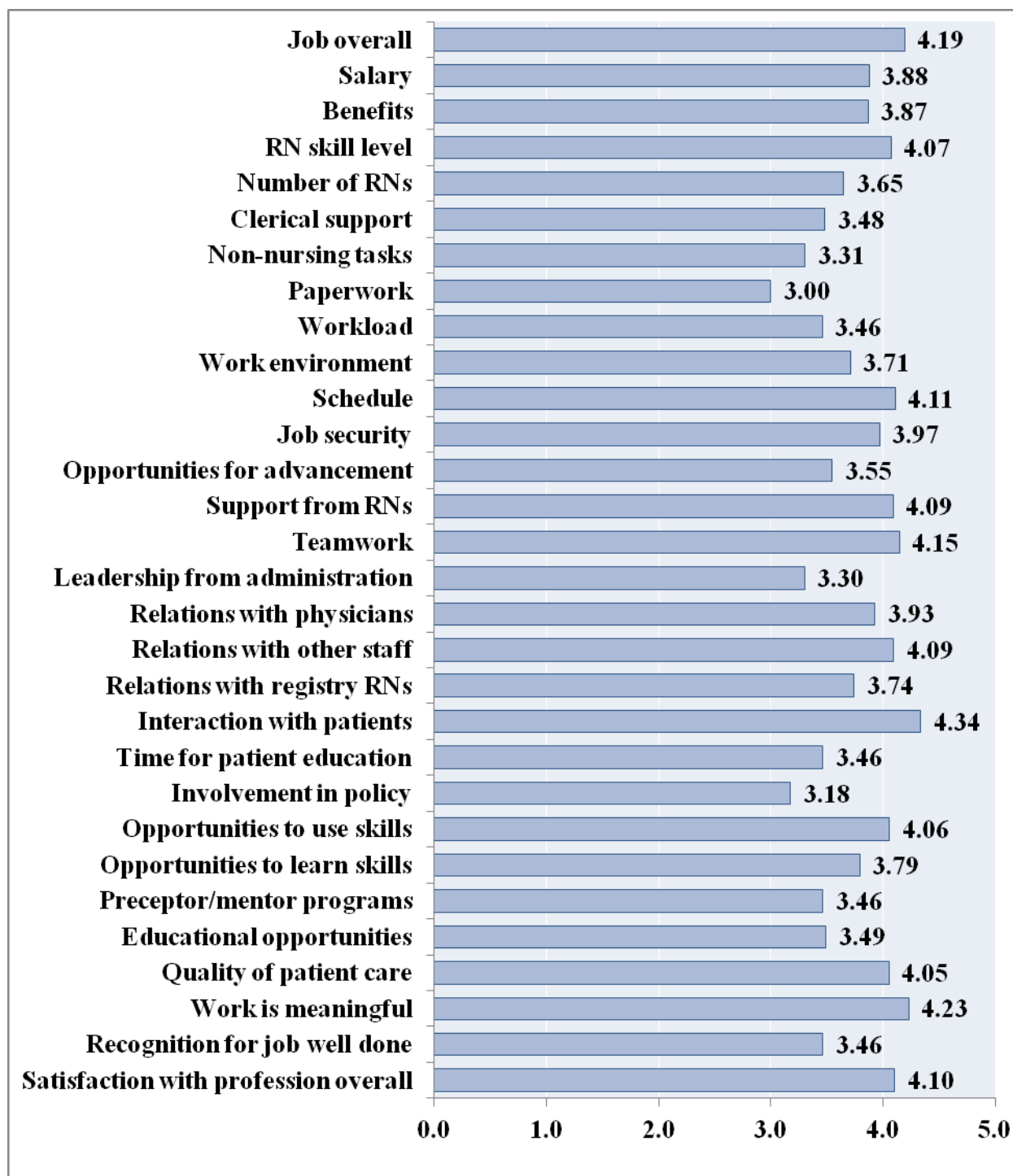
- Amount of paperwork required (3.00)
- Involvement in policy and management decisions (3.18)
- Leadership from administration (3.30)
- Non-nursing tasks required (3.31)
- Recognition for a job well done (3.46)

Table 3.40 Satisfaction or dissatisfaction with most recent nursing position, for RNs currently working and residing in California, 2010

	Very dissatisfied	Dissatisfied	Neither satisfied or unsatisfied	Satisfied	Very satisfied	No response
Your job overall	0.9%	5.0%	7.0%	47.1%	38.5%	1.6%
Your salary	1.4%	11.7%	11.4%	47.0%	27.1%	1.5%
Employee benefits	2.2%	9.9%	12.4%	40.7%	26.5%	8.3%
Adequacy of RN skill level where you work	0.7%	6.2%	10.1%	48.3%	31.6%	3.1%
Adequacy of the number of RNs where you work	2.9%	16.9%	13.1%	40.1%	22.2%	4.8%
Adequacy of clerical support services	4.1%	18.3%	17.3%	40.2%	16.3%	3.8%
Non-nursing tasks required	3.8%	16.6%	27.2%	35.1%	8.5%	8.8%
Amount of paperwork required	9.7%	27.4%	20.1%	32.4%	7.3%	3.1%
Your workload	4.2%	17.7%	17.7%	46.6%	12.3%	1.6%
Physical work environment	2.7%	11.7%	16.2%	48.6%	19.2%	1.7%
Work schedule	1.2%	5.8%	9.0%	47.5%	35.4%	1.2%
Job security	2.5%	7.4%	12.0%	45.0%	31.4%	1.6%
Opportunities for advancement	3.2%	13.9%	22.9%	38.0%	17.0%	5.1%
Support from other nurses you work with	1.5%	5.9%	10.9%	41.8%	36.0%	3.9%
Teamwork between coworkers and yourself	1.5%	5.7%	9.8%	40.9%	40.0%	2.2%
Leadership from your nursing administration	8.9%	19.7%	17.3%	31.8%	17.0%	5.4%
Relations with physicians	1.2%	6.0%	15.9%	48.1%	24.6%	4.2%
Relations with other non-nursing staff	0.4%	3.0%	11.1%	56.2%	27.3%	2.1%
Relations with agency/registry nurses	0.2%	2.3%	18.2%	32.3%	7.7%	39.2%
Interaction with patients	0.3%	1.1%	6.5%	44.9%	41.5%	5.8%
Time available for patient education	3.5%	19.3%	15.7%	39.1%	14.7%	7.8%
Involvement in policy/ management decisions	6.3%	20.2%	26.8%	28.4%	10.3%	7.9%
Opportunities to use your skills	1.0%	5.5%	10.0%	51.3%	29.8%	2.4%
Opportunities to learn new skills	2.0%	11.3%	15.8%	44.3%	24.1%	2.5%
Quality of preceptor and mentor programs	4.2%	12.9%	20.4%	32.0%	14.1%	16.4%
Employer-supported educational opportunities	6.2%	15.5%	17.5%	37.6%	18.4%	4.9%
Quality of patient care where you work	0.7%	5.7%	12.5%	45.2%	30.9%	5.1%
Feeling that work is meaningful	1.0%	3.8%	9.3%	40.8%	42.6%	2.4%
Recognition for a job well done	6.9%	16.1%	18.6%	35.1%	19.9%	3.4%
How satisfied are you with the nursing profession overall?	1.9%	4.8%	7.4%	50.4%	32.6%	2.9%

Note: Number of cases=4,726. Rows may not add to 100% due to rounding. Data are weighted to represent all RNs with active licenses.

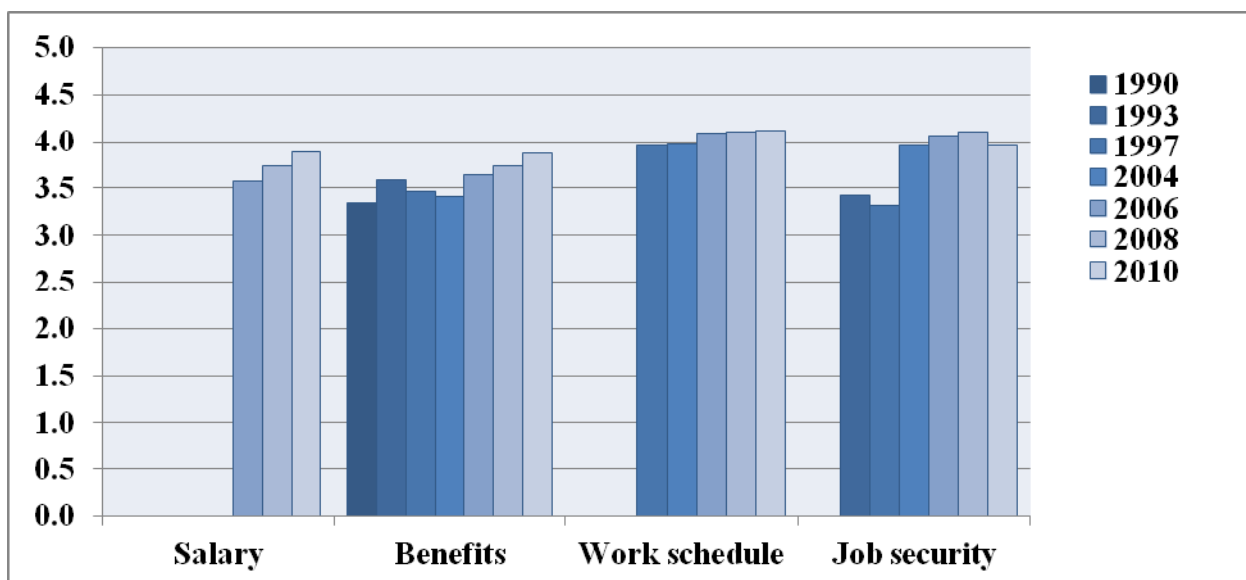
Figure 3.11 Overall satisfaction with most recent nursing position, for RNs currently working and residing in California, 2010



Note: Data are weighted to represent all RNs with active licenses.

Figure 3.12 presents average satisfaction scores for job characteristics related to salary, benefits, and job security, for currently working RNs residing in California. Satisfaction with job security showed marked improvement from 1997 to 2008, and then declined slightly in 2010. In 1997, California was ending a period of time during which many analysts thought there was a surplus of nurses, and in the previous five years, some employers had laid-off nurses or reduced hiring dramatically. By 2004, a severe nursing shortage was underway in California, with employers offering generous bonuses to new hires and large salary increases. In early 2008, the economy entered a severe recession, and unemployment rates in California increased substantially between 2008 and 2010. Layoffs of hospital-employed RNs were reported in some regions of the state. The decline in satisfaction with job security between 2008 and 2010 may reflect the economic downturn in California.

Figure 3.12 Satisfaction with salary, benefits, and job security for RNs currently working and residing in California, by survey year



Note: Data (2006-2010) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

As discussed previously, all the job satisfaction components have increased at least slightly between 1990 and 2010, as seen in Table 3.41. The areas with the largest improvement in job satisfaction since 2004 include adequacy of RN staffing, benefits, adequacy of clerical support, amount of paperwork required and salary. The average of all ratings was 3.35 in 1990 and 3.77 in 2010, which is slightly lower than 3.83 reported in 2008. The job factors rated “best” and “worst” have remained consistent from 2004 to 2010.

Table 3.41 Satisfaction with most recent nursing position for RNs currently working and residing in California, by survey year (out of a scale where 1 is low and 5 is highest)

	1990	1993	1997	2004
Your salary	*	*	*	*
Starting salary	3.04	3.42	3.39	3.26
The salary range for your position	2.91	3.34	3.19	3.24
Employee benefits	3.34	3.58	3.47	3.44
Skill of RNs where you work	3.88	3.94	3.96	3.90
Adequacy of RN staffing where you work	2.97	3.29	3.13	3.14
Adequacy of clerical support services	2.99	3.20	3.15	3.14
Non-nursing tasks required	2.78	3.05	3.09	3.11
Amount of paperwork required	*	*	*	2.69
Workload	*	*	*	*
Physical work environment	3.37	3.58	3.60	3.45
Work schedule	*	*	3.97	4.00
Job security	*	3.42	3.31	3.98
Opportunities for advancement	2.95	3.15	3.15	3.37
Support from other nurses with whom you work	3.92	4.00	4.01	3.95
Support from nursing administration	2.96	3.00	3.06	3.08
Leadership from nursing administration	*	*	*	*
Relations with physicians	3.65	3.70	3.86	3.79
Relations with other non-nursing staff	3.86	3.94	4.03	3.95
Relations with temporary agency/traveling staff	*	*	*	3.56
Teamwork between coworkers and yourself	*	*	*	*
Interaction with patients	*	*	4.31	4.27
Time available for patient education	*	*	*	3.23
Involvement in policy and management decisions	2.90	3.08	3.06	3.00
Opportunities to use your skills	3.85	3.98	3.98	3.99
Opportunities to learn new skills	3.58	3.75	3.74	3.68
Employer-supported educational/training programs	3.28	3.44	3.42	3.50
Quality of preceptor and mentor programs	*	*	*	*
Transition from school to first RN job	3.61	3.70	3.84	3.84
Orientation to new RN jobs	3.52	3.58	3.68	3.75
Quality of patient care	*	*	*	3.86
Feeling that work is meaningful	*	*	*	4.11
Recognition for a job well done	*	*	*	*
Your job overall	3.77	3.94	3.95	3.94
The nursing profession overall	*	*	*	*

* Question not asked in the survey year.

Note: Data (2006-2010) are weighted to represent all RNs with active licenses.

Table 3.41 (continued) Satisfaction with most recent nursing position for RNs currently working and residing in California, by survey year (out of a scale where 1 is low and 5 is highest)

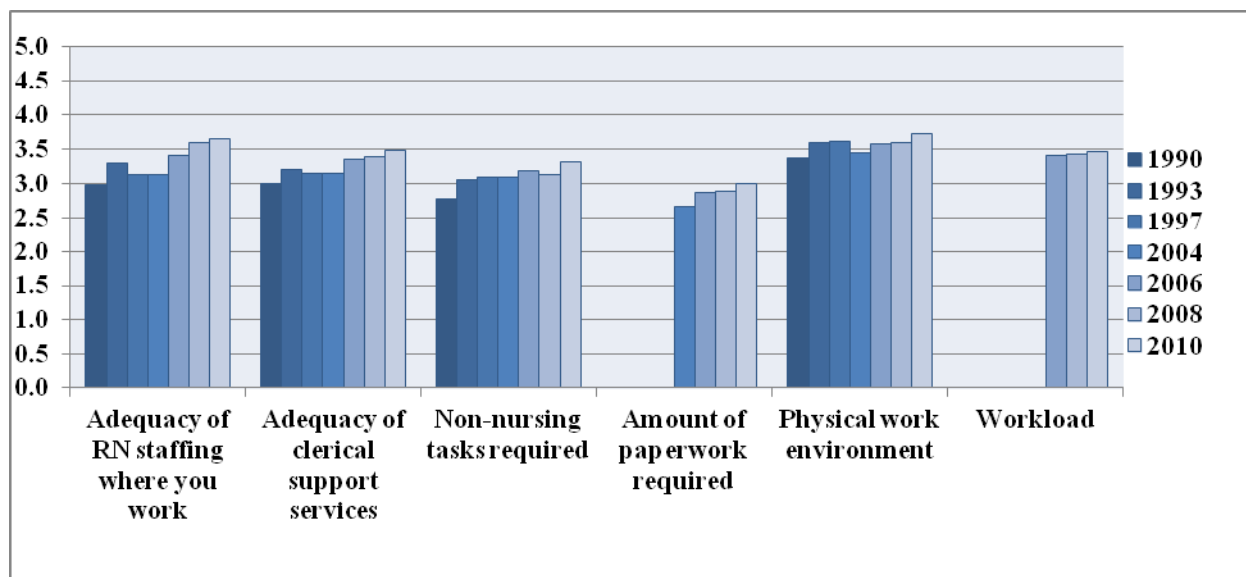
	2006	2008	2010
Your salary	3.58	3.74	3.88
Starting salary	*	*	*
The salary range for your position	*	*	*
Employee benefits	3.64	3.74	3.87
Skill of RNs where you work	3.94	4.00	4.07
Adequacy of RN staffing where you work	3.40	3.58	3.65
Adequacy of clerical support services	3.35	3.39	3.48
Non-nursing tasks required	3.18	3.13	3.31
Amount of paperwork required	2.87	2.88	3.00
Workload	3.41	3.41	3.46
Physical work environment	3.57	3.59	3.71
Work schedule	4.09	4.10	4.11
Job security	4.06	4.10	3.97
Opportunities for advancement	3.48	3.56	3.55
Support from other nurses with whom you work	3.95	4.02	4.09
Support from nursing administration	*	*	*
Leadership from nursing administration	3.18	3.23	3.30
Relations with physicians	3.84	3.85	3.93
Relations with other non-nursing staff	3.99	4.03	4.09
Relations with temporary agency/traveling staff	3.75	3.69	3.74
Teamwork between coworkers and yourself	4.01	4.06	4.15
Interaction with patients	4.29	4.34	4.34
Time available for patient education	3.39	3.42	3.46
Involvement in policy and management decisions	3.02	3.15	3.18
Opportunities to use your skills	3.99	4.04	4.06
Opportunities to learn new skills	3.65	3.78	3.79
Employer-supported educational/training programs	3.35	3.46	3.49
Quality of preceptor and mentor programs	3.34	3.41	3.46
Transition from school to first RN job	*	*	*
Orientation to new RN jobs	*	*	*
Quality of patient care	3.86	3.97	4.05
Feeling that work is meaningful	4.15	4.20	4.23
Recognition for a job well done	3.39	3.44	3.46
Your job overall	4.05	4.14	4.19
The nursing profession overall	3.83	3.96	4.10

* Question not asked in the survey year.

Note: Data (2006-2010) are weighted to represent all RNs with active licenses.

Figure 3.13 presents average satisfaction over time for job aspects related to workplace resources and support. Satisfaction with most of these facets has improved over time. Satisfaction with the adequacy of RN staffing rose from 3.12 in 2004 to 3.65 in 2010. There has been improvement in satisfaction with required non-nursing tasks and amount of paperwork between 2004 and 2010; however, these job aspects are still rated in the bottom five.

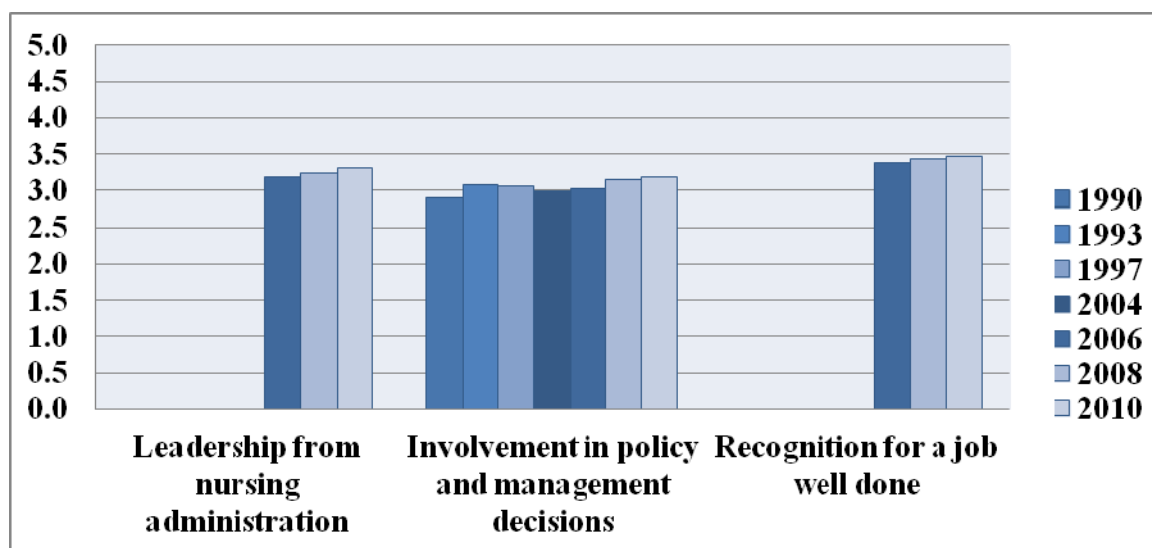
Figure 3.13 Satisfaction with workplace resources and support for RNs currently working and residing in California, by survey year



Note: Data (2006-2010) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

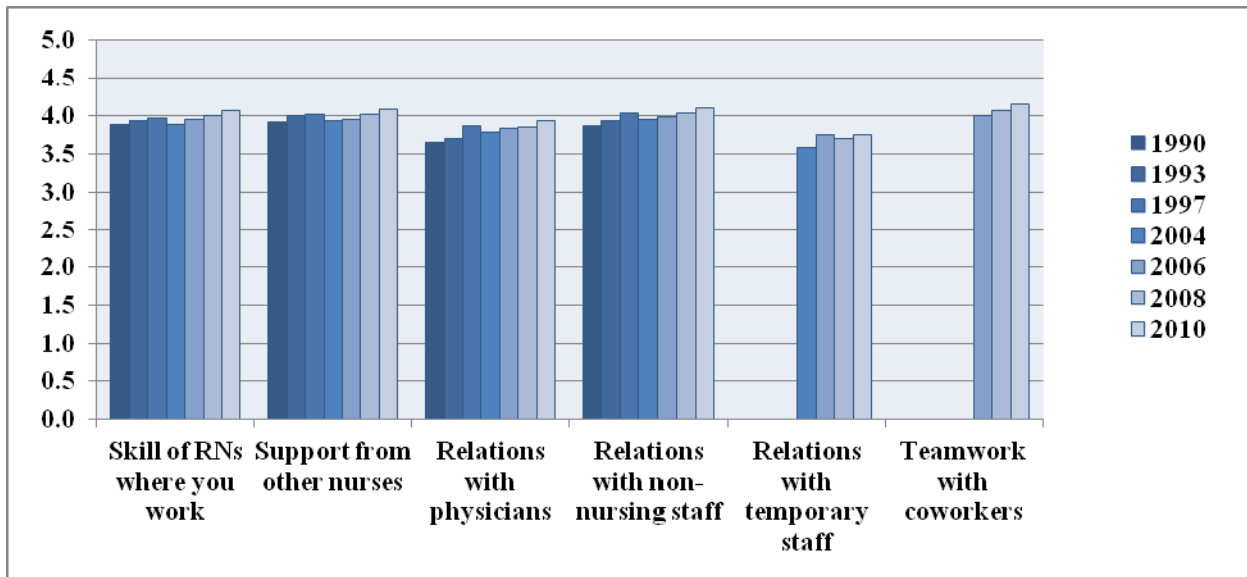
Average satisfaction of registered nurses with management at their current place of employment is presented in Figure 3.14. This is an area of more dissatisfaction among RNs residing in California, and there has been little change over time, although as in nearly all other satisfaction questions, satisfaction appears to be rising. Figure 3.15 presents average satisfaction with collegial interactions in the workplace, by survey year. Nurses tend to be satisfied in this domain, and there has been little change in average satisfaction over time. Nurses rate their satisfaction as higher for support from other nurses, relations with non-nursing staff, and the skill of RNs in their workplace than they rate their relations with physicians and temporary staff.

Figure 3.14 Satisfaction with management for RNs currently working and residing in California, by survey year



Note: Data (2006-2010) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

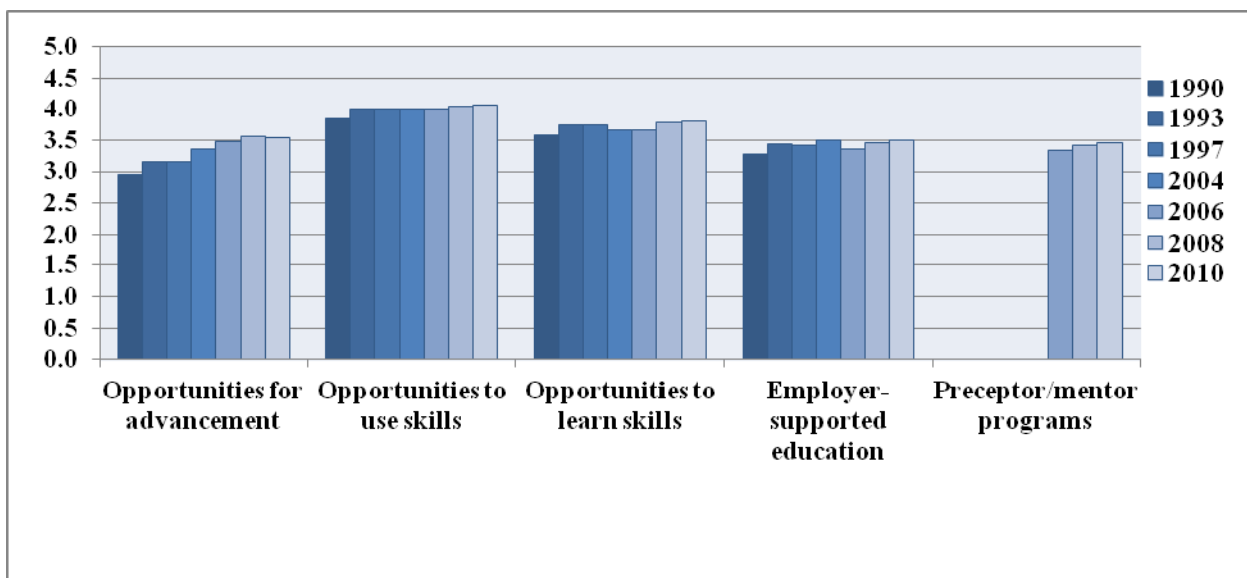
Figure 3.15 Satisfaction with colleagues for RNs currently working and residing in California, by survey year



Note: Data (2006-2010) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

Satisfaction with opportunities for growth and advancement are presented in Figure 3.16. Nurses are generally satisfied with their opportunities to use their skills, and there has been little change in the rating of this job aspect over time. There also has been little change in average satisfaction with opportunities to learn new skills and employer-supported education. There has been marked improvement over time in satisfaction with opportunities for advancement. In 1990, nurses were neutral about their satisfaction with this factor of their work, with an average score of 2.95. By 2010, the average score had risen to 3.55, indicating that more nurses were satisfied with their advancement potential.

Figure 3.16 Satisfaction with opportunities for growth for RNs currently working and residing in California, by survey year

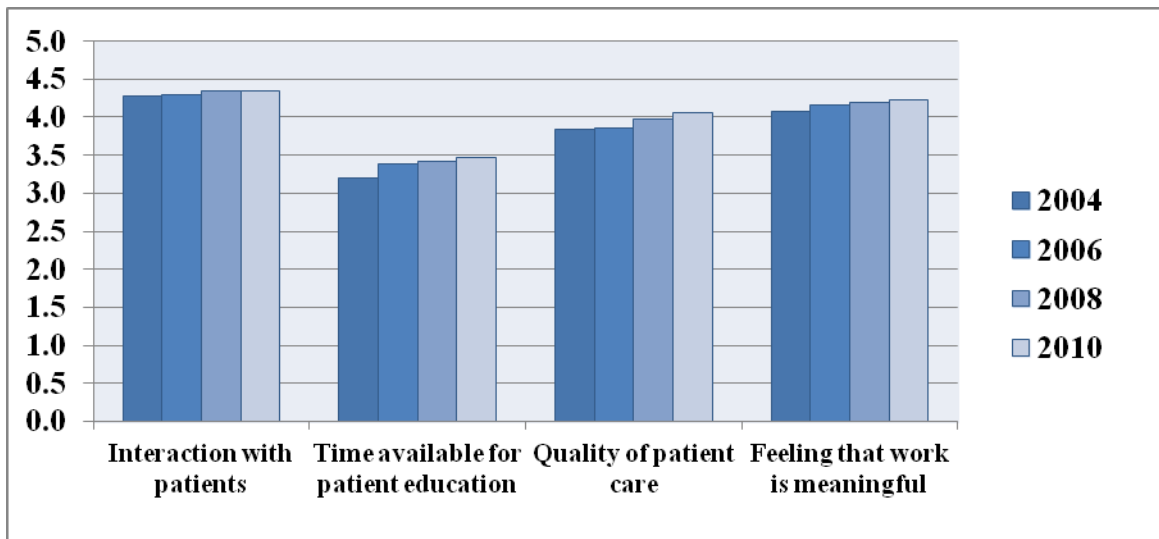


Note: Data (2006-2010) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

Figure 3.17 presents average satisfaction scores for factors associated with patient interactions and quality of care. Nurses were very satisfied with their interactions with patients and the feeling that their work is meaningful. These were the two highest rated job factors in 2010, having average ratings of 4.34 and 4.23, respectively. RNs reported being less satisfied with the quality of patient care, and time available for patient education, although average satisfaction for all these scores have grown between 2004 and 2010.

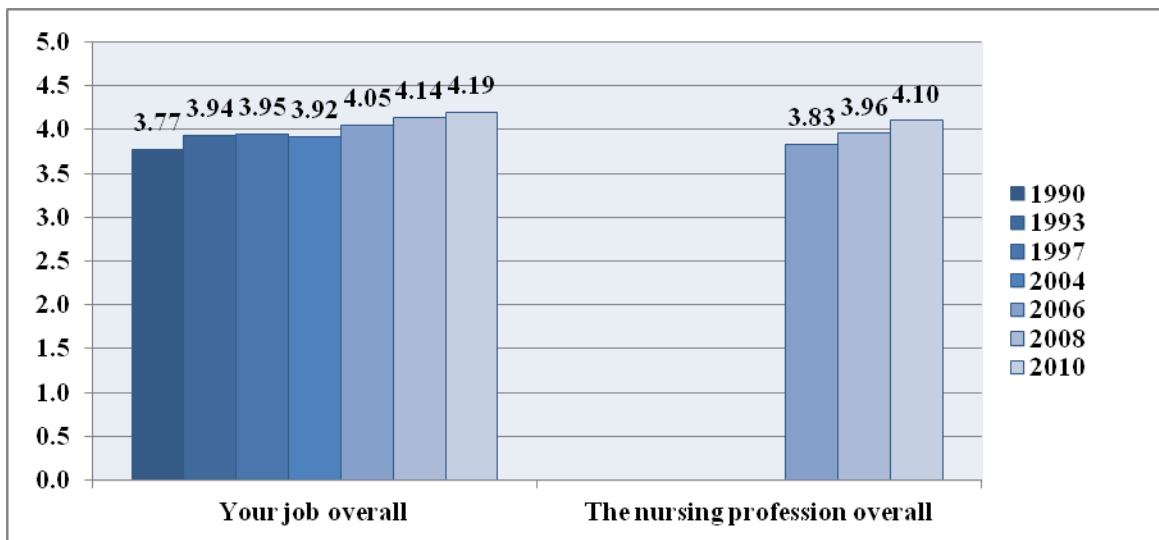
Figure 3.18 presents the overall satisfaction of currently working RNs residing in California. Average overall job satisfaction is quite high (4.19), and this has been one of the highest rated items on the survey since 1993. Satisfaction with the nursing profession averaged 4.10 in 2010.

Figure 3.17 Satisfaction with patient interactions and care for RNs currently working and residing in California, by survey year



Note: Data (2006-2010) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

Figure 3.18 Overall satisfaction of RNs currently working and residing in California, by survey year



Note: Data (2006-2010) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

Job Satisfaction by Age

Table 3.42 presents mean job satisfaction scores for selected items by age group in 2010. There is some variation for particular job aspects across age groups, but no consistent pattern of any age group being more or less satisfied, with the exception of nurses who are 65 years or older. These nurses, who are considered to be of retirement age, are more satisfied in most dimensions than their younger counterparts. This satisfaction likely explains their continued employment past the age when most people retire. Nurses under 35 years old are somewhat less satisfied than older RNs, particularly with their relations with physicians, interactions with patients, time available for patient education, involvement in policy decisions, quality of patient care, feeling that work is meaningful and recognition for a job well done. They are more satisfied with their job security, clerical staff, quality of preceptor programs, and the profession overall.

Job Satisfaction by Education

Table 3.43 presents average satisfaction with selected job factors by highest nursing education attained, for currently working RNs who live in California. In general, nurses with graduate degrees are more satisfied than are nurses whose highest education level is a diploma, associate degree, or bachelor's degree.

Job Satisfaction by Job Title

Table 3.44 explores the relationships between selected job satisfaction items and job title, for working nurses who live in California. This table compares staff nurses, senior management, front-line management, and patient care coordinators/case managers/discharge planners. Nurses working as senior management have average satisfaction ratings that are higher than the other nurses, with few exceptions. They are somewhat less satisfied with the adequacy of RN skills than all other nurses. Staff nurses, front-line managers, and patient coordinators have similar levels of overall satisfaction. All of the nurses, regardless of job title, reported being least satisfied with the amount of paperwork. Staff nurses and patient care coordinators are also less satisfied with their involvement in policy and management decisions than the other groups.

Job Satisfaction by Work Setting

Table 3.45 presents nurse satisfaction with selected job factors by work setting, focusing on nurses who work in acute-care hospital departments, hospital-based ambulatory care departments, skilled nursing facilities, home health agencies, and ambulatory care settings. In general, nurses working in freestanding ambulatory care settings had higher satisfaction ratings in almost all areas. Nurses working in ambulatory care departments of hospitals also had generally higher satisfaction than nurses did in other settings. RNs working in skilled nursing facilities have the lowest average satisfaction levels as they had the lowest ratings in all aspects except for amount of non-nursing tasks required, leadership from nursing administration, involvement in policy management decisions, and recognition for a job well done.

Table 3.42 Satisfaction with most recent nursing position for RNs currently working and residing in California, by age group, 2010

1 through 5 scale; 1=very dissatisfied; 5=very satisfied	Under 35 years	35-44 years	45-54 years	55-64 years	65 years and older
Your job overall	4.13	4.19	4.21	4.21	4.28
Your salary	3.83	3.84	3.91	3.91	3.95
Employee benefits	3.83	3.82	3.88	3.91	3.97
Adequacy of RN skill level where you work	4.02	4.05	4.08	4.13	4.11
Adequacy of the number of RNs where you work	3.57	3.65	3.65	3.70	3.77
Adequacy of clerical support	3.54	3.46	3.43	3.51	3.5
Non-nursing tasks required	3.30	3.36	3.25	3.32	3.31
Amount of paperwork required	3.06	3.11	2.92	2.93	3.09
Your workload	3.44	3.43	3.44	3.49	3.64
Physical work environment	3.71	3.68	3.70	3.74	3.81
Work schedule	4.00	4.06	4.20	4.17	4.15
Job security	4.06	3.96	3.93	3.97	3.95
Opportunities for advancement	3.58	3.49	3.54	3.57	3.60
Support from other nurses you work with	4.15	4.05	4.09	4.07	4.23
Teamwork between coworkers and yourself	4.21	4.11	4.13	4.12	4.31
Leadership from your nursing administration	3.33	3.26	3.26	3.35	3.48
Relations with physicians	3.80	3.88	3.97	4.00	4.10
Relations with other non-nursing staff	4.06	3.99	4.13	4.16	4.24
Relations with agency/registry nurses	3.68	3.76	3.78	3.72	3.79
Interaction with patients	4.23	4.30	4.38	4.41	4.48
Time available for patient education	3.31	3.47	3.46	3.54	3.67
Involvement in policy/ management decisions	3.11	3.11	3.17	3.28	3.37
Opportunities to use my skills	4.02	3.97	4.09	4.13	4.20
Opportunities to learn new skills	3.78	3.69	3.83	3.85	3.91
Quality of preceptor and mentorship programs	3.61	3.40	3.43	3.44	3.47
Employer-supported educational opportunities	3.57	3.35	3.50	3.52	3.67
Quality of patient care where you work	3.98	4.00	4.10	4.09	4.23
Feeling that work is meaningful	4.15	4.19	4.26	4.28	4.36
Recognition for a job well done	3.44	3.33	3.46	3.59	3.76
How satisfied are you with the nursing profession overall?	4.15	4.13	4.08	4.05	4.09

Note: Data are weighted to represent all RNs with active licenses.

Table 3.43 Satisfaction with most recent nursing position for RNs currently working and residing in California, by highest nursing education, 2010

1 through 5 scale; 1=very dissatisfied; 5=very satisfied	Diploma	Associate Degree	Baccalaureate Degree	Master's Degree
Your job overall	4.23	4.17	4.18	4.27
Your salary	3.83	3.84	3.90	4.03
Employee benefits	3.89	3.77	3.90	4.10
Adequacy of RN skill level where you work	4.04	4.06	4.11	4.05
Adequacy of the number of RNs where you work	3.68	3.63	3.66	3.65
Adequacy of clerical support services	3.54	3.46	3.49	3.44
Non-nursing tasks required	3.41	3.28	3.28	3.41
Amount of paperwork required	3.14	2.94	3.02	3.03
Your workload	3.52	3.43	3.47	3.46
Physical work environment	3.83	3.68	3.67	3.87
Work schedule	4.14	4.10	4.11	4.20
Job security	3.93	3.97	3.97	4.06
Opportunities for advancement	3.64	3.54	3.55	3.49
Support from other nurses you work with	4.06	4.12	4.09	4.03
Teamwork between coworkers and yourself	4.13	4.17	4.13	4.17
Leadership from your nursing administration	3.46	3.23	3.30	3.46
Relations with physicians	4.01	3.95	3.85	4.10
Relations with other non-nursing staff	4.11	4.12	4.04	4.21
Relations with agency/registry nurses	3.78	3.75	3.72	3.78
Interaction with patients	4.36	4.34	4.30	4.49
Time available for patient education	3.58	3.40	3.45	3.69
Involvement in policy/ management decisions	3.37	3.03	3.20	3.47
Opportunities to use your skills	4.08	4.06	4.04	4.13
Opportunities to learn new skills	3.85	3.78	3.77	3.91
Quality of preceptor and mentorship programs	3.49	3.45	3.47	3.44
Employer-supported educational opportunities	3.62	3.47	3.46	3.59
Quality of patient care where you work	3.98	4.06	4.05	4.14
Feeling that work is meaningful	4.24	4.21	4.21	4.40
Recognition for a job well done	3.69	3.38	3.45	3.65
How satisfied are you with the nursing profession overall?	4.10	4.07	4.11	4.18

Note: Data are weighted to represent all RNs with active licenses.

Table 3.44 Satisfaction with most recent nursing position for RNs currently working and residing in California, by job title, 2010

1 through 5 scale; 1=very dissatisfied; 5=very satisfied	Staff nurse	Senior management	Front-line management	Patient care coordinator
Your job overall	4.14	4.73	4.18	4.17
Your salary	3.86	4.28	3.84	3.72
Employee benefits	3.82	3.94	3.81	3.74
Adequacy of RN skill level where you work	4.10	3.84	4.09	4.07
Adequacy of the number of RNs	3.66	3.88	3.83	3.43
Adequacy of clerical support services	3.48	3.70	3.77	3.43
Non-nursing tasks required	3.25	3.64	3.44	3.36
Amount of paperwork required	2.96	3.19	2.79	2.93
Your workload	3.46	3.61	3.33	3.28
Physical work environment	3.62	4.35	3.90	3.76
Work schedule	4.05	4.37	4.40	4.11
Job security	3.95	4.31	4.01	3.78
Opportunities for advancement	3.51	4.35	3.62	3.39
Support from other nurses you work with	4.08	4.38	4.10	4.04
Teamwork between coworkers and yourself	4.12	4.39	4.24	4.06
Leadership from your nursing administration	3.20	4.29	3.38	3.36
Relations with physicians	3.86	4.44	4.06	4.09
Relations with other non-nursing staff	4.05	4.36	4.26	4.16
Relations with agency/registry nurses	3.74	3.99	4.00	3.76
Interaction with patients	4.31	4.49	4.50	4.32
Time available for patient education	3.38	3.66	3.57	3.70
Involvement in policy/ management decisions	2.98	4.58	3.54	3.09
Opportunities to use your skills	4.02	4.60	4.07	3.97
Opportunities to learn new skills	3.77	4.50	3.72	3.68
Quality of preceptor and mentorship programs	3.47	3.53	3.70	3.21
Employer-supported educational opportunities	3.47	4.16	3.55	3.31
Quality of patient care where you work	4.03	4.34	4.25	3.90
Feeling that work is meaningful	4.19	4.58	4.32	4.05
Recognition for a job well done	3.34	4.42	3.49	3.46
How satisfied are you with the nursing profession overall?	4.09	4.41	3.98	3.98

Note: Data are weighted to represent all RNs with active licenses.

Table 3.45 Satisfaction with most recent nursing position for RNs currently working and residing in California, by work setting, 2010

1 through 5 scale; 1=very dissatisfied; 5=very satisfied	Hospital, acute care	Hospital, ambulatory	Skilled nursing facility	Home health agency	Ambulatory care setting
Your job overall	4.17	4.21	3.91	4.03	4.44
Your salary	3.96	4.06	3.24	3.56	3.81
Employee benefits	3.91	4.03	3.20	3.48	3.80
Adequacy of RN skill level where you work	4.09	4.25	3.51	3.99	4.28
Adequacy of the number of RNs where you work	3.68	3.79	3.19	3.58	3.80
Adequacy of clerical support services	3.46	3.52	3.20	3.75	3.80
Non-nursing tasks required	3.25	3.24	3.26	3.40	3.61
Amount of paperwork required	2.92	3.08	2.68	2.63	3.45
Your workload	3.43	3.65	2.94	3.46	3.72
Physical work environment	3.62	3.78	3.46	3.87	4.06
Work schedule	4.10	4.22	3.95	4.04	4.30
Job security	4.03	3.99	3.64	3.64	4.17
Opportunities for advancement	3.65	3.54	3.15	3.25	3.54
Support from other nurses you work with	4.13	4.07	3.76	3.98	4.16
Teamwork between coworkers and yourself	4.19	4.07	3.91	3.95	4.26
Leadership from your nursing administration	3.25	3.08	3.47	3.43	3.57
Relations with physicians	3.86	4.01	3.80	3.81	4.33
Relations with other non-nursing staff	4.07	4.13	4.01	4.11	4.26
Relations with agency/registry nurses	3.75	3.8	3.59	3.87	3.75
Interaction with patients	4.29	4.47	4.26	4.42	4.58
Time available for patient education	3.31	3.58	3.30	4.06	3.91
Involvement in policy/ management decisions	3.10	3.05	3.31	3.33	3.48
Opportunities to use your skills	4.11	4.08	3.54	4.03	4.24
Opportunities to learn new skills	3.88	3.78	3.26	3.70	3.91
Quality of preceptor and mentorship programs	3.58	3.28	2.94	3.09	3.50
Employer-supported educational opportunities	3.56	3.39	3.09	3.32	3.67
Quality of patient care where you work	4.01	4.18	3.78	4.18	4.48
Feeling that work is meaningful	4.22	4.25	4.14	4.26	4.41
Recognition for a job well done	3.38	3.39	3.49	3.58	3.83
How satisfied are you with the nursing profession overall?	4.12	4.15	3.97	3.99	4.13

Note: Data are weighted to represent all RNs with active licenses.

Future Nursing Work Plans

RNs were asked about their plans for the next five years, with regard to nursing. Table 3.46 presents the responses of currently working RNs who live in California for each survey year. Since 1993, over half of respondents plan to work approximately as much as they do now, which has increased from 53.1 percent in 2006 to 60.2 percent in 2010. About 15 percent plan to reduce their hours of nursing work and this share had been relatively stable since 1993, but decreased by nearly 5 percentage points in 2010. Thirteen percent planned to increase their hours of nursing work, which is the highest percentage on record. In each survey since 2004, about 3 percent of nurses plan to leave nursing entirely, but not retire; in 2010, this percentage dropped to 2.0 percent. In 2010, 9.5 percent of working nurses said they plan to retire within five years, compared to 12.8 percent in 2006.

Table 3.46 Plans for the next five years of RNs who resided in California and were employed in nursing at the times of the surveys, by survey year

	1990	1993	1997	2004	2006	2008	2010
Plan to work approximately as much as now	46.1%	60.1%	57.1%	56.7%	53.1%	54.6%	60.2%
Plan to reduce hours of nursing work	32.7%	21.8%	24.7%	22.1%	21.6%	19.8%	15.2%
Plan to increase hours of nursing work	6.7%	8.4%	8.5%	7.2%	9.5%	10.1%	13.1%
Plan to leave nursing entirely, but not retire	14.6%	9.8%	9.7%	3.4%	3.0%	3.1%	2.0%
Plan to retire	*	*	*	10.6%	12.8%	12.4%	9.5%
Number of cases	2,219	2,160	2,422	3,717	3,694	4,037	4,660

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

*Data not available

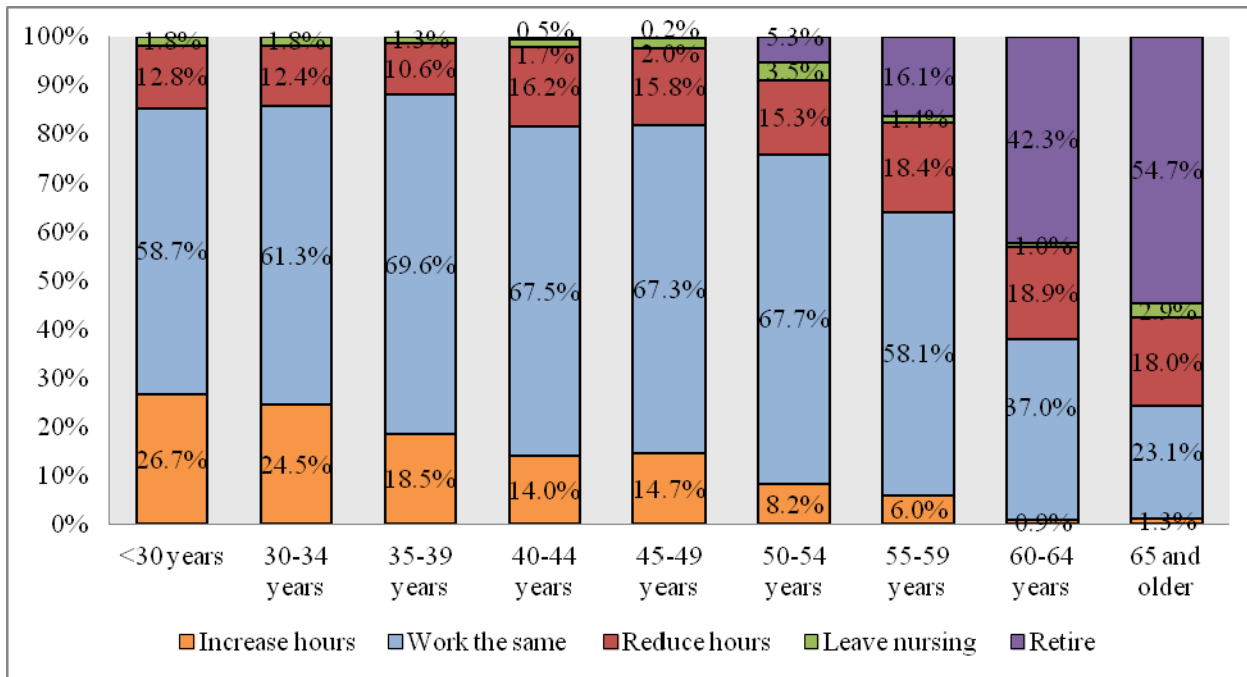
Table 3.47 and Figure 3.19 examine these responses by age group. The share of nurses that plans to maintain the same number of hours of nursing work increases with age until about 54 years, and then declines precipitously afterward, however, the percentage increased in all age groups from 2008. The share of nurses that reported they “plan to increase hours of nursing work” is higher among younger nurses, likely reflecting the tendency of younger nurses with children to work less, with plans to increase their hours as their children get older. In 2010, nurses in all age categories indicated they planned to increase nursing hours over the next five years at higher percentages than was reported in 2008. More than half of RNs over 65 years old plan to retire within five years, and 27 percent of nurses between 55 and 64 years old plan to retire within five years. The share of RNs in older age groups who plan to retire within five years dropped notably between 2008 and 2010, a decline of 5.5 percent for nurses ages 55 to 64, and 15.1 percent for nurses 65 years and older.

Table 3.47 Future plans of RNs who resided in California and were employed in nursing at the times of the surveys, by age group, 2010

	Under 35 years		35-44 years		45-54 years		55-64 years		65 years and older	
	2008	2010	2008	2010	2008	2010	2008	2010	2008	2010
Plan to work approximately as much as now	54.8%	60.0%	62.1%	68.5%	65.4%	67.5%	41.2%	49.3%	14.9%	23.1%
Plan to reduce hours of nursing work	21.1%	12.6%	19.5%	13.5%	19.9%	15.5%	20.8%	18.6%	12.8%	18.0%
Plan to increase hours of nursing work	19.3%	25.5%	15.6%	16.3%	8.0%	10.9%	2.3%	3.9%	0.6%	1.3%
Plan to leave nursing entirely, but not retire	4.7%	1.8%	2.3%	1.5%	2.8%	2.9%	3.3%	1.2%	2.1%	2.9%
Plan to retire	0.0%	0.0%	0.5%	0.3%	3.9%	3.2%	32.5%	27.0%	69.8%	54.7%

Note: Number of cases=4,660. Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Figure 3.19 Future plans of RNs who resided in California and were employed in nursing at the times of the surveys, by age group, 2010

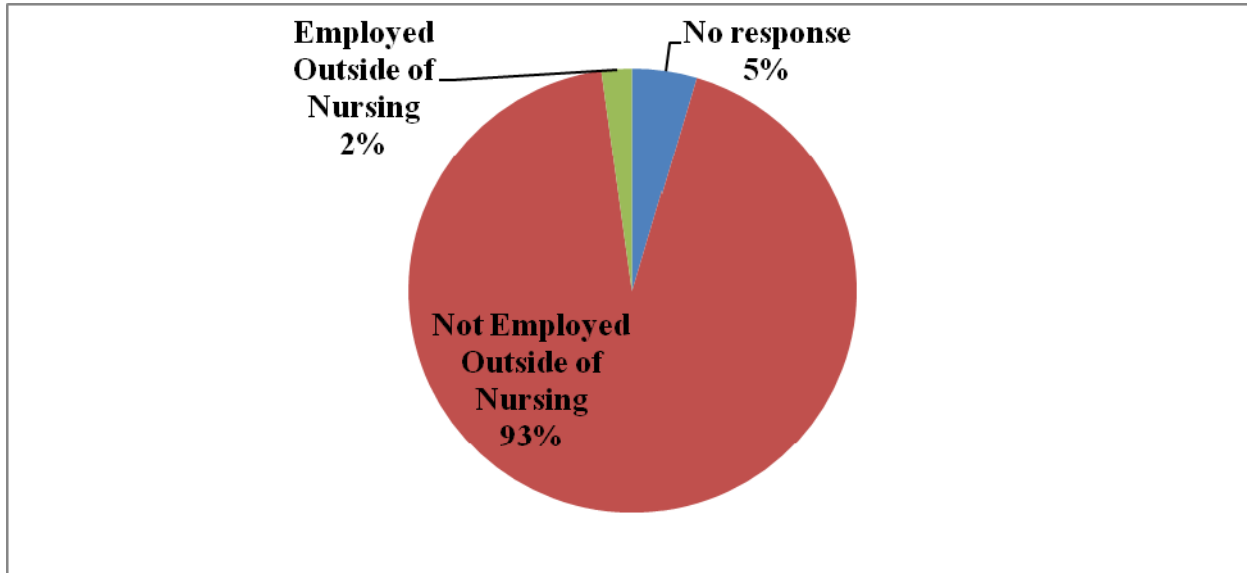


Note: Number of cases=4,660. Data are weighted to represent all RNs with active licenses.

Employment Outside of Nursing

RNs were asked in 2010 to report if they were employed outside nursing even if they were employed in nursing. Over 93 percent of working RNs residing in California reported they did not hold a non-nursing job (Figure 3.20). Of the 2.2 percent that did hold a non-nursing job, 64 percent reported the additional job required their nursing knowledge (Table 3.48). Most non-nursing jobs were in health services (32.7%) and retail sales (18.2%) (Table 3.49). Over 29 percent of working RNs with a non-nursing job indicated that their non-nursing job was in an “other” category. The most common other jobs were in information technologies (22.5%), construction (7.7%), electrical engineering (7.7%), research (6.6%), and photography (5.8%).

Figure 3.20 Employment outside of nursing for working RNs residing in California, 2010



Note: Number of cases=4,726. Data are weighted to represent all RNs with active licenses.

Table 3.48 Employment outside of nursing requires nursing knowledge as reported by working RNs residing in California who have a position outside of nursing, 2010

	2010
No	31.2%
Yes	64.0%
No response	4.8%
Number of Cases	121

Note: Data are weighted to represent all RNs with active licenses.

Table 3.49 Field outside of nursing as reported by working RNs residing in California who have a position outside of nursing, 2010

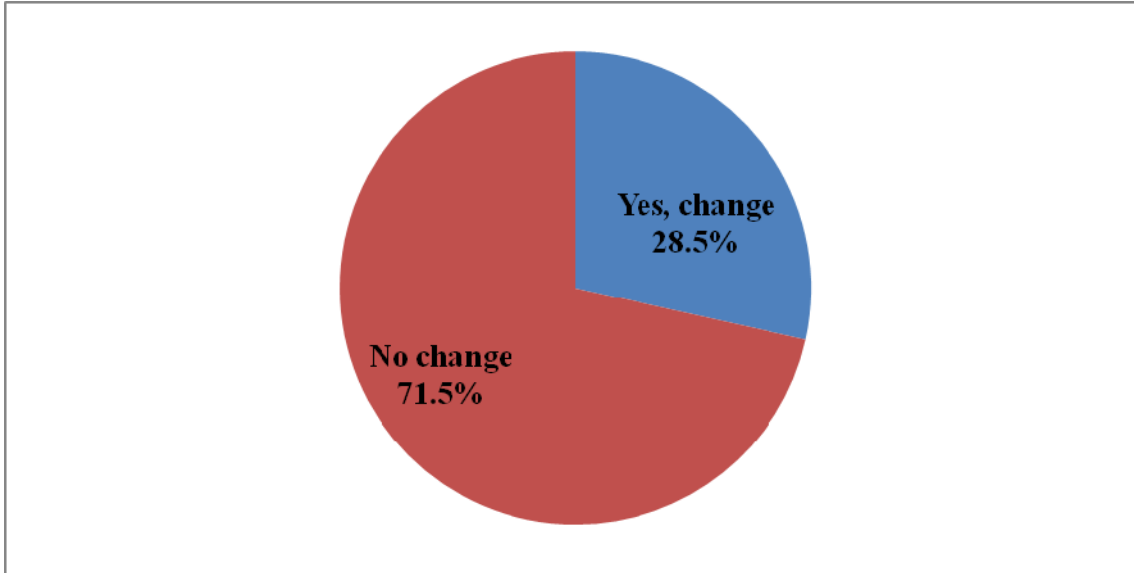
	2010
Health Services	32.7%
Retail sales	18.2%
Education	9.5%
Financial Services	10.0%
Consulting	6.8%
Other	28.3%
Number of Cases	121

Note: Data are weighted to represent all RNs with active licenses.

Changes in Employment Status

In 2010, for the first time RNs were asked about employment status changes in the past year, regardless of current employment status. Nearly 29 percent of RNs residing in California reported a change in their employment status in 2010 (Figure 3.21). Table 3.50 presents the types of employment changes with the most common change being a decrease in working hours (26.3%), followed by a new position with the same employer (20.6%), and an increase in hours (19.9%). Nearly 18 percent reported an “other” change, of which the most commonly reported was retirement (17.4%), disability (5.8%), being laid off (5.8%), being unemployed (4.9%), and having more than one job (3.9%).

Figure 3.21 Change in employment status as reported by RNs residing in California, 2010



Note: Number of cases=5,413. Data are weighted to represent all RNs with active licenses.

Table 3.50 Type of change in employment status as reported by RNs who experienced a change in employment status in 2010 and residing in California, 2010

	All RNs who experienced a change, 2010
Increase hours	19.9%
Decrease hours	26.3%
New RN job	8.7%
Left RN job	8.4%
New Position, Same Employer	20.6%
Same Position, New Employer	10.0%
New Position, New Employer	16.7%
Other	17.9%
Number of Cases	1521

Note: Number of cases=1,521. Data are weighted to represent all RNs with active licenses.

RNs were asked what factors may have played a role in employment changes during the previous year (Table 3.51). A “mean score” for each item can be obtained by computing the average score, with 1 point given for “not at all important” and 4 points for “very important.” RNs reported as very important factors salary (34.4%), change in financial status (25.3%), wanting to work more convenient hours (25.3%), other family responsibilities (24.7%), and promotion (22.2%).

Table 3.51 Factors important to changes in employment status as reported by RNs residing in California who experienced a change in employment status, 2010

	Not at all Important	Somewhat Important	Important	Very Important
Retired	83.3%	1.9%	4.7%	10.0%
Childcare responsibilities	72.9%	2.4%	6.1%	18.7%
Other Family responsibilities	55.4%	6.1%	13.9%	24.7%
Salary	39.6%	7.2%	18.9%	34.4%
Laid off	86.2%	1.4%	2.7%	9.7%
Change spouse/partner work situation	77.2%	2.3%	6.1%	14.4%
Change in financial status	57.8%	5.6%	11.3%	25.3%
Relocation	82.3%	2.0%	4.4%	11.3%
Promotion	64.9%	3.3%	9.6%	22.2%
Change in Health Status	77.8%	3.8%	5.4%	13.0%
Wanted more convenient hours	58.5%	5.0%	11.2%	25.3%
Dissatisfied with Job	66.8%	6.3%	8.9%	18.1%
Other	85.5%	0.3%	3.2%	11.1%

Note: Number of cases=1,423. Data are weighted to represent all RNs with active licenses.

Salary was ranked highest among all groups, regardless of the type of change, as a factor for their change in employment status, except for those who decreased hours who indicated more often wanting to work more convenient hours, and those who stopped working as an RN rated retirement highest. Changes in financial status and other family responsibilities were also frequently rated as important factors (Table 3.52).

Table 3.52 Factors important to changing employment status by type of change as reported by RNs residing in California who experienced a change in employment status, 2010

1 through 4 scale; 1=not at all important; 4=very important	Increased Hours	Decreased hours	New RN position	Stopped Working as RN	Changed RN position
Retired	1.30	1.37	1.35	2.20	1.33
Childcare responsibilities	1.80	1.72	1.67	1.52	1.65
Other Family responsibilities	2.36	2.06	2.05	1.78	2.10
Salary	2.89	2.17	2.78	1.83	2.70
Laid off	1.37	1.33	1.25	1.53	1.38
Change spouse/partner situation	1.68	1.57	1.53	1.37	1.65
Change in financial status	2.39	1.98	2.10	1.69	2.14
Relocation	1.43	1.24	1.46	1.33	1.59
Promotion	2.00	1.48	2.36	1.46	2.20
Change in Health Status	1.54	1.57	1.57	1.64	1.48
Wanted more convenient hours	2.13	2.28	1.91	1.77	2.15
Dissatisfied with Job	1.56	1.72	1.92	1.81	2.08
Other	1.39	1.52	1.33	1.17	1.35
Number of Cases	285	368	109	121	654

Note: Data are weighted to represent all RNs with active licenses.

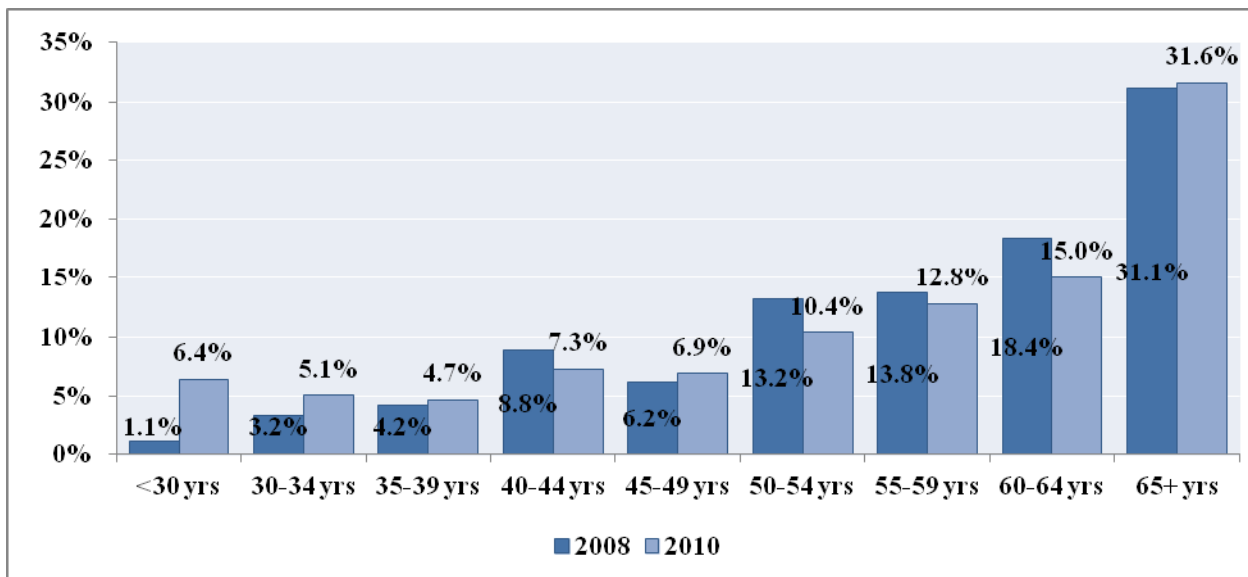
Chapter 4. Profile of Registered Nurses with Active Licenses Not Working in Nursing

About 13 percent of nurses with active California licenses who lived in California were not working in nursing jobs in 2010 (Chapter 2, Table 2.1). Because these nurses had active California licenses at the time the survey sample was selected, they are qualified to obtain a nursing position in this state. In this chapter, we examine the demographics and education of RNs who do not work in nursing, and analyze their responses to a series of survey questions specifically directed to understand better the reasons they are not working in nursing. These nurses are of particular interest, since they represent a group who could potentially be recruited to return to nursing.

Demographic Characteristics

RNs who have active licenses but are not working in nursing are older than working nurses, as seen in Figure 4.1. The average age of RNs who are not working in nursing is 55.7 whereas the average age of working RNs is 46.3 years (Chapter 2, Table 2.5). The share of licensed RNs not working in nursing rises with age. Almost 60 percent of RNs who are not working as nurses are 55 years and older. The greatest percentage of RNs who are not working in nursing are 65 years and older (31.6%). Between 2008 and 2010, there was a notable increase in employment rates of older nurses, and a decline in the employment rate of younger RNs. A larger share of non-working RNs was younger than 40 years old in 2010 (16.2%) as compared with 2008 (8.5%). This is most likely related to reported difficulties of recently graduated RNs in obtaining nursing employment in the midst of the current recession.

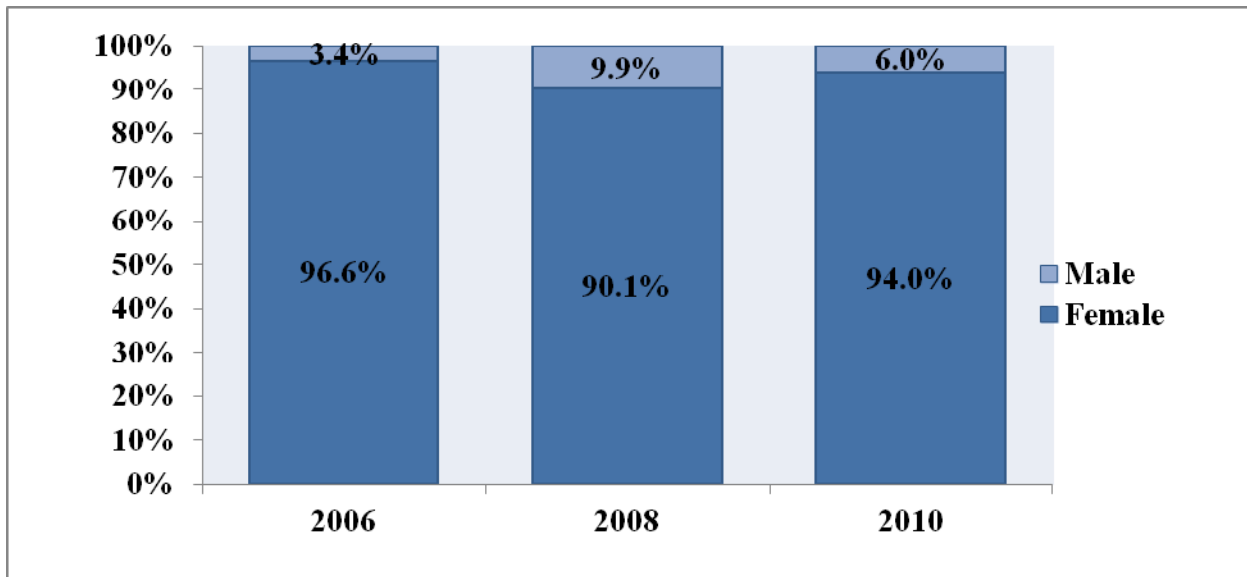
Figure 4.1 Age distribution of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2008 & 2010



Note: 2010 number of cases=825. Data might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Six percent of RNs not working in nursing in 2010 were male, as seen in Figure 4.2. Statewide, 10.7 percent of RNs with active licenses are male (Chapter 2, Figure 2.3).

Figure 4.2 Gender of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2010



Note: 2010 number of cases=819. Data are weighted to represent all RNs with active licenses.

The ethnic and racial distribution of RNs who are not working is different from that of the RN population as a whole (Table 4.1 and Chapter 2, Figure 2.4). Sixty-nine percent of RNs who are not working in nursing positions are White, but only 54 percent of the statewide RN population is White. Nineteen percent of California’s RNs are Filipino, but Filipinos account for only 8.8 percent of RNs not working in nursing.

Table 4.1 Racial/ethnic backgrounds of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2010

	2006	2008	2010
White, not Hispanic	81.7%	78.6%	69.1%
Black/African-American	2.4%	3.8%	5.2%
Hispanic	1.7%	2.3%	5.0%
Filipino	6.5%	7.5%	8.8%
Other Asian	3.8%	5.4%	8.2%
Native Hawaiian or Other Pacific Islander	<0.1%	<0.1%	0.3%
Native American/American Eskimo	0.1%	0.4%	0.2%
Mixed	3.5%	1.5%	3.1%
Other	0.4%	0.4%	0.1%
Number of cases	644	707	807

Note: Column might not total 100% due to rounding. Data are weighted to represent all RNs who are not working in nursing with active licenses.

Given the under-representation of non-White RNs in the population of RNs not working in nursing, it is not surprising that non-working RNs are less likely to speak other languages than the RN population as a whole (Table 4.2 and Chapter 2, Table 2.11).

Table 4.2 Language fluency of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2010

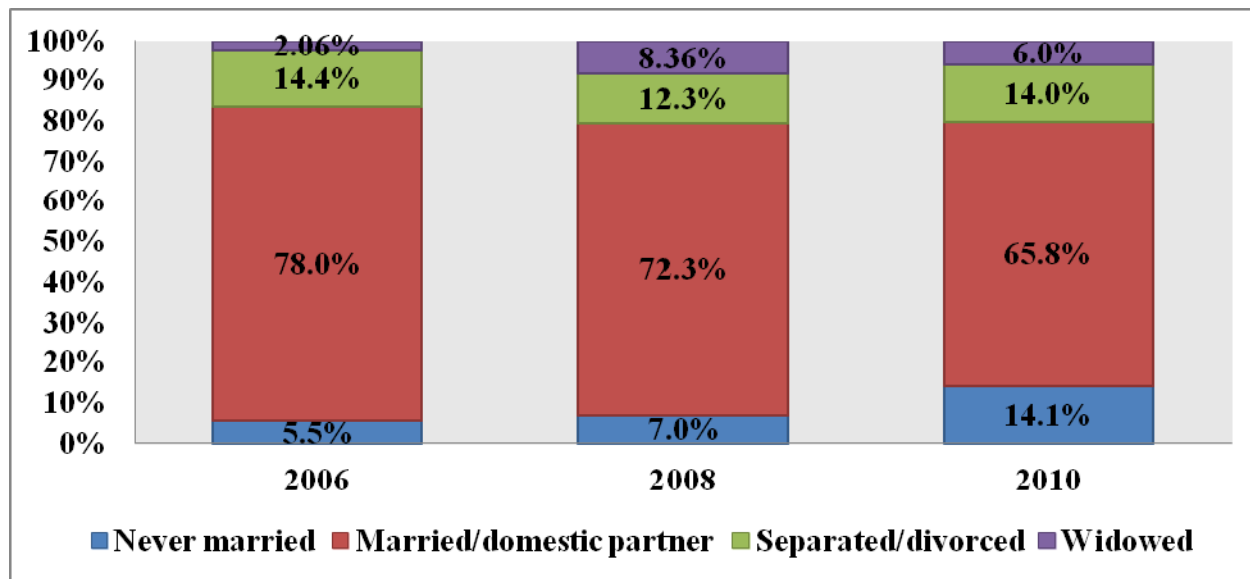
	Working RNs			Non-working RNs		
	2006	2008	2010	2006	2008	2010
Tagalog	15.8%	*	*	5.9%	*	*
Tagalog or other Filipino language	*	18.1%	18.9%	*	6.1%	6.9%
Spanish	11.1%	12.1%	10.8%	8.8%	7.1%	10.1%
Mandarin	1.4%	2.3%	1.9%	0.1%	1.5%	1.4%
Korean	1.1%	1.3%	1.5%	0.1%	0.1%	1.9%
Hindi	0.7%	*	*	0.8%	*	*
Hindi or other South Asian language	*	1.5%	1.6%	*	0.1%	0.2%
Cantonese	0.8%	1.6%	1.1%	0.7%	0.8%	0.3%
Vietnamese	0.6%	0.7%	0.8%	0.0%	0.0%	0.6%
French	*	*	1.3%	*	*	1.7%
German	*	*	0.7%	*	*	0.6%
Other	8.1%	8.0%	6.1%	10.2%	7.9%	3.9%

* Category was not offered in the survey.

Note: RNs could indicate fluency in more than one language. Data are weighted to represent all RNs with active licenses who are not working.

The share of non-working RNs that is married is 65.8 percent (Figure 4.3), which is lower than the share in the overall population, 67.7 percent (Chapter 2, Figure 2.6).

Figure 4.3 Marital status of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2010



Note: 2010 number of cases=811. Data might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses who are not working.

As seen in Table 4.3, nurses who are not working in nursing are less likely than the statewide active RN population (Chapter 2, Table 2.13) to have children living at home. Among the statewide working RN population, about 53 percent have some children living at home, but only 33 percent of non-working RNs have children at home. The share of non-working RNs with children living at home dropped between 2006 and 2010.

Table 4.3 Number of children living in the homes of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2010

	Working RNs			Non-working RNs		
	2006	2008	2010	2006	2008	2010
None	53.1%	49.2%	47.5%	47.3%	68.7%	67.3%
One	18.4%	22.0%	22.3%	17.5%	12.2%	15.9%
Two	20.0%	19.7%	21.4%	25.0%	12.2%	13.2%
Three	6.4%	6.5%	6.6%	7.4%	3.9%	2.4%
Four or more	2.1%	2.6%	2.2%	2.8%	3.0%	1.2%
Number of cases	3,406	4,153	4,531	579	737	793

Note: Column might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Nurses who are not working in nursing positions are more likely to have children who are older as opposed to younger (Table 4.4 and Chapter 2, Table 2.14). This is consistent with non-working RNs being older themselves. The percentages are less in 2010 for non-working nurses than in previous years with children of all ages, except for those from birth to two years where about 22 percent of non-working RNs with children at home have infants and toddlers compared to almost 17 percent in 2008.

Table 4.4 Percent of registered nurses who are not working in nursing positions with children living at home who have children in specified age groups, for RNs with active California licenses and California addresses, 2006-2010

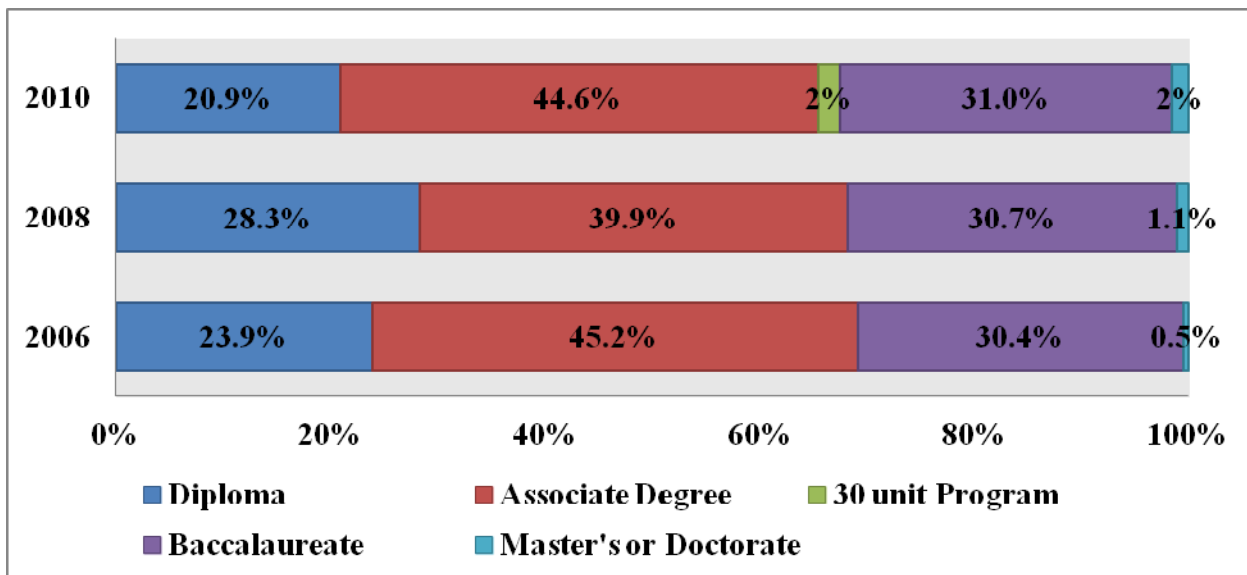
Ages of children	Working RNs			Non-working RNs		
	2006	2008	2010	2006	2008	2010
Birth to 2 years	16.9%	18.9%	16.9%	20.4%	16.7%	22.1%
3-5 years	16.8%	16.3%	16.3%	15.3%	20.5%	14.7%
6-12 years	32.8%	33.5%	36.8%	30.9%	36.1%	28.0%
13-18 years	33.1%	37.4%	32.2%	35.6%	40.3%	27.5%
Over 18	38.3%	34.7%	31.0%	38.4%	38.5%	34.3%

Note: 2010 working RN Number of cases=2,331. 2010 non-working RN n=234. Some nurses have children in more than one age group, so columns will not total 100%. Data are weighted to represent all RNs with active licenses.

Educational Preparation

Most RNs who are not working in nursing positions received their initial RN education in an associate degree program, as seen in Figure 4.4. Diploma-educated RNs are somewhat over-represented in the population of RNs not working in nursing; 20.9 percent of RNs not working in nursing are diploma-educated, as compared with 12.3 percent of working RNs (Chapter 2, Figure 2.10). This is not surprising; diploma education is more common among older RNs, who are less likely to hold nursing positions.

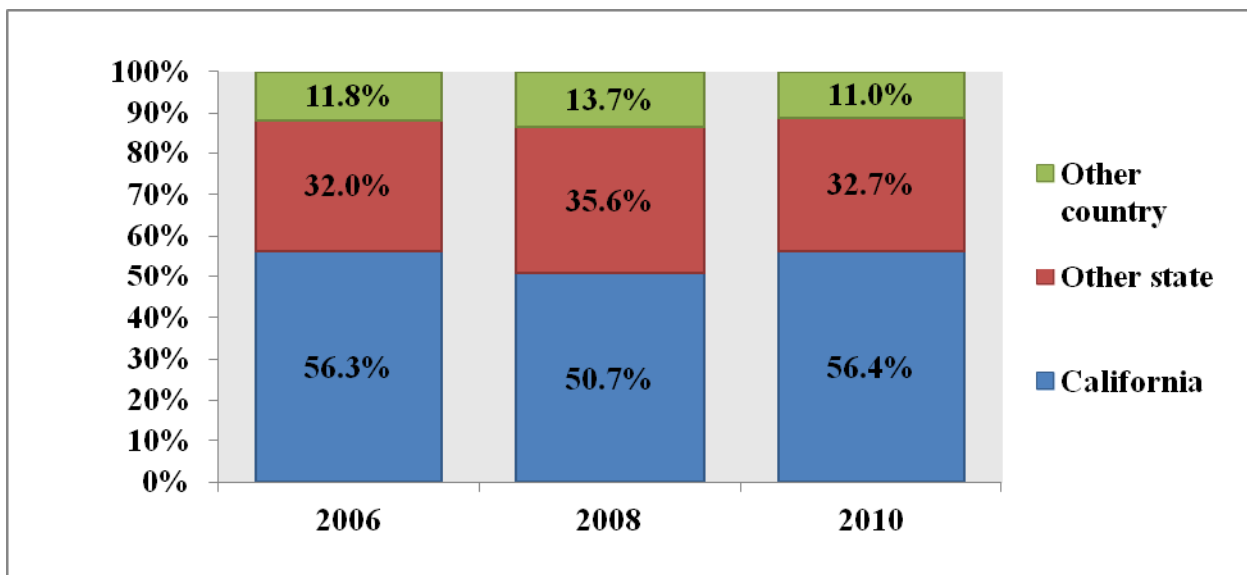
Figure 4.4 Pre-licensure education of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2010



Note: 2010 number of cases=814. Data might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

The majority of RNs not working in nursing positions received their initial nursing education in California (56.4%), as seen in Figure 4.5. Eleven percent was educated in another country, while 23 percent of working RNs were educated in other countries (Chapter 2, Table 2.19).

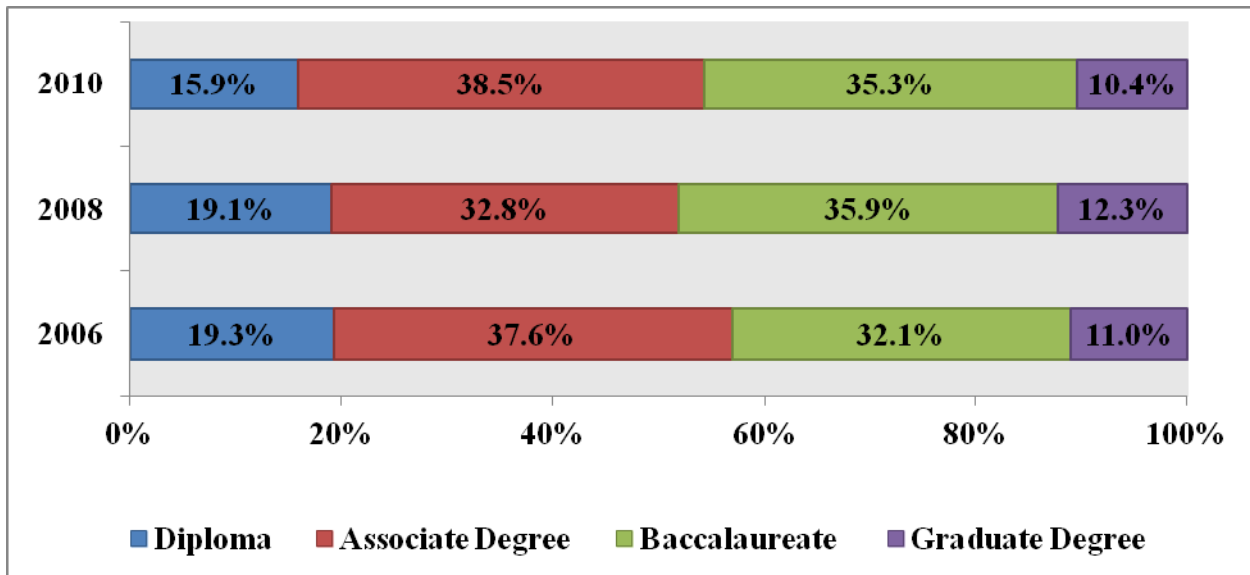
Figure 4.5 Location of education of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2010



Note: 2010 number of cases= 815. Data might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Figure 4.6 presents the highest nursing education received by RNs who are not working in nursing positions. Fifty-three percent of working RNs report that their highest education is at least a baccalaureate degree (Chapter 2, Figure 2.13); however, only 45.7 percent of non-working RNs had a baccalaureate or higher degree in 2010.

Figure 4.6 Highest level of nursing education of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2010



Note: 2010 number of cases=814. Data might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

RNs not working in nursing are more likely to have certification than RNs employed in nursing jobs in any specialty area except nursing anesthetist (Table 4.5 and Chapter 2, Table 2.25).

Table 4.5 Certifications received from the California Board of Registered Nursing by registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2010

	Working RNs			Non Working RNs		
	2006	2008	2010	2006	2008	2010
No additional certifications	76.3%	77.9%	77.3%	78.9%	69.2%	73.6%
Nurse Anesthetist	0.6%	0.4%	0.4%	0.6%	0.3%	0.2%
Nurse Midwife	2.0%	0.6%	0.4%	1.0%	0.1%	0.5%
Nurse Practitioner	6.6%	7.1%	5.6%	5.4%	9.2%	6.1%
Public Health Nurse	15.5%	16.9%	14.9%	16.7%	21.0%	16.9%
Psychiatric/Mental Health Nurse	3.4%	1.1%	1.2%	0.5%	1.5%	2.1%
Clinical Nurse Specialist	2.8%	2.7%	2.7%	2.7%	5.6%	3.5%
Number of cases	3,282	3,532	4368	549	737	774

Note: Columns may not total to 100% because respondents could report more than one certification. Data are weighted to represent all RNs with active licenses.

Last Job in the Nursing Field

Nurses with active licenses who are not working in nursing positions were asked about the last time they worked in nursing. Many non-working RNs did not answer these questions (14.3%). Analysis of the non-respondents indicates that nearly half of them graduated from their initial RN education program in the 2000s. Questions about their last nursing employment may not be applicable if these recent graduates were not able to find nursing work and thus cannot report about their previous RN job. These non-respondents are thus not represented in the discussion below.

As seen in Table 4.6, 33 percent of RNs who lived in California in 2010 and did not work in nursing last worked in the field when they were under 45 years old. Another 33 percent were 60 years or older when they

stopped working in nursing. The mean age at which California-resident RNs last held a nursing position was 50.9 years.

Table 4.6 Age at which registered nurses with active California licenses last worked in the profession, for registered nurses who are not working in nursing positions and have active California licenses and reside in California, by survey year

	1990	1993	1997	2004	2006	2008	2010
Under 35	36.3%	28.0%	29.8%	18.6%	25.2%	13.7%	15.9%
35-44	28.6%	33.7%	38.2%	21.6%	32.8%	19.3%	17.4%
45-54	15.9%	21.0%	22.1%	22.2%	23.5%	20.5%	19.2%
55-59	8.8%	7.0%	6.3%	13.6%	9.9%	13.8%	14.0%
60-64	8.3%	5.8%	2.2%	14.4%	6.0%	17.1%	17.2%
65 and older	2.1%	4.5%	1.5%	9.6%	2.7%	15.7%	16.3%
Mean	41.4	42.5	40.6	48.2	43.3	51.2	50.9
Number of cases	444	245	274	500	568	617	733

Note: In the 1990, 1993, 1997, and 2004 surveys, the question requested the year in which the nurse last worked as a RN for at least six months. The 2006, 2008, 2010 surveys asked for the year in which the nurse last worked for pay as a RN. Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

About 51 percent of RNs who have active licenses and live in California but do not work in nursing have been out of nursing for less than five years, as seen in Table 4.7. The mean number of years that nurses have been out of the field in 2010 was nearly 7.0 years.

Table 4.7 Length of time since registered nurses with active California licenses last worked as a registered nurse, for registered nurses who are not working in nursing positions and have active California licenses and California addresses, by survey year

	1990	1993	1997	2004	2006	2008	2010
One year ago or less	11.7%	19.2%	25.5%	13.1%	32.3%	22.1%	26.4%
2-4 years ago	25.9%	3.6%	25.2%	31.2%	27.8%	27.2%	24.7%
5-9 years ago	21.4%	27.3%	22.6%	30.8%	18.6%	21.4%	22.0%
10-14 years	16.9%	13.9%	14.2%	9.8%	11.5%	13.4%	11.4%
15-24 years	14.6%	6.1%	9.1%	11.2%	8.2%	12.5%	11.9%
25 or more years	9.5%	2.8%	3.3%	3.9%	1.7%	3.5%	3.7%
Mean	10.0	6.7	6.7	7.5	5.6	7.4	7.0
Number of cases	444	245	274	519	568	617	733

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Most nurses with active licenses who do not hold nursing positions worked in the field for at least 15 years, as seen in Table 4.8. Sixty-four percent of California residents who are not working in nursing report that they have at least 15 years of nursing experience. Eleven percent have fewer than 5 years of experience.

Table 4.8 Number of years nurses practiced registered nursing before stopping work, for registered nurses who have active California licenses and have California addresses, by survey year

	1990	1993	1997	2004	2006	2008	2010
Less than 5 years	14.9%	10.8%	14.9%	8.0%	14.9%	9.3%	11.4%
5-9 years	22.5%	26.4%	22.1%	16.4%	20.3%	12.2%	11.5%
10-14 years	23.9%	23.6%	25.4%	14.7%	20.2%	14.1%	13.2%
15-24 years	22.8%	24.0%	25.4%	25.4%	26.1%	22.4%	22.0%
25 or more years	16.0%	15.2%	12.3%	35.5%	18.5%	41.9%	41.9%
Mean	14.4	14.2	13.3	19.9	15.1	21.6	21.6
Number of cases	457	250	276	524	568	689	744

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Reasons for Not Working in Nursing

Nurses with active licenses who are not working in nursing positions were asked to rate the importance of factors in their decision to not hold a nursing position. As seen in Table 4.9, the factors most frequently identified as “very important” were retirement (23.6%), stress on the job (21.9%), family responsibilities (19.7%), childcare responsibilities (18.1%), and other job dissatisfaction (15.6%). The share of RNs who said that difficulty finding a nursing position was a very important reason for not working in nursing, went from 4.6 percent in 2008 to 13.7 percent in 2010. Nearly 11 percent of RNs also reported that being laid off was an important reason not to hold a nursing position.

Table 4.10 examines these responses by the number of years since the nurse last worked in nursing, and by age. The first column of Table 4.10 presents the share of nurses who rated a factor as important or very important among those who last worked in nursing within the previous five years. The second column presents the share rating a factor as important or very important for nurses who have been out of nursing work for more than five years. The most important reasons among nurses who last held a nursing position within the past five years were retirement (44.7%), stress on the job (41.4%), other job dissatisfaction (34.8%), and other family responsibilities (28.8%). The most important reasons for not working in nursing among nurses who have not held a nursing position for more than five years were other family responsibilities (33.7%), stress on the job (33.6%), childcare responsibilities (29.8%), retirement (27.8%), and other dissatisfaction with job (27.5%).

The importance of factors that influence a nurse’s decision not to work in a nursing position varies with the age of the nurse, as seen in the last two columns of Table 4.10. The third column presents the share of nurses younger than 55 years of age who rated each factor as important or very important. The last column provides the same data for nurses 55 years and older. Among nurses younger than 55 years, the most important factors for not working in nursing were childcare responsibilities (37.2%), other family responsibilities (34.3%), stress on the job (33.9%), and difficulty finding a nursing position (33.4%). The most important reasons for not working in nursing among nurses 55 years and older were retirement (54.3%), stress on the job (36.9%), other job dissatisfaction (28.3%), and other family responsibilities (26.6%).

Table 4.9 Importance of factors in the decision to not hold a nursing position, for registered nurses who have active California licenses, and reside in California, 2008 and 2010

	Not at all important/ Does not apply		Somewhat important		Important		Very important	
	2008	2010	2008	2010	2008	2010	2008	2010
Retired	62.1%	60.9%	5.5%	4.2%	9.9%	11.3%	22.5%	23.6%
Childcare responsibilities	71.4%	75.4%	2.9%	2.7%	3.8%	3.8%	22.0%	18.1%
Other family responsibilities	60.7%	64.2%	5.6%	6.1%	11.3%	10.0%	22.5%	19.7%
Moving to a different area	86.5%	88.2%	0.4%	1.7%	4.0%	3.6%	9.1%	6.5%
Stress on the job	41.5%	52.1%	11.0%	12.2%	17.2%	13.8%	30.3%	21.9%
Job-related illness/injury	80.4%	86.6%	2.3%	2.4%	5.0%	3.6%	12.4%	7.4%
Non-job-related illness/injury	78.3%	81.0%	2.8%	1.9%	5.3%	5.3%	13.6%	11.9%
Salary	63.7%	71.5%	8.5%	8.4%	14.3%	11.3%	13.5%	8.8%
Dissatisfied with benefits	77.9%	81.0%	7.1%	7.4%	9.7%	5.6%	5.3%	6.1%
Other dissatisfaction with your job	51.2%	62.3%	11.5%	9.0%	17.3%	13.1%	19.9%	15.6%
Dissatisfaction with the nursing profession	64.3%	69.7%	12.7%	11.9%	12.8%	11.5%	10.2%	6.8%
Travel	78.9%	84.5%	7.2%	5.8%	8.7%	5.9%	5.2%	3.8%
Wanted to try another occupation	74.6%	79.1%	4.7%	3.4%	7.6%	7.1%	13.1%	10.5%
Inconvenient schedules in nursing jobs	67.0%	71.0%	6.1%	9.1%	11.4%	9.3%	15.5%	10.6%
Difficult to find a nursing position	90.3%	77.4%	1.6%	3.3%	3.5%	5.6%	4.6%	13.7%
Laid off	*	90.2%	*	1.3%	*	2.8%	*	5.7%
Other	*	83.4%	*	0.9%	*	5.2%	*	10.5%

Note: 2010 number of cases=797. Rows might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

*Question not asked in this year.

Table 4.10 Share of nurses rating factors as “important” or “very important” in the decision to not work in nursing, for registered nurses with active California licenses residing in California, by how long since they last worked as a RN and by age, 2010

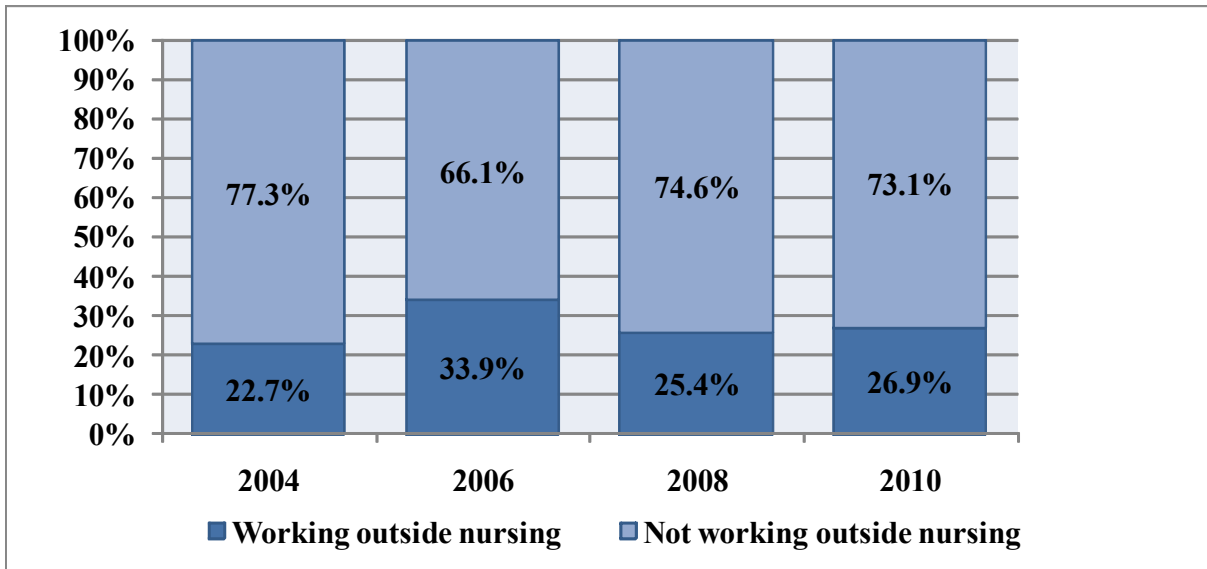
	Years since last worked in nursing		Age of nurse	
	5 years or less	More than 5 yrs	Under 55 yrs	55 yrs and older
Retired	44.7%	27.8%	6.0%	54.3%
Childcare responsibilities	18.4%	29.8%	37.2%	11.7%
Other family responsibilities	28.8%	33.7%	34.2%	26.6%
Moving to a different area	10.1%	10.6%	14.0%	7.5%
Stress on the job	41.4%	33.6%	33.9%	36.9%
Job-related illness/injury	13.3%	8.8%	12.0%	10.3%
Non-job-related illness/injury	21.6%	13.1%	14.2%	19.2%
Salary	18.6%	25.4%	23.8%	17.6%
Dissatisfied with benefits	12.9%	11.5%	11.6%	11.7%
Other dissatisfaction with your job	34.8%	27.5%	29.2%	28.3%
Dissatisfaction with the nursing profession	20.8%	17.6%	19.2%	17.8%
Travel	8.7%	11.5%	8.2%	10.7%
Wanted to try another occupation	14.1%	24.6%	23.0%	13.9%
Inconvenient schedules in nursing jobs	20.1%	22.3%	25.7%	16.1%
Difficult to find a nursing position	19.2%	10.7%	33.4%	9.8%
Laid Off	12.7%	4.5%	10.0%	7.5%
Other	16.0%	12.6%	20.9%	12.2%

Note: Number of cases for years since last worked in nursing=732 (65 respondents for Table 4.9 did not indicate when they stopped working). Number of cases for age of nurse=797. Items that were omitted by respondents who answered at least one of these items were assumed not to apply. Data are weighted to represent all RNs with active licenses.

Employment Status of Nurses Not Working in Nursing

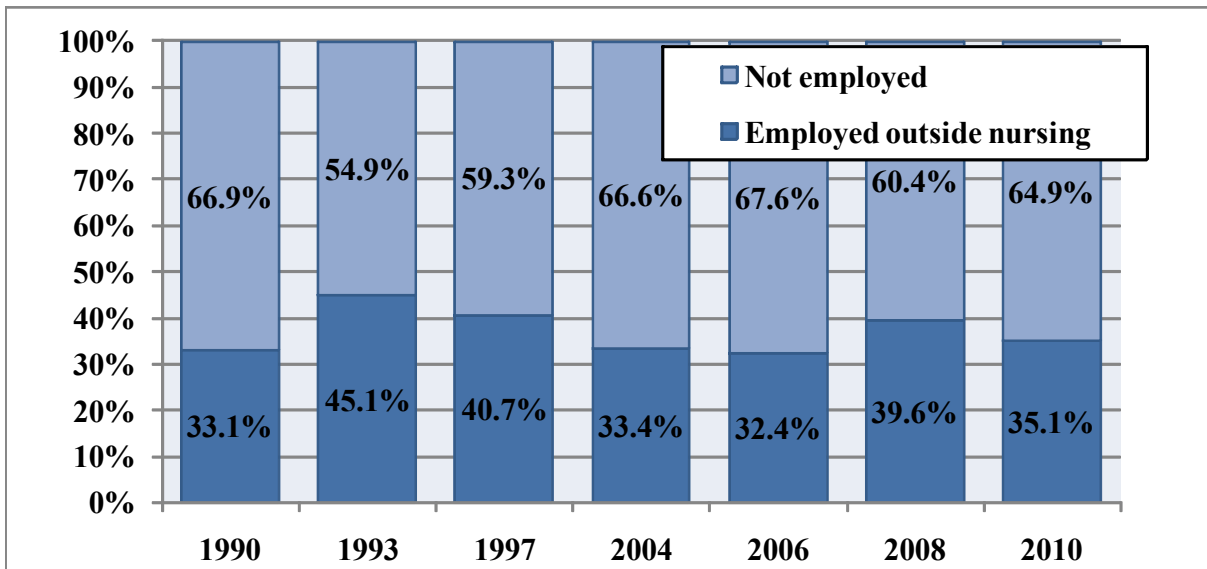
Some nurses who are not employed in nursing positions are employed outside nursing. Figure 4.7 presents the non-nursing employment status of RNs residing in California whom do not work in nursing. In 2010, 26.9 percent of RNs residing in California who were not employed in nursing were working in another field; this is a decrease from 2006, when the share was 34 percent. Figure 4.8 refines these data by focusing on RNs who reported that they were not working in nursing but were not retired. Of these RNs, 35.1 percent of non-retired RNs not working in nursing were employed outside of nursing in 2010. This rate is higher than that observed in 2004 (33.4%) and 2006 (32.4%), but lower than in 2008 (39.6%).

Figure 4.7 Current employment status of registered nurses whose California licenses are active and who live in California, but who are not currently working as RNs, 2004-2010



Note: 2010 number of cases=802. Data (2006-2010) are weighted to represent all RNs with active licenses.

Figure 4.8 Current employment status of non-retired registered nurses with active California licenses who live in California and are not currently employed in nursing, by survey year



Note: 2010 number of cases=761. Data (2006-2010) are weighted to represent all RNs with active licenses.

Table 4.11 presents the number of hours per week that nurses with active licenses employed in non-nursing positions worked. The average number of hours worked per week was 40.7 in 2010, which is the highest ever reported and is likely due to the increase of nurses working more than 48 hours per week. The modal range was 33 to 40 hours per week. In every year of the RN survey, the most common working schedule outside of nursing was 33 to 40 hours per week.

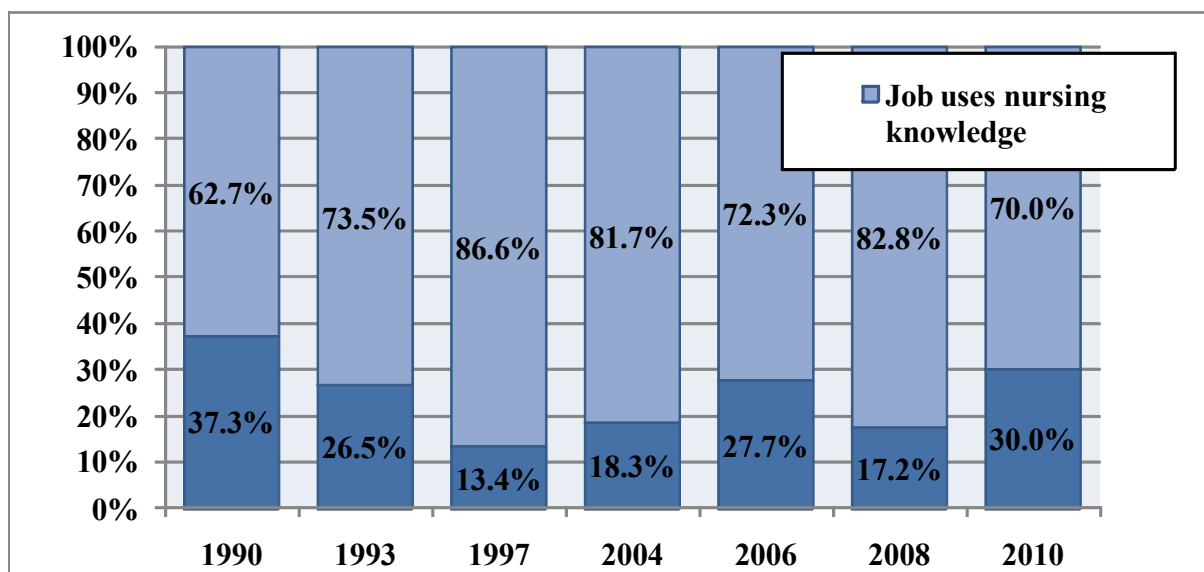
Table 4.11 Number of hours per week nurses work outside the nursing profession, for RNs with active licenses residing in California, by survey year

	1990	1997	2004	2006	2008	2010
8 hours or less	6.0%	4.5%	2.6%	4.2%	1.8%	7.3%
9-16 hours	6.6%	6.3%	12.3%	14.4%	8.5%	10.5%
17-24 hours	11.3%	12.5%	14.9%	15.3%	9.5%	11.6%
25-32 hours	8.6%	13.4%	8.8%	14.4%	17.0%	8.7%
33-40 hours	43.0%	35.7%	37.7%	37.5%	36.2%	32.2%
41-48 hours	8.6%	8.9%	9.7%	4.0%	9.5%	6.3%
More than 48 hours	15.9%	18.8%	14.0%	10.2%	17.8%	23.4%
Mean	35.8	36.0	34.7	33.6	35.8	40.7
Number of cases	151	112	114	200	156	198

Note: This question was not asked in 1993. Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Nurses who work in non-nursing positions were asked if their jobs used their nursing knowledge. As shown in Figure 4.9, 70.0 percent of California residents said their non-nursing job used their nursing knowledge. Nearly 30 percent of non-working RNs in 2010 reported that their jobs outside nursing did not use nursing knowledge, the highest level since 1990.

Figure 4.9 Utilization of nursing knowledge in non-nursing jobs, for nurses with active California licenses residing in California, by survey year



Note: 2010 number of cases=228. Data (2006-2010) are weighted to represent all RNs with active licenses.

As shown in Table 4.12, most non-nursing jobs held by RNs not employed in nursing were in health services (44.5%), as was true among RNs working in nursing. Nearly 39 percent of non-nursing jobs held by RNs not working in nursing were reported in a variety of settings.

Table 4.12 Field outside of nursing as reported by RNs not working in nursing and residing in California who have a position outside of nursing, 2010

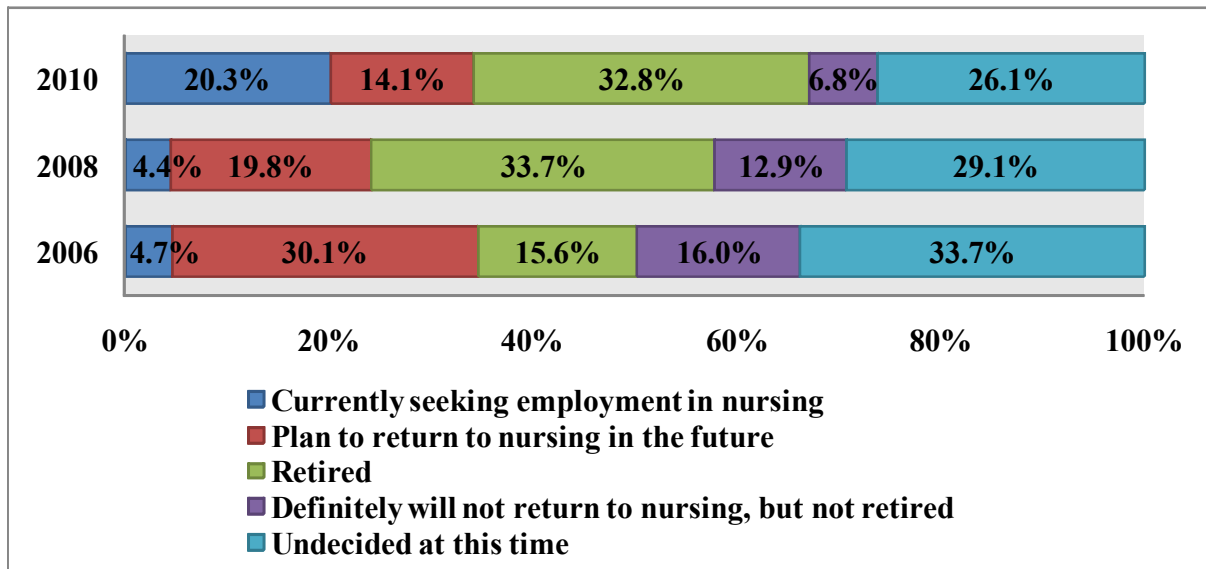
	2010
Health Services	44.5%
Retail sales	11.4%
Education	12.0%
Financial Services	8.5%
Consulting	5.6%
Other	38.7%
Number of cases	207

Note: Data are weighted to represent all RNs with licenses

Future Plans of Nurses with Active Licenses Not Working in the Profession

Registered nurses with active California licenses who were not employed in nursing positions were asked about their future plans. Their responses are summarized in Figure 4.10. More than thirty-four percent said they plan to return to nursing or are currently seeking employment. Thirty-nine percent either were retired or would definitely not return to nursing. More than twenty-six percent said they were undecided about their future plans. The share of RNs that is currently seeking nursing work or definitely plans to return to nursing was higher in 2010 than it was in 2008, and the share that was retired declined between 2008 and 2010.

Figure 4.10 Future plans of California nurses with active licenses not working in the profession, for California residents, 2006-2010



Note: 2010 number of cases=782. Data are weighted to represent all RNs with active licenses.

Table 4.13 examines the plans of nurses who were not working in nursing by survey year and age. In 2010, over sixty percent of the California residing RNs under 35 years of age were seeking nursing work, and nearly 25 percent more were planning to return to nursing in the future. The share of nurses seeking nursing work increased across all age groups between 2008 and 2010, reflecting the effects of the recession. Ninety-five percent of nurses with active licenses aged 65 and older are either currently seeking work or say they may return to nursing in the future.

Table 4.13 Future plans of all California nurses with active licenses not working in the profession and not retired, for California residents, by survey year and age

Survey Year	Intentions regarding returning to nursing	All non-retired RNs not working in nursing	Age at time of survey					
			Under 35	35-44	45-54	55-59	60-64	Over 64
1990 (n=444)	Definitely will not return	36.9%	17.9%	20.5%	34.5%	35.8%	47.6%	69.2%
	May return	53.8%	71.4%	62.2%	56.9%	60.4%	47.6%	28.2%
	Plan to return	9.2%	10.7%	17.3%	8.6%	3.8%	4.8%	2.6%
1993 (n=251)	Definitely will not return	32.3%	36.0%	27.3%	21.8%	32.4%	50.0%	51.9%
	May return	52.6%	40.0%	52.3%	58.2%	61.8%	45.5%	48.1%
	Plan to return	15.1%	24.0%	20.5%	20.0%	5.9%	4.5%	0.0%
1997 (n=283)	Definitely will not return	31.1%	4.2%	28.1%	32.1%	37.1%	60.1%	33.3%
	May return	42.0%	33.3%	47.2%	41.5%	45.7%	30.0%	33.3%
	Plan to return	26.9%	62.5%	24.7%	26.5%	17.1%	10.0%	33.3%
2004 (n=505)	Definitely will not return	35.6%	0.0%	13.6%	28.9%	35.7%	45.3%	59.1%
	May return	38.4%	20.8%	37.5%	42.2%	37.5%	44.0%	35.4%
	Currently seeking work	5.5%	33.3%	3.4%	4.4%	7.1%	6.7%	1.6%
	Plan to return	20.4%	45.8%	45.5%	24.4%	19.6%	4.0%	3.9%
2006 (n=350)	Definitely will not return	19.7%	17.5%	12.8%	21.0%	25.9%	36.8%	8.0%
	May return	41.6%	8.7%	29.0%	52.0%	49.4%	43.5%	70.0%
	Currently seeking work	5.7%	23.3%	<0.1%	3.7%	7.8%	2.1%	7.4%
	Plan to return	33.0%	50.4%	58.2%	23.3%	16.9%	17.6%	14.6%
2008 (n=220)	Definitely will not return	17.5%	6.9%	8.4%	24.2%	26.7%	35.0%	8.8%
	May return	40.2%	31.5%	36.6%	41.1%	46.2%	51.5%	83.4%
	Currently seeking work	7.6%	22.0%	2.4%	4.7%	9.6%	1.8%	6.1%
	Plan to return	34.7%	39.6%	52.6%	30.1%	17.5%	11.7%	1.8%
2010 (n=473)	Definitely will not return	10.2%	0.8%	8.0%	15.7%	14.6%	16.4%	5.0%
	May return	35.7%	12.6%	32.8%	44.0%	41.6%	57.1%	54.2%
	Currently seeking work	32.8%	62.0%	32.4%	23.7%	23.8%	13.7%	16.1%
	Plan to return	21.3%	24.6%	26.9%	16.6%	20.0%	12.8%	24.8%

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Table 4.14 presents the time frame in which nurses who say they plan to return to nursing expect to do so. Over forty percent say they expect to return to nursing within the year. Another 34.7 percent plan to return in one to two years. Nearly 7 percent plan to return in five or more years.

Table 4.14 Time frame within which nurses who are not working in nursing positions but plan to return to nursing plan to do so, for California residents, 2004-2010

	2004	2006	2008	2010
Less than one year	28.0%	39.9%	36.7%	40.4%
1 to 2 years	24.6%	28.3%	33.9%	34.7%
2 to 3 years	14.3%	*	*	*
3 to 4 years	7.4%	14.3%	18.8%	18.1%
4 to 5 years	5.1%	*	*	*
5 or more years	20.6%	17.5%	10.5%	6.8%
Number of cases	175	99	103	87

*Data not available

Note: Columns might not total 100% due to rounding. Data (2006-2010) are weighted to represent all RNs with active licenses.

Nurses with active licenses who lived in California who were not working in a nursing position, and who were undecided as to their future nursing plans, were asked to rate the importance of factors that might affect their decision to return to nursing. Table 4.15 summarizes their responses. The factors most often rated as very

important were flexible work hours (58.3%), availability of re-entry programs and mentoring (56.5%), better nurse-to-patient ratios (48.0%), and better support from nursing management (44.8%).

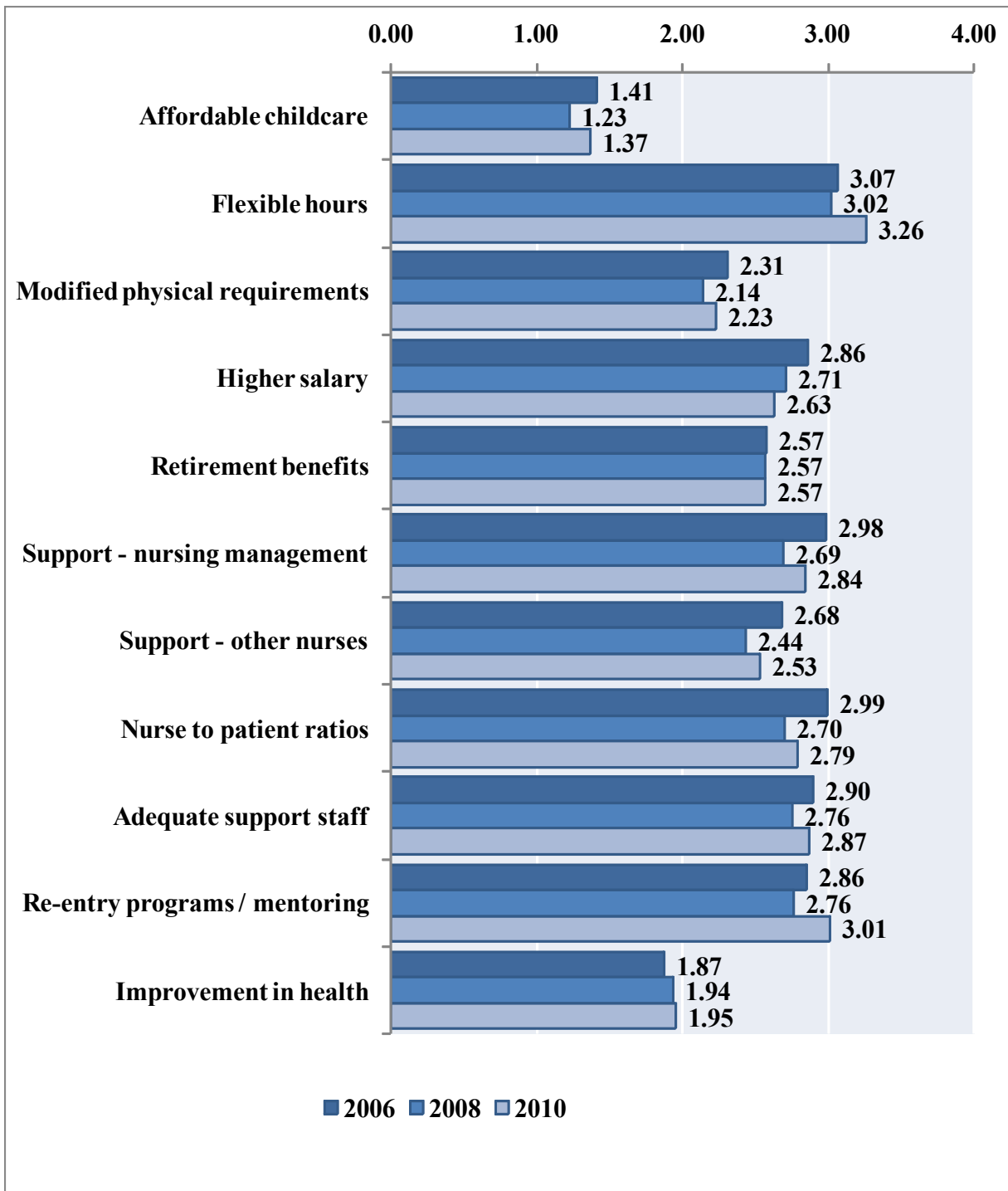
Table 4.15 Importance of factors in the decision to return to nursing for RNs who live in California, have active licenses, but are not working in nursing and are undecided about their future plans, 2010

	Not at all important / Does not apply	Somewhat important	Important	Very Important
Affordable childcare at or near work	82.2%	5.9%	4.8%	7.1%
Flexible work hours	13.2%	6.1%	22.3%	58.3%
Modified physical requirements of job	43.1%	15.6%	16.7%	24.6%
Higher nursing salary	24.7%	22.1%	18.7%	34.5%
Better retirement benefits	27.9%	18.5%	22.3%	31.3%
Better support from nursing management	27.5%	5.4%	22.3%	44.8%
More support from other nurses	33.2%	15.3%	16.8%	34.7%
Better nurse to patient ratios	30.8%	7.4%	13.8%	48.0%
Adequate support staff for non-nursing tasks	21.5%	13.6%	21.8%	43.2%
Availability of re-entry programs / mentoring	22.2%	10.9%	10.5%	56.5%
Improvement in my health status	60.8%	5.0%	12.8%	21.4%
Other	87.5%	0.0%	3.6%	8.9%

Note: Number of cases = 208. Rows might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Figure 4.11 summarizes the factors by scoring them on a four-point Likert-type scale ranging from “not at all important/does not apply”, scored as 1 point, to “very important,” scored as 4 points. The most important factors that might affect RNs’ decisions to return to work include flexible hours and availability of re-entry programs and mentoring. The least important factors include are affordable childcare near work and improvement in health status.

Figure 4.11 Importance of factors in encouraging RNs with active licenses who live in California but are not working in nursing to return to nursing, 2006-2010



Note: Data are weighted to represent all RNs with active licenses. A value of 1 indicates “not at all important” and a value of 4 indicates “very important.”

Table 4.16 uses the same scoring scheme to examine the responses of nurses who have been without a nursing position for five or fewer years, as compared with those who have been outside nursing more than five years. Nurses who have been out of nursing employment for more than five years rated most factors higher than nurses who held a nursing position more recently. Nurses who have been out of work for five years or less rated modified physical requirements of the job and improvement in health status as more important than those out of

work did for more than five years. The factors most important to RNs who worked in nursing within the past five years were flexible work hours, availability of re-entry programs, and adequate staff for non-nursing tasks. Nurses who last worked over five years ago rated as more important in their decision to return to nursing the availability of re-entry programs and flexible work hours.

Table 4.16 Importance of factors in the decision to return to nursing, for RNs who live in California, have active licenses, but are not working in nursing, by years since last worked in nursing, 2010

	Years since last worked in nursing	
	5 years or less	More than 5 years
Affordable childcare at or near work	1.21	1.49
Flexible work hours	3.27	3.33
Modified physical requirements of job	2.32	2.19
Higher nursing salary	2.28	2.90
Better retirement benefits	2.23	2.79
Better support from nursing management	2.66	3.11
More support from other nurses	2.44	2.71
Better nurse to patient ratios	2.48	3.14
Adequate support staff for non-nursing tasks	2.70	3.09
Availability of re-entry programs/mentoring	2.71	3.37
Improvement in my health status	2.20	1.66

Note: Number of cases=200. Data are weighted to represent all RNs with active licenses. A value of 1 indicates “not at all important” and a value of 4 indicates “very important.”

Chapter 5. Profile of Registered Nurses with Inactive and Lapsed Licenses

The 2004, 2006, 2008, and 2010 studies included a separate survey for nurses with inactive or lapsed California licenses. In 2006, 2008, and 2010, the surveys were mailed only to RNs with California addresses, and in 2006, and 2008, only respondents who reported that they continued to live in California were included in the analysis. In 2010, the analysis includes nurses who were residing both in and outside California. For the 2010 survey, half the sample was drawn from nurses with licenses that had lapsed between January 1, 2009 and December 31, 2009. The other half of the sample was drawn from nurses with inactive licenses with expiration dates after February 2010. This chapter reports findings from the survey of nurses with inactive or lapsed licenses.

The 2010 survey of nurses with inactive or lapsed licenses was somewhat different from that sent to nurses with active licenses. It was shorter and included questions about why the respondent had chosen to allow his/her license to become inactive or lapse. There were 332 responses from nurses with inactive licenses, resulting in a 66.4 percent response rate. There were 213 responses from nurses with lapsed licenses, resulting in a 42.6 percent response rate. Of the nurses that responded, forty-one nurses with lapsed records and eleven nurses with inactive status indicated they have moved from California and are now residing outside the state; their responses are included in the analysis. Nurses who self-reported that their license was active at the time of the survey were excluded from the analysis, removing 20 nurses from the sample. More information about this survey and the analytical sample is provided in Chapter 1.

As discussed in Chapter 1, there was some response bias to the survey of nurses with inactive or lapsed licenses. The age group distribution also is different for the survey respondents than the general population, with nurses in the oldest age category being over-represented. The number of respondents with inactive or lapsed licenses was sufficient to develop weights to adjust for different response rates by age categories, but not by region. All analyses of nurses with inactive or lapsed licenses are weighted to ensure that the data presented represent the statewide population of nurses with inactive or lapsed licenses.

Demographic Characteristics

Table 5.1 presents the age distribution of nurses with inactive or lapsed licenses in 2004 through 2010. The 2006, 2008, and 2010 analyses are presented separately for nurses with lapsed and inactive licenses, while the 2004 data combined nurses with inactive and lapsed licenses. Note that the 2004 and 2010 respondents include nurses with addresses outside California. The 2004 and 2010 respondents are thus likely to be quite different from those from 2006 and 2008. Tables are explicitly labeled to indicate whether the data focus on all RNs who responded or California-resident RNs only.

The 2010 inactive respondents had a similar age distribution as in 2008 and 2006. Forty-five percent of inactive nurses were older than 65 in 2006, and 50.5 percent of inactive nurses were older than sixty-five in 2010, an increase of over five percent. Nurses with lapsed licenses were older in 2010 than in 2008, but younger than in 2006. Nearly 57 percent of nurses with lapsed licenses in 2006 were at least 65 years old, but only 42.7 percent of nurses with lapsed licenses in 2010 were 65 years or older.

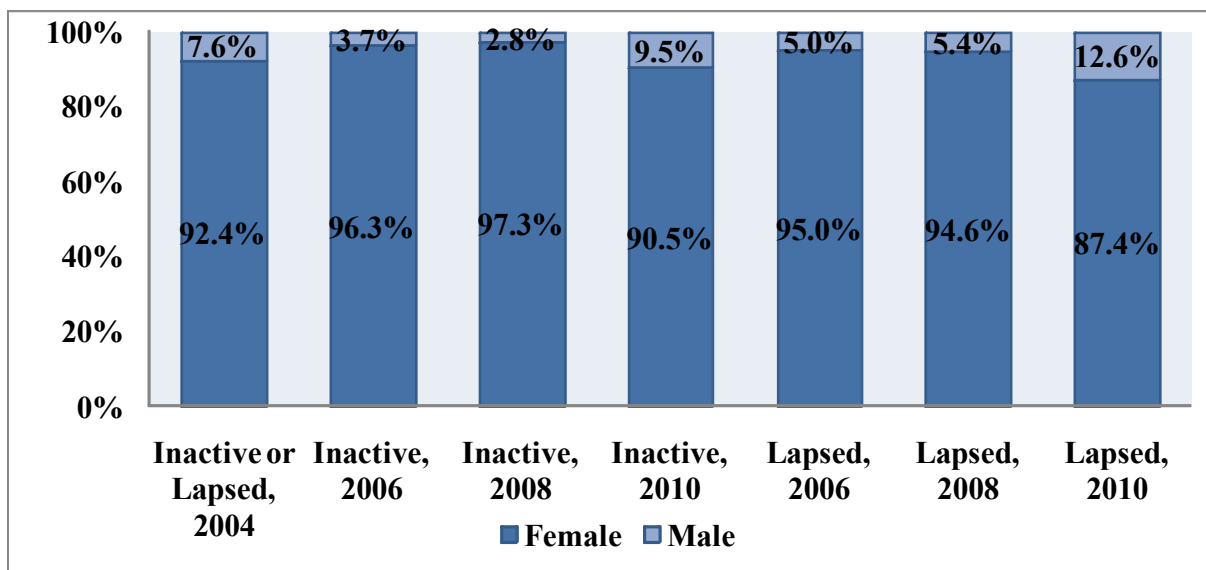
Table 5.1 Ages of registered nurses with inactive and lapsed California licenses, 2004-2010

	Inactive or Lapsed	Inactive			Lapsed		
		2004	2006	2008	2010	2006	2008
Under 35	13.0%	0.0%	0.9%	1.0%	1.8%	14.6%	11.6%
35-44	21.5%	6.8%	5.8%	4.6%	7.1%	16.4%	10.3%
45-54	18.5%	19.5%	16.2%	14.1%	14.2%	15.9%	13.5%
55-64	39.4%	28.8%	28.1%	29.8%	20.3%	20.7%	21.9%
65 or older	4.5%	45.0%	49.1%	50.5%	56.6%	32.6%	42.7%
Mean Age	54	62.7	63.4	63.9	63.7	54.6	58.4
Number of cases	965	285	292	332	113	152	213

Note: Inactive RN responses are weighted to reflect the statewide population of inactive RNs. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents. 2004 data are not weighted.

Figure 5.1 presents the gender distribution of nurses with lapsed and inactive licenses. In 2010, over 90 percent of RNs with inactive licenses and 87.4 percent of respondents with lapsed licenses were female, which is notably lower than in 2006 and 2008.

Figure 5.1 Gender of registered nurses with inactive and lapsed California licenses, 2004-2010



Note: 2010 number of cases = 312 (Inactive) & 200 (Lapsed). Inactive RN responses are weighted to reflect the statewide population of inactive RNs. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents. 2004 data are not weighted.

Table 5.2 presents the racial and ethnic backgrounds of nurses with lapsed and inactive licenses. In 2010, 78.3 percent of RNs with inactive licenses and 75.2 percent of respondents with lapsed licenses were white. When compared with the population of nurses with active California licenses, nurses with inactive and lapsed licenses are more likely to be white. The higher shares of whites among nurses with inactive and lapsed licenses are consistent with the shares of whites among the older age groups of nurses with active licenses.

The 2010 survey asked nurses to report languages spoken fluently, other than English. Table 5.3 summarizes the responses. As with nurses with active licenses, Spanish and Tagalog are the most commonly spoken languages among RNs with inactive and lapsed licenses.

Table 5.2 Racial/ethnic backgrounds of registered nurses with inactive and lapsed California licenses, 2004-2010

	Inactive or Lapsed	Inactive			Lapsed		
	2004	2006	2008	2010	2006	2008	2010
White, not Hispanic	78.4%	82.3%	81.0%	78.3%	80.5%	72.9%	75.2%
Black/African-American	5.5%	3.4%	3.4%	2.4%	6.2%	3.5%	4.7%
Hispanic	3.1%	1.3%	1.8%	4.2%	3.5%	5.1%	4.6%
Hispanic/ Latino	2.6%	*	*	*	*	*	*
Other Hispanic	0.5%	*	*	*	*	*	*
Filipino	6.3%	8.3%	5.2%	4.5%	5.3%	8.1%	5.1%
Asian Indian	0.4%	0.5%	0.0%	0.3%	0.0%	2.5%	1.0%
Other Asian	3.4%	3.0%	4.3%	6.7%	1.8%	5.3%	5.5%
Native Hawaiian/ Other Pacific Islander	0.1%	0.0%	0.0%	1.2%	0.0%	0.0%	0.3%
Native American/ American Eskimo	0.6%	0.0%	0.0%	*	0.9%	0.0%	1.7%
Mixed	1.2%	1.3%	3.3%	2.0%	1.8%	2.2%	1.0%
Other	0.9%	0.0%	1.1%	0.5%	0.0%	0.4%	0.9%
Number of cases	949	282	292	309	113	150	197

* Surveys did not include this option. In 2010, 23 inactive RNs and 16 delinquent RNs did not respond to this question.

Note: Inactive RN responses are weighted to reflect the statewide population of inactive RNs. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents. 2004 data are not weighted.

Table 5.3 Shares of registered nurses with inactive and lapsed California licenses who can speak languages other than English, 2006-2010

	Inactive			Lapsed		
	2006	2008	2010	2006	2008	2010
Spanish	5.0%	5.1%	6.0%	6.0%	7.6%	12.0%
Korean	0.0%	0.3%	1.9%	0.0%	2.1%	1.9%
Tagalog	7.3%	3.8%	4.5%	5.0%	7.0%	5.0%
Hindi	*	*	*	*	2.8%	0.9%
Mandarin	0.8%	1.5%	0.6%	*	*	0.4%
Cantonese	0.9%	0.3%	0.6%	*	*	1.7%
Vietnamese	0.4%	0.9%	*	*	*	*
French	*	*	2.4%	*	*	3.4%
German	*	*	1.1%	*	*	3.3%
Other	5.9%	8.4%	3.9%	5.0%	7.0%	4.1%

* No respondents to the survey reported these languages.

Note: 2010 inactive number of cases=332, and delinquent number of cases=172. Respondents could select more than one language. Inactive RN responses are weighted to reflect the statewide population of inactive RNs. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents.

Most RNs with inactive and lapsed licenses reported that they were married or in a domestic partner relationship, as seen in Table 5.4. The shares of nurses with inactive and lapsed licenses that are widowed are much higher than among nurses with active licenses. In 2010, 2.3 percent of RNs with active licenses were widowed (Chapter 2, Figure 2.6), while 11.8 percent of nurses with inactive licenses and 12.1 percent of nurses with lapsed licenses were widowed.

Table 5.4 Marital status of registered nurses with inactive and lapsed California licenses, 2006-2010

	Inactive			Lapsed		
	2006	2008	2010	2006	2008	2010
Never married	5.2%	7.6%	6.3%	7.1%	10.0%	9.1%
Married/domestic partner	66.9%	67.2%	70.8%	56.1%	61.1%	63.5%
Separated or divorced	11.6%	9.9%	11.2%	13.3%	17.1%	15.4%
Widowed	16.3%	15.3%	11.8%	23.5%	11.9%	12.1%

Note: 2010 inactive number of cases=311, and the delinquent number of cases=199. Inactive RN responses are weighted to reflect the statewide population of inactive RNs. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents.

Twenty-seven percent of respondents with inactive or lapsed licenses have children living at home (Table 5.5). In contrast, 52.5 percent of nurses with active licenses have children living at home (Chapter 2, Table 2.13). The percentage of inactive nurses that reported children living at home has remained nearly constant, and the share of nurses with lapsed licenses who reported children living at home increased by over 10 percentage points since 2006.

Table 5.5 Number of children living in the homes of nurses with inactive and lapsed California licenses, 2006-2010

	Inactive			Lapsed		
	2006	2008	2010	2006	2008	2010
No children	72.6%	72.3%	72.9%	84.0%	69.5%	73.3%
One child	12.7%	14.2%	13.6%	4.0%	19.5%	12.6%
Two children	9.6%	8.9%	7.1%	6.0%	7.7%	8.3%
Three children	1.7%	2.3%	3.3%	6.0%	*	5.8%
Four or more children	3.1%	2.4%	3.0%	0.0%	3.4%	0.0%
Mean Number of Children	0.51	0.50	0.58	0.34	0.50	0.47
Number of cases	276	260	304	100	146	197

* No respondents to the survey reported this number of children.

Note: 2010 had 28 inactive RNs and 16 delinquent who did not respond to questions about children at home. Inactive RN responses are weighted to reflect the statewide population of inactive RNs. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents.

More than half of inactive nurses and lapsed nurses who reported having children at home had children over the age of thirteen; this is consistent with the older average ages of lapsed and inactive RNs (Table 5.6).

Table 5.6 Percent of nurses who have children in specified age groups, for currently inactive or lapsed nurses residing in California, 2010

Age of Children	Inactive, 2010	Lapsed, 2010
Birth to 2 years	5.2%	5.9%
3-5 years	19.2%	*
6-12 years	26.6%	6.8%
13-18 years	51.8%	47.3%
Over 18	43.9%	51.1%
Number of Cases	60	25

* No respondents to the survey reported these age groups.

Note: Some nurses have children in more than one age group, so columns will not total 100%. Therefore, total percentage is not reported. Inactive RN responses are weighted to reflect the statewide populations of inactive RNs. Lapsed RN responses are weighted to reflect the statewide population of lapsed RNs.

For the first time in 2010, RNs were asked if any of their relatives were RNs. Over 57 percent of inactive RNs and 51 percent of lapsed RNs indicated they had at least one relative who was an RN (Table 5.7). The most common relative to be an RN was a cousin (23.4% of inactive RNs and 20.8% lapsed RNs), followed by a sibling (13.6% of inactive RNs and 11.4% of lapsed RNs).

Table 5.7 RN status of the relatives of inactive and lapsed RNs residing in California, 2010

	Inactive, 2010	Lapsed, 2010
No RNs	42.8%	48.7%
Parent	8.7%	7.5%
Aunt/Uncle	11.7%	9.0%
Grandparent	1.4%	1.5%
Cousin	23.4%	20.8%
Sibling	13.6%	11.4%
Child	8.1%	6.9%
Number of Cases	321	172

Note: Inactive RN responses are weighted to reflect the statewide populations of inactive RNs. Lapsed RN responses are weighted to reflect the statewide population of lapsed RNs.

Educational Preparation

Nurses with inactive licenses are more likely to have entered the nursing profession by completing a diploma nursing education program than actively licensed RNs, as seen in Table 5.8 and Figure 2.11 (Chapter 2). Associate, baccalaureate, and graduate degrees are less common among RNs with inactive and lapsed licenses. This is consistent with the older age distribution of these nurses, because diploma programs were a common education mode for older nurses.

Table 5.8 Pre-licensure education of registered nurses with inactive and lapsed California licenses, 2004-2010

	Inactive or Lapsed	Inactive			Lapsed		
	2004	2006	2008	2010	2006	2008	2010
Diploma	33.6%	43.3%	43.6%	35.2%	39.2%	28.9%	32.9%
Associate Degree	35.7%	31.8%	34.4%	31.6%	39.1%	40.6%	29.5%
30 unit LVN to RN program	*	*	*	3.0%	*	*	3.0%
Baccalaureate Degree	30.3%	24.6%	22.0%	30.2%	20.6%	30.5%	33.6%
Master's Degree	0.1%	*	*	*	*	*	1.0%
Entry-Level Master's Program	0.2%	*	*	*	*	*	*
Doctoral Degree	0.1%	0.3%	*	*	1.0%	*	*
Number of cases	953	269	279	308	97	148	199

* No respondents to the survey reported this education.

Note: Note: 2010 and 2008 responses from nurses with lapsed and inactive licenses are weighted to reflect the statewide populations of inactive and lapsed RNs. 2006 responses from nurses with lapsed licenses are not weighted and reflect only the respondents. 2004 data are not weighted.

Table 5.9 presents the locations where nurses with inactive and lapsed licenses who reside in California received their pre-licensure education. In 2010, half of RNs with inactive licenses had been educated in California. RNs with lapsed licenses were more likely to have completed their basic nursing education in another U.S. state (53.0%) than in California (33.1%). Respondents who were educated in other countries were under-represented among respondents with inactive and lapsed licenses.

Table 5.9 Locations where registered nurses with inactive and lapsed California licenses received initial nursing education, 2006-2010

	Inactive			Lapsed		
	2006	2008	2010	2006	2008	2010
California	54.9%	43.1%	50.3%	50.5%	31.8%	33.1%
Other States	34.2%	44.0%	37.8%	37.9%	54.9%	53.0%
International	10.9%	12.9%	11.9%	11.7%	13.4%	14.0%
Number of cases	286	281	292	103	148	187

Note: Inactive RN responses are weighted to reflect the statewide population of inactive RNs. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents.

Country of Birth

In 2010, RNs with inactive licenses were asked for the first time to indicate their country of birth (Table 5.10). Over 83 percent of RNs with inactive licenses who are residing in California were born in the United States. Nearly 5.4 percent of inactive RNs indicated they were born in the Philippines and 2.5 percent were born in Canada. Nearly two percent were born in South Korea and 1.6 percent were born in Mexico. The percentage of US born inactive RNs is nearly 20 percentage points higher than the percentage of US born active RNs (Chapter 2, Table 2.20).

Inactive nurses were also asked where they received their initial RN education. Of RNs reporting they were born in the United States, 56.9 percent were educated in California. All the RNs who were born in Mexico reported being educated in California. Of the RNs born in South Korea, 41.2 percent completed their initial RN education in the United States.

Table 5.10 Top 5 countries of birth and country of education for nurses with inactive licenses residing in California, 2010

	Country of birth	Educated in California	Educated in other US location	Internationally educated
United States	83.8%	56.9%	43.1%	0.0%
Philippines	5.4%	13.1%	5.4%	81.5%
Canada	2.5%	25.3%	0.0%	74.7%
South Korea	2.0%	17.0%	24.1%	58.8%
Mexico	1.6%	100.0%	0.0%	0.0%

Note: Inactive number of cases=300; 35 RNs who reported their country of birth did not report where they were educated; therefore the number of cases for the last three columns is 265 inactive RNs. Inactive RN responses are weighted to reflect the statewide population of inactive RNs.

In 2010, RNs with lapsed licenses were asked to indicate their country of birth (Table 5.11). Over 76 percent of RNs with lapsed licenses who reside in California were born in the United States. Nearly 4.8 percent of inactive RNs indicated they were born in the Philippines, 4.3 percent were born in Canada, 3.1 percent were born in China and, nearly two percent were born in the United Kingdom. The percentage of US-born lapsed RNs is over 10 percentage points higher than the percentage of US-born active RNs (Chapter 2, Table 2.20).

RNs with lapsed licenses were also asked where they received their initial RN education. Of RNs reporting they were born in the United States, 49.1 percent were educated in California. All the RNs with lapsed licenses from the Philippines and Canada reported being educated outside of California. Twenty-five percent of lapsed RNs born the United Kingdom, and all the RNs who reported they were born the People’s Republic of China received their initial RN education in California nursing programs.

Table 5.11 Country of birth and Country of education for nurses with lapsed licenses residing in California, 2010

	Country of birth	Educated in California	Educated in other US location	Internationally educated
United States	76.3%	49.1%	50.9%	0.0%
Philippines	4.8%	0.0%	0.0%	100.0%
Canada	4.3%	0.0%	11.2%	88.8%
China	3.1%	100.0%	0.0%	0.0%
United Kingdom	1.9%	25.3%	0.0%	74.7%

Note: Lapsed number of cases=161; 16 of the RNs who reported their country of birth did not report where they received their initial RN education. Therefore, the number of cases for the last three columns is 145 lapsed RNs. Lapsed RN responses are weighted to reflect the statewide population of lapsed RNs.

Table 5.12 reports the highest level of nursing education received by nurses with inactive or lapsed licenses. While the number of RNs with inactive or lapsed licenses who have received a baccalaureate degree has increased since 2006, they are less likely to have completed a baccalaureate or master's degree than nurses with active licenses.

Table 5.12 Highest level of nursing education held by nurses with inactive and lapsed California licenses, 2006-2010

	Inactive			Lapsed		
	2006	2008	2010	2006	2008	2010
Diploma program	34.2%	35.3%	27.6%	30.5%	22.9%	26.3%
Associate degree	30.2%	33.6%	30.3%	38.1%	36.1%	31.8%
Baccalaureate degree	31.4%	25.0%	36.9%	27.6%	29.8%	36.1%
Master's or Doctorate Degree	4.2%	5.6%	5.2%	3.9%	11.2%	5.7%
Number of cases	279	281	308	105	148	199

Note: Inactive RN responses are weighted to reflect the statewide population of inactive RNs. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents.

Status of Nurses with Inactive or Lapsed Licenses

Nurses with inactive or lapsed California licenses were asked a series of questions regarding their reasons for not being employed in nursing in California and their intent to return to nursing. Table 5.13 presents the reasons nurses have inactive licenses, and Table 5.14 presents reasons for lapsed licenses. In 2010, nearly fifty percent of nurses with inactive licenses said they are retired, and 35 percent said they have no plan to work in California now but might reactivate their license later. Nearly 20 percent of inactive RNs do not plan to work as a RN any more. As in 2006, small shares said they moved out of the state and/or do not plan to work in nursing but want to maintain a California license.

Table 5.13 Reasons registered nurses have an inactive license, 2006-2010

	Inactive 2006			Inactive 2008			Inactive 2010		
	All	Under 65 years old	Age 65 or older	All	Under 65 years old	Age 65 or older	All	Under 65 years old	Age 65 or older
Retired	48.0%	20.9%	81.3%	54.4%	25.3%	84.7%	49.9%	19.1%	80.0%
No plan to work in California, but might reactivate later	44.6%	64.6%	20.0%	40.5%	61.2%	19.0%	35.0%	48.8%	21.5%
No plan to work as RN any more	25.8%	20.2%	32.7%	22.1%	13.8%	30.7%	19.9%	18.9%	21.0%
Moved from California	2.7%	3.8%	1.3%	2.1%	2.3%	1.8%	3.3%	6.2%	0.5%
No plan to work, but want to maintain license	4.1%	3.1%	5.3%	5.7%	5.3%	6.1%	6.7%	6.6%	6.8%
Other reason	10.8%	12.0%	9.3%	12.3%	20.0%	4.3%	14.6%	22.0%	7.3%

Note: 2010 number of cases=332, 127 are under 65 and 205 are over 65. Respondents could select multiple items. RNs who self-reported that their licenses were active did not respond to this question. Inactive RN responses are weighted to reflect the statewide population of inactive RNs.

Table 5.14 reports data for nurses with lapsed licenses. As presented in Table 5.1, younger nurses were more highly represented among those with lapsed licenses in 2010 as compared with 2006. Thus, as would be expected, fewer nurses with lapsed licenses said they were retired in 2010 than in 2006 (41.2% vs. 67.0%). A smaller share of nurses in 2010 does not have plans to work in California, but might reactivate their licenses later, as compared with 2008 (16.7% vs. 22.8%). This suggests that in 2010, nurses were more likely to let their licenses lapse because they were working in California temporarily.

Table 5.14 Reasons registered nurses have a lapsed license, 2006-2010

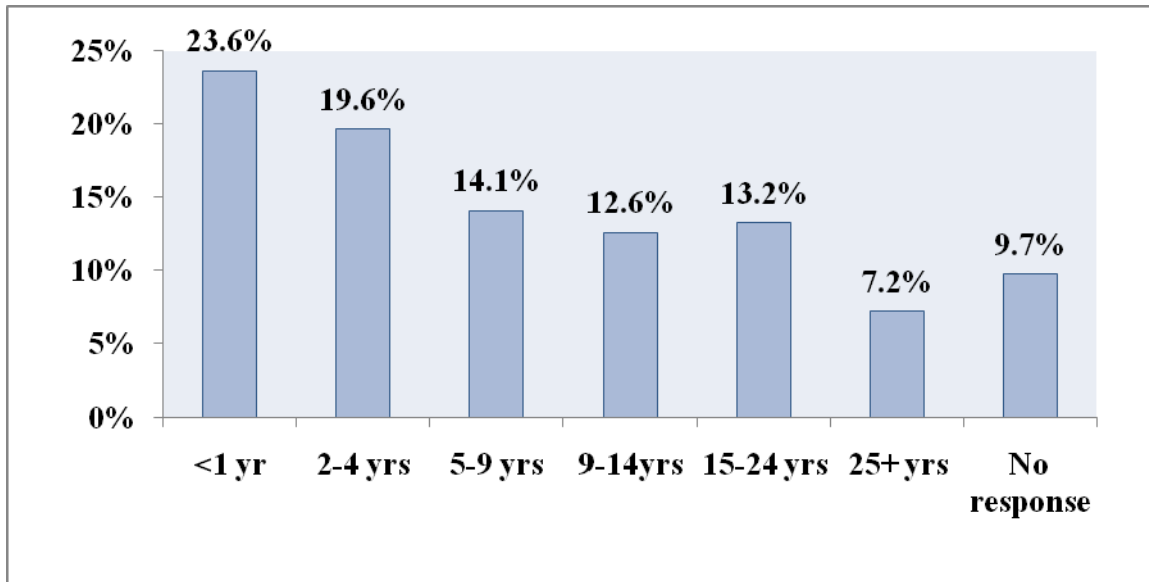
	Lapsed 2006			Lapsed, 2008			Lapsed, 2010		
	All	Under 65 years old	Age 65 or older	All	Under 65 years old	Age 65 or older	All	Under 65 years old	Age 65 or older
Retired	67.0%	39.5%	84.8%	34.2%	13.0%	78.2%	41.2%	9.9%	83.3%
No plan to work in California, but might reactivate later	10.3%	21.1%	3.4%	22.8%	29.5%	9.0%	16.7%	22.9%	8.3%
No plan to work as RN any more	41.2%	36.8%	44.1%	20.7%	9.6%	43.6%	24.2%	12.7%	39.6%
Moved from California	1.0%	0.0%	1.7%	40.4%	57.4%	5.1%	28.3%	47.3%	2.8%
No plan to work, but want to maintain license	*	*	*	4.6%	5.6%	2.6%	1.4%	1.5%	1.4%
Other reason	19.6%	36.8%	8.5%	11.5%	12.2%	10.3%	14.7%	18.4%	9.7%

* No respondents to the survey reported this reason.

Note: 2010 lapsed number of cases=213, of which 69 were under 65, and 144 were over 65 years old. Respondents could select multiple items. RNs who self-reported that their licenses were active did not respond to this question. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents.

Respondents were asked how long their license has been inactive. Figure 5.2 summarizes the responses of nurses with inactive licenses. Fifty-seven percent indicated that their license became inactive within the last 10 years. Forty-three percent moved to inactive status within the last five years. Because the sample of nurses with lapsed licenses was limited to nurses whose licenses had lapsed in the previous year, we do not present tabulations for the lapsed license sample.

Figure 5.2 Length of time since nurses' California licenses became inactive, 2010



Note: 2010 Inactive number of cases=332. Data are weighted to adjust for different response rates in age groups

Table 5.15 presents the number of years since respondents last worked in a nursing position in California (2006 -2010 surveys), or last worked in nursing for at least six months (2004 survey). Among nurses with inactive licenses, 14.7 percent last worked in nursing within the past four years; this rate was 54 percent for nurses with lapsed licenses. Over 44.4 percent of nurses with inactive licenses reported they last worked in California 15 or more years ago; this rate was only 17.7 percent for nurses with lapsed licenses. The difference in 2010 between inactive and lapsed nurses reflects the much higher percentage of retirees among the inactive population, and the greater concentration of younger nurses among nurses with lapsed licenses.

Table 5.15 Number of years since registered nurses with inactive and lapsed California licenses worked as registered nurses for at least six months (2004), or worked in California, 2006-2010

	Inactive or Lapsed	Inactive			Lapsed		
		2004	2006	2008	2010	2006	2008
One year or less	6.1%	5.0%	1.3%	3.3%	7.4%	19.1%	16.0%
2-4 years ago	27.8%	11.7%	12.7%	11.4%	23.2%	43.9%	37.9%
5-9 years ago	30.9%	23.4%	23.7%	19.0%	28.4%	14.7%	18.4%
10-14 years ago	20.0%	18.6%	23.3%	21.9%	21.1%	11.1%	10.0%
15-24 years ago	11.0%	24.7%	20.7%	25.7%	10.5%	9.0%	12.9%
25 or more years ago	4.1%	16.7%	18.2%	18.7%	9.5%	2.1%	4.8%
Mean number of years	8.8	14.3	14.3	15.0	10.1	6.2	7.5
Number of cases	489	270	267	308	95	147	205

Note: Inactive RN responses are weighted to reflect the statewide population of inactive RNs. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents. 2004 data are not weighted.

RNs with inactive California licenses reported an average of 19.1 years of nursing experience, and those with lapsed licenses have nearly the same average of 22.0 years of experience (Table 5.16). Just over 28 percent of nurses with inactive licenses have less than 10 years of experience, and 32.4 percent had 25 or more years of experience. Among nurses with lapsed licenses, 26.2 percent had fewer than 10 years of experience in nursing, and 42.6 percent had 25 or more years of experience.

Table 5.16 Number of years that registered nurses with inactive and lapsed California licenses practiced before leaving the profession, 2004-2010

	Inactive or Lapsed	Inactive			Lapsed		
	2004	2006	2008	2010	2006	2008	2010
Less than 5 years	5.6%	7.4%	8.6%	11.9%	8.6%	6.6%	7.8%
5-9 years	8.3%	14.0%	13.8%	16.4%	9.7%	18.3%	18.4%
10-14 years	14.6%	21.2%	17.8%	17.2%	8.6%	16.1%	10.4%
15-24 years	24.2%	21.6%	22.1%	22.0%	20.5%	24.0%	20.8%
25 or more years	47.3%	35.8%	37.8%	32.4%	52.8%	35.0%	42.6%
Mean number of years	23.7	20.3	20.2	19.1	22.9	20.4	22.0
Number of cases	480	266	256	293	104	144	190

Note: Inactive RN responses are weighted to reflect the statewide population of inactive RNs. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents. 2004 data are not weighted.

Nurses residing in California with inactive California licenses who have left the nursing workforce were asked to rate the importance of 20 possible reasons for leaving nursing. Table 5.17 presents the results for nurses with inactive licenses. The primary reasons rated in 2010 as very important for the decision to leave nursing among nurses with inactive licenses were retirement (25.8%), childcare responsibilities (22.1%), other family responsibilities (21.2%), and stress on the job (19.3%).

Table 5.17 Importance of reasons that registered nurses with inactive California licenses who are not working in nursing and are residing in California decided to leave nursing in California, 2010

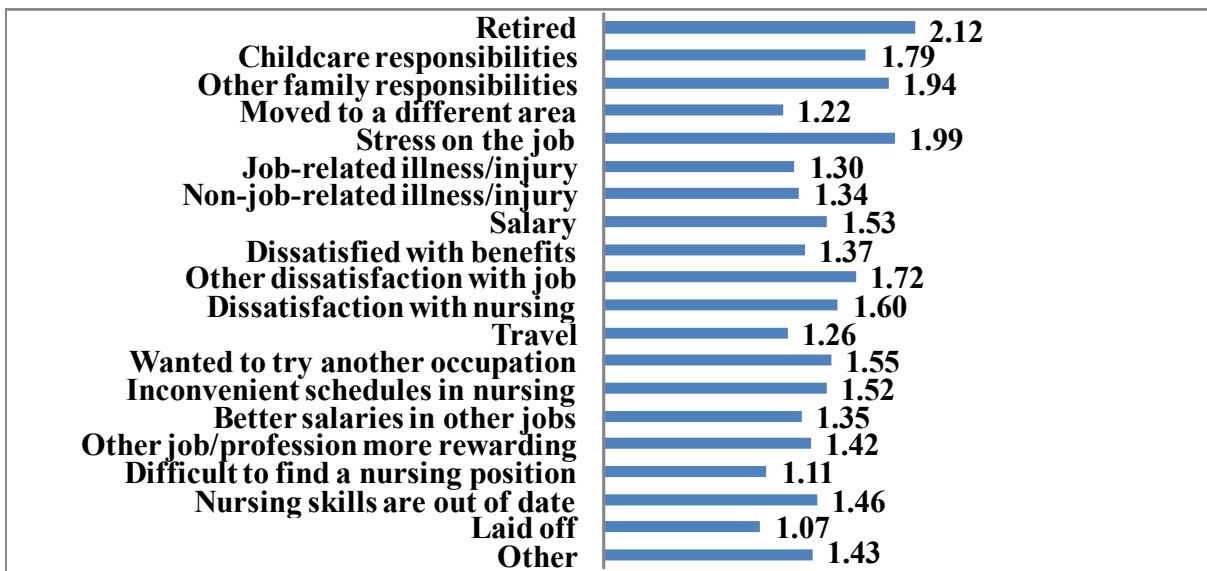
	Not at all important/Does not apply	Somewhat important	Important	Very Important
Retired	54.1%	5.3%	14.9%	25.8%
Childcare responsibilities	70.5%	1.9%	5.5%	22.1%
Other family responsibilities	60.5%	6.0%	12.3%	21.2%
Moved to a different area	90.5%	1.5%	3.1%	4.9%
Stress on the job	55.3%	10.2%	15.3%	19.3%
Job-related illness/injury	86.7%	3.4%	3.1%	6.9%
Non-job-related illness/injury	85.2%	3.4%	4.0%	7.4%
Salary	72.8%	9.9%	9.1%	8.2%
Dissatisfied with benefits	81.2%	6.8%	5.4%	6.5%
Other dissatisfaction with job	65.1%	10.1%	12.4%	12.5%
Dissatisfaction with nursing profession	69.9%	8.7%	12.7%	8.7%
Travel	87.0%	4.4%	4.8%	3.9%
Wanted to try another occupation	75.9%	5.0%	7.3%	11.9%
Inconvenient schedules in nursing	74.2%	8.5%	8.5%	8.8%
Better salaries in other jobs	84.3%	3.1%	5.6%	7.0%
Other job/profession more rewarding professionally	80.8%	4.0%	8.2%	7.1%
Difficult to find a nursing position	94.0%	2.8%	1.5%	1.7%
Nursing skills are out of date	78.1%	7.6%	5.0%	9.4%
Laid off	97.2%	0.3%	1.0%	1.5%
Other	84.0%	0.0%	5.3%	10.7%

Note: Number of cases=308. Inactive RN data from 2010 are weighted to adjust for different response rates in age groups. Items that were omitted by respondents who answered at least one of these items were assumed not to apply.

Figure 5.3 summarizes the reasons nurses with inactive licenses left the profession using the same rating method reported in Chapter 4; that is, ranging from 1 (not at all important) to 4 (very important). The highest-rated

reasons for leaving nursing include retirement (2.12), stress on the job (1.99), and other family responsibilities (1.94). These reasons are very similar to those of nurses with active licenses who have chosen not to work.

Figure 5.3 Importance of reasons that registered nurses residing in California with inactive California licenses decided to leave nursing in California, 2010



Note: N=308. Inactive RN data from 2010 are weighted to adjust for different response rates in age groups. Items that were omitted by respondents who answered at least one of these items were assumed not to apply.

Nurses residing in California with lapsed California licenses were asked to rate the importance of 20 possible reasons for leaving nursing. Table 5.18 presents the data for nurses with lapsed licenses. The top reasons rated as very important for a lapsed license were retirement (36.1%), stress on the job (16.3%), other family responsibilities (12.8%), and non-job related illness or injury (12.3%).

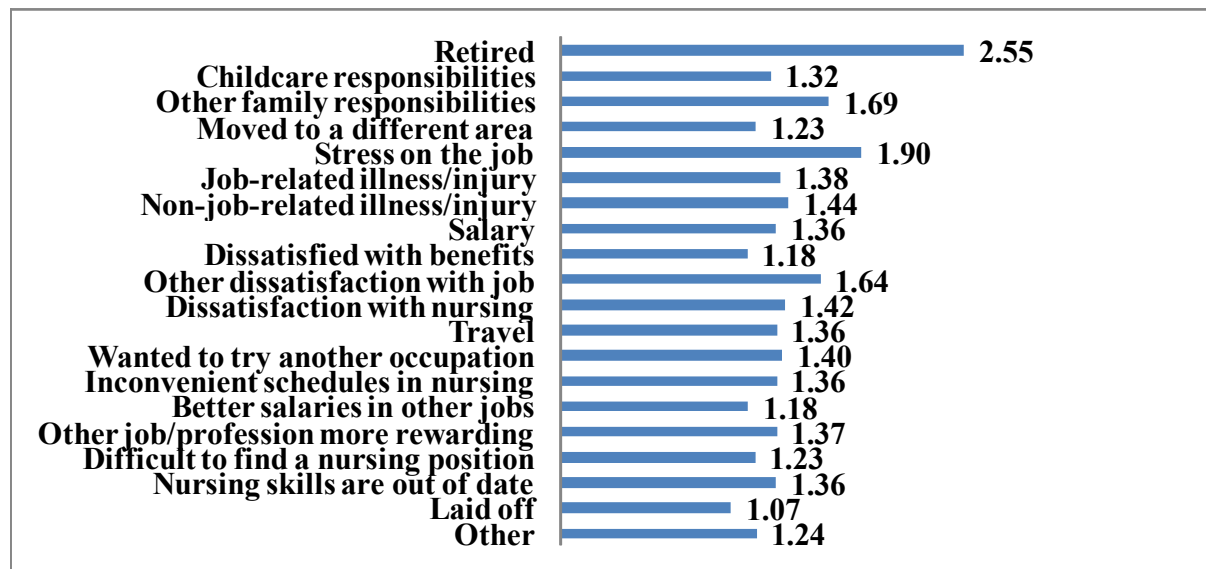
Figure 5.4 indicates that the highest-rated reasons for not working in nursing in California among nurses with lapsed licenses are retirement (2.55), stress on the job (1.90), other family responsibility (1.69) and other dissatisfaction with job (1.64).

Table 5.18 Importance of reasons that registered nurses residing in California with lapsed California licenses decided to leave nursing in California, 2010

	Not at all important/ Does not apply	Somewhat important	Important	Very Important
Retired	36.2%	8.7%	19.1%	36.1%
Childcare responsibilities	85.8%	3.9%	2.4%	7.9%
Other family responsibilities	68.0%	7.5%	11.7%	12.8%
Moved to a different area	90.4%	1.1%	3.4%	5.1%
Stress on the job	57.6%	11.4%	14.8%	16.3%
Job-related illness/injury	81.4%	4.3%	8.7%	5.6%
Non-job-related illness/injury	83.0%	2.3%	2.5%	12.3%
Salary	83.6%	2.9%	7.5%	6.0%
Dissatisfied with benefits	88.8%	6.8%	2.5%	2.0%
Other dissatisfaction with job	66.8%	12.1%	11.3%	9.9%
Dissatisfaction with nursing profession	78.8%	8.0%	6.1%	7.2%
Travel	83.2%	4.5%	5.0%	7.3%
Wanted to try another occupation	83.7%	2.7%	3.9%	9.8%
Inconvenient schedules in nursing	78.9%	9.2%	8.5%	3.4%
Better salaries in other jobs	91.2%	2.4%	3.4%	3.0%
Other job/profession more rewarding professionally	85.1%	2.8%	2.5%	9.6%
Difficult to find a nursing position	89.1%	3.4%	3.1%	4.5%
Nursing skills are out of date	78.3%	10.9%	7.1%	3.7%
Laid off	97.1%	0.5%	0.5%	2.0%
Other	91.1%	0.0%	2.9%	6.0%

Note: Number of cases=166. Lapsed RN data from 2010 are weighted to adjust for different response rates in age groups. Items that were omitted by respondents who answered at least one of these items were assumed not to apply.

Figure 5.4 Importance of reasons that registered nurses residing in California with lapsed California licenses decided to leave nursing in California, 2010



Note: Number of cases=166. Lapsed RN data from 2010 are weighted to adjust for different response rates in age groups. Items that were omitted by respondents who answered at least one of these items were assumed not to apply.

Table 5.19 presents the percentages of nurses with inactive or lapsed licenses who rated specific reasons for leaving nursing in California as “important” or “very important,” by age. Nurses aged 65 years and older were more likely than younger nurses to report the reason for their inactive license was retirement (60.9% vs. 17.9%).

Other important factors to older nurses were other family responsibilities (28.7%) and stress on the job (25.0%). Younger inactive nurses reported stress on the job (45.3%), childcare responsibilities (41.6%), and other family responsibilities (39.0%) as the most important reasons to leave nursing.

Among nurses 65 years or older with a lapsed license, the most important reason for leaving nursing was retirement (70.2%), with stress on the job cited by 25.4 percent of nurses with lapsed licenses (Table 5.20). Younger RNs with lapsed licenses reported other family responsibilities (45.6%) and stress on the job (40.2%) as the most important reasons for leaving nursing.

Table 5.19 Share of nurses rating factors as important or very important reasons for leaving nursing, for nurses with inactive licenses residing in California, by age, 2006-2010

	Inactive Licenses 2006		Inactive Licenses 2008		Inactive Licenses 2010	
	Under 65 years	65 years or older	Under 65 years	65 years or older	Under 65 years	65 years or older
Retired	13.9%	59.7%	21.2%	60.7%	17.9%	60.9%
Childcare responsibilities	41.3%	12.9%	35.9%	10.3%	41.6%	15.1%
Other family responsibilities	46.5%	22.3%	37.6%	23.2%	39.0%	28.7%
Moved to a different area	7.2%	7.9%	7.7%	3.9%	11.1%	5.2%
Stress on the job	46.0%	33.1%	44.9%	29.7%	45.3%	25.0%
Job-related illness/injury	11.2%	10.1%	15.5%	10.3%	13.0%	7.3%
Non-job-related illness / injury	13.7%	13.7%	14.7%	6.5%	17.2%	6.3%
Salary	30.4%	14.4%	28.8%	16.1%	23.3%	12.0%
Decreased benefits	20.6%	9.4%	*	*	*	*
Dissatisfied with Benefits	*	*	13.7%	9.0%	18.3%	6.3%
Other dissatisfaction with job	38.4%	18.7%	38.8%	20.0%	35.1%	15.6%
Dissatisfaction with nursing profession	34.2%	17.3%	34.0%	12.3%	31.9%	12.0%
Travel	9.2%	15.1%	4.9%	12.3%	3.8%	13.0%
Wanted to try another occupation	30.0%	7.2%	29.7%	4.2%	28.9%	10.4%
Inconvenient schedules in nursing	30.8%	9.4%	35.9%	12.3%	25.0%	10.4%
Better salaries in other jobs	23.0%	6.5%	25.2%	8.4%	16.8%	8.9%
Other job/profession more rewarding professionally	26.7%	6.5%	26.3%	11.6%	24.1%	7.3%
Difficult to find a nursing position	2.2%	1.4%	5.9%	0.0%	5.0%	1.6%
Nursing skills are out of date	16.5%	12.9%	21.5%	17.4%	13.0%	15.6%
Laid off	5.7%	0.7%	3.1%	2.6%	2.5%	2.6%
Other	14.4%	11.5%	10.7%	9.0%	18.7%	13.5%

Note: 2010 inactive number of cases=308, of which 192 RNs were 65 years or older, and 116 RNs were under 65 years. 2010 lapsed number of cases=166 of which 32 RNs were younger than 65 years and 134 RNs were older than 65 years. Inactive RN responses are weighted to reflect the statewide population of inactive RNs. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents. Items that were omitted by respondents who answered at least one of these items were assumed not to apply.

Table 5.20 Share of nurses rating factors as important or very important reasons for leaving nursing, for nurses with lapsed licenses residing in California, by age, 2006-2010

	Lapsed Licenses 2006		Lapsed Licenses 2008		Lapsed Licenses 2010	
	Under 65 years	65 years or older	Under 65 years	65 years or older	Under 65 years	65 years or older
Retired	39.5%	71.7%	36.0%	69.9%	31.4%	70.2%
Childcare responsibilities	26.3%	3.8%	21.2%	6.8%	21.9%	3.0%
Other family responsibilities	34.2%	5.7%	31.6%	13.7%	45.6%	11.2%
Moved to a different area	7.9%	1.9%	36.9%	9.6%	16.1%	3.7%
Stress on the job	39.5%	24.5%	60.0%	24.7%	40.2%	25.4%
Job-related illness/injury	15.8%	5.7%	18.3%	4.1%	27.5%	6.0%
Non-job-related illness / injury	34.2%	15.1%	23.4%	13.7%	18.0%	12.7%
Salary	18.4%	7.5%	36.6%	15.1%	21.8%	8.2%
Decreased benefits	10.5%	5.7%	*	*	*	*
Dissatisfied with Benefits	*	*	25.4%	9.6%	5.7%	3.7%
Other dissatisfaction with job	26.3%	18.9%	33.8%	20.5%	31.0%	14.9%
Dissatisfaction with nursing profession	34.2%	9.4%	40.8%	11.0%	21.2%	8.2%
Travel	13.2%	18.9%	8.4%	11.0%	15.2%	10.5%
Wanted to try another occupation	23.7%	9.4%	28.6%	2.7%	27.1%	5.2%
Inconvenient schedules in nursing	23.7%	9.4%	40.3%	6.8%	23.6%	4.5%
Better salaries in other jobs	13.2%	5.7%	24.9%	2.7%	10.6%	3.7%
Other job/profession more rewarding professionally	10.5%	5.7%	37.3%	4.1%	22.9%	5.2%
Difficult to find a nursing position	5.3%	3.8%	7.5%	1.4%	16.1%	2.2%
Nursing skills are out of date	28.9%	11.3%	19.2%	9.6%	16.1%	7.5%
Laid off	2.6%	1.9%	0.0%	0.0%	2.9%	2.2%
Other	7.9%	3.8%	24.1%	13.7%	12.3%	6.7%

Note: 2010 inactive number of cases=308, of which 192 RNs were 65 years or older, and 116 RNs were under 65 years. 2010 lapsed number of cases=166 of which 32 RNs were younger than 65 years and 134 RNs were older than 65 years. Inactive RN responses are weighted to reflect the statewide population of inactive RNs. 2010 & 2008 responses from nurses with lapsed licenses are weighted. 2006 Responses from nurses with lapsed licenses are not weighted and reflect only the respondents. Items that were omitted by respondents who answered at least one of these items were assumed not to apply.

Future Plans of Nurses with Inactive Licenses

Nurses with inactive or lapsed California licenses were asked to indicate their plans regarding their practice of nursing in California over the next five years. As shown in Table 5.21, 82 percent of nurses with inactive licenses and 81.2 percent of nurses with lapsed licenses said they do not plan to practice in California in the next five years. Nurses of ages 65 years or older were more likely to say they do not plan to practice nursing in California, at over 89 percent. Only 11.1 percent of nurses with inactive licenses plan to return to nursing in California in the future, as do 9.2 percent of nurses with lapsed licenses. This response is more common among nurses under 65 years old, with 16.9 percent of RNs with inactive licenses and 12.9 of RNs with lapsed licenses in this age group saying they plan to work as an RN in California within the next five years.

Table 5.21 Plans of nurses with inactive and lapsed California licenses for the next five years, 2010

	Inactive licenses			Lapsed licenses		
	All nurses	Under 65 years	65 or older	All nurses	Under 65 years	65 or older
Do not plan to practice in California	82.0%	74.2%	89.8%	81.2%	71.4%	94.4%
Plan to travel to CA intermittently	2.1%	3.7%	0.5%	2.5%	3.2%	1.4%
Plan to work as RN in future	11.1%	16.9%	5.4%	9.2%	12.9%	4.2%
Plan to perform telenursing	0.6%	0.7%	0.5%	0.6%	0.0%	1.4%
Plan to relocate to California	0.4%	0.9%	*	3.6%	6.3%	*
Plan to commute from Border State	*	*	*	*	*	*
Number of cases	332	127	205	213	69	144

* No respondents to the survey reported this plan.

Note: Note: Inactive RN responses are weighted to reflect the statewide populations of inactive RNs. Lapsed RN responses are weighted to reflect the statewide population of lapsed RNs.

In a different section of the survey, nurses were asked about their current intentions regarding nursing. These data are presented in Table 5.22. Over 50 percent of nurses with inactive licenses and 61.7 percent of those with lapsed licenses reported that they are retired. Another 15.2 percent of nurses with inactive licenses and 11.5 percent of those with lapsed licenses said they are not retired, but do not plan to return to nursing. About 9.1 percent of nurses with inactive licenses and 12.3 percent of those with lapsed licenses said they plan to return to nursing in the future. About 25 percent of the inactive and fourteen percent of lapsed licenses are undecided about their plans.

Table 5.22 Intentions regarding future work in nursing of nurses with inactive and lapsed California licenses, 2004-2010

	Inactive or Lapsed	Inactive			Lapsed		
		2004	2006	2008	2010	2006	2008
Currently seeking employment in nursing	2.0%	**	**	**	2.2%	2.1%	0.4%
Plan to return to nursing in the future	10.2%	10.3%	9.5%	9.1%	6.7%	11.5%	12.3%
Retired	*	52.1%	55.6%	50.3%	75.6%	53.8%	61.7%
Will not return to nursing	66.3%	12.9%	12.5%	15.2%	10.0%	10.3%	11.5%
Undecided at this time	21.5%	24.7%	22.4%	25.5%	5.6%	22.3%	14.0%
Number of cases	489	266	254	311	90	109	172

* This question was not asked in 2004.

** No respondents to the survey reported this status.

Note: Note: 2010 and 2008 responses from nurses with lapsed and inactive licenses are weighted to reflect the statewide populations of inactive and lapsed RNs. 2006 responses from nurses with lapsed licenses are not weighted and reflect only the respondents. 2004 data are not weighted.”

Tables 5.23 and 5.24 focus on the current intentions of nurses by age group. The vast majority of nurses with inactive and lapsed licenses who are 65 years and older report being retired (80.6% of inactive RNs, and 85.6% of those with lapsed licenses). Nine percent of those 65 years or older with inactive licenses and 5.8 percent of those with lapsed licenses say they are undecided about future work in nursing. Among nurses under 65 years old, 14.4 percent of those with inactive licenses and 23.4 percent of those with lapsed licenses say they plan to return to nursing in the future. Seventeen percent of these younger nurses with inactive licenses report they are retired, as do 25.4 percent of those with lapsed licenses. Another 43.1 percent of younger nurses with inactive licenses and 26.6 percent with lapsed licenses are undecided about future work in nursing. There was little change in the intentions of nurses with inactive licenses between 2006 and 2010. There was greater uncertainty among the younger RNs with lapsed licenses about their future work plans in 2008 and 2010 than in 2006.

Table 5.23 Intentions regarding future work in nursing of nurses with inactive licenses, by age group, 2006-2010

	Inactive licenses, 2006		Inactive licenses, 2008		Inactive licenses, 2010	
	Under 65 years	65 and older	Under 65 years	65 and older	Under 65 years	65 and older
Currently seeking employment in nursing	*	*	*	*	*	*
Plan to return to nursing in the future	18.1%	0.7%	16.7%	2.1%	14.4%	4.2%
Retired	22.2%	88.7%	26.8%	85.5%	17.0%	80.6%
Will not return to nursing	21.1%	2.8%	21.2%	3.5%	25.5%	5.8%
Undecided at this time	38.6%	7.8%	35.3%	9.0%	43.1%	9.4%
Number of cases	125	141	109	145	120	191

* No respondents to the survey reported this intention.

Note: Inactive RN responses are weighted to reflect the statewide population of inactive RNs.

Table 5.24 Intentions regarding future work in nursing of nurses with lapsed licenses, by age group, 2006-2010

	Lapsed licenses, 2006		Lapsed licenses, 2008		Lapsed licenses, 2010	
	Under 65 years	65 and older	Under 65 years	65 and older	Under 65 years	65 and older
Currently seeking employment in nursing	5.7%	*	2.4%	1.5%	0.0%	0.7%
Plan to return to nursing in the future	17.1%	*	17.7%	1.5%	23.4%	5.0%
Retired	42.9%	96.4%	30.7%	91.3%	25.4%	85.6%
Will not return to nursing	22.9%	1.8%	16.7%	0.0%	24.6%	2.9%
Undecided at this time	11.4%	1.8%	32.5%	5.8%	26.6%	5.8%
Number of cases	35	55	40	69	33	139

* No respondents to the survey reported this intention.

Note: Responses from nurses with lapsed licenses in 2006 are not weighted and reflect only the respondents. Responses from nurses with lapsed licenses in 2008 & 2010 are weighted.

Nurses with inactive California licenses who plan to return to the profession were asked to indicate the time frame within which they plan to return (Table 5.25). Less than one-third (30.3%) of those with inactive licenses plan to return within two years, and another 35.8 percent plan to return in three to four years.

Table 5.25 Time frame within which non-retired nurses with inactive licenses plan to return to nursing, 2006-2010

	Inactive, 2006	Inactive, 2008	Inactive, 2010
Less than one year	6.5%	9.4%	11.6%
1 to 2 years	67.5%	57.7%	18.7%
3 to 4 years	20.2%	20.0%	35.8%
More than 5 years	5.8%	12.9%	33.9%
Number of cases	22	19	18

Note: Inactive RN responses are weighted to reflect the statewide population of inactive RNs. Responses from nurses with lapsed licenses are not reported.

Nurses with inactive California licenses who indicated they were undecided regarding a possible return were asked to rate the importance of eleven factors in their decision to return to work as an RN with 1 indicating “not at all important” and 4 indicating “very important.” Table 5.26 presents the importance of these factors for nurses with inactive licenses. High shares of nurses with inactive licenses rated as very important flexibility in work hours (50.6%), better nurse-to-patient ratios (46.1%), the availability of re-entry programs and mentoring (45.0%), adequate support staff for non-nursing tasks (42.0%) better support from nursing management (40.5%), and more support from other nurses (40.2%).

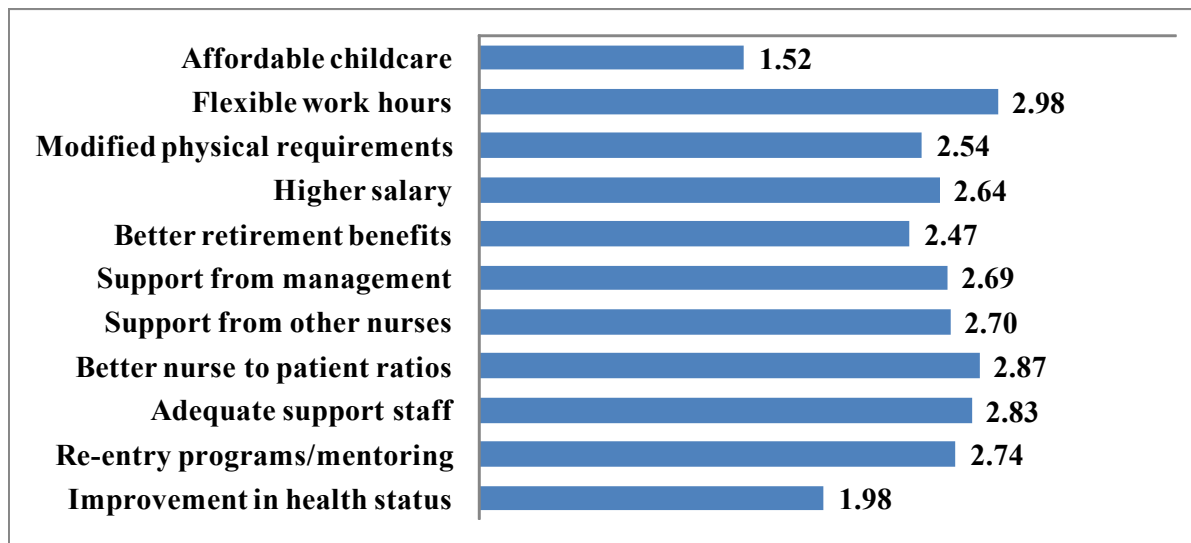
Figure 5.5 presents a rating of the importance of each factor in the decisions of RNs with inactive licenses to return to nursing. Nurses with inactive licenses rated flexible work hours (2.98), better nurse to patient ratios (2.87), and adequate support staff (2.83) as most likely to affect their decision to return to nursing. These reasons also received similar scores from active, non-working nurses.

Table 5.26 Importance of factors that might affect the decision to return to nursing work, for RNs with inactive California licenses who say they are undecided, 2010

	Not at all important/ does not apply	Somewhat important	Important	Very Important
Affordable childcare at or near work	79.5%	1.4%	6.4%	12.7%
Flexible work hours	24.1%	4.6%	20.7%	50.6%
Modified physical requirements of job	36.6%	7.0%	21.7%	34.7%
Higher nursing salary	25.7%	18.0%	22.6%	33.7%
Better retirement benefits	35.4%	15.5%	15.6%	33.5%
Better support from nursing management	30.6%	10.5%	18.5%	40.5%
More support from other nurses	28.4%	12.9%	18.5%	40.2%
Better nurse to patient ratios	24.7%	9.6%	19.7%	46.1%
Adequate support staff for non-nursing tasks	25.9%	7.4%	24.7%	42.0%
Availability of re-entry programs / mentoring	31.7%	8.0%	15.3%	45.0%
Improvement in my health status	60.9%	4.2%	10.6%	24.2%

Note: 2010 number of cases=71. Inactive RN responses are weighted to reflect the statewide population of inactive RNs. Items that were omitted by respondents who answered at least one of these items were assumed not to apply.

Figure 5.5 Importance of factors that might affect the decision to return to nursing work, for RNs with inactive California licenses who say they are undecided, 2010



Note: Inactive RN data are weighted to adjust for different response rates in age groups. Items that were omitted by respondents who answered at least one of these items were assumed not to apply.

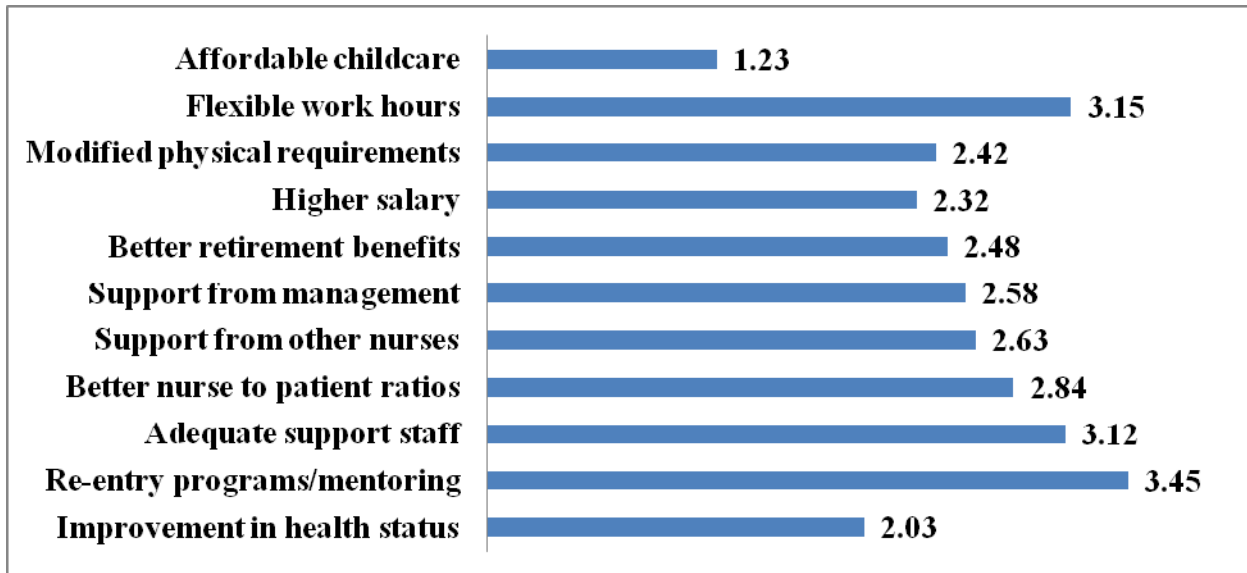
Table 5.27 and Figure 5.6 present corresponding data for nurses with lapsed licenses. The factors that have the greatest importance for nurses with lapsed licenses in the decision to return to nursing are availability of re-entry programs and mentoring (62.3%), flexible work hours (54.5%), modified physical requirements of job (39.0%), and adequate support staff (33.6%). Better nurse to patient ratios, which were a concern for the inactive and active non-working RNs, were less important to the lapsed nursing population.

Table 5.27 Importance of factors that might affect the decision to return to nursing work, for RNs with lapsed California licenses who say they are undecided, 2010

	Not at all important	Somewhat important	Important	Very Important
Affordable childcare at or near work	92.2%	0.0%	0.0%	7.8%
Flexible work hours	17.4%	4.8%	23.3%	54.5%
Modified physical requirements of job	38.3%	20.3%	2.4%	39.0%
Higher nursing salary	32.9%	10.2%	49.1%	7.8%
Better retirement benefits	16.8%	28.7%	44.3%	10.2%
Better support from nursing management	19.8%	25.7%	31.1%	23.4%
More support from other nurses	19.8%	20.3%	36.5%	23.4%
Better nurse to patient ratios	19.8%	2.4%	52.1%	25.8%
Adequate support staff for non-nursing tasks	9.6%	2.4%	54.5%	33.6%
Availability of re-entry programs and mentoring	7.2%	2.4%	28.1%	62.3%
Improvement in my health status	59.8%	2.4%	12.6%	25.2%

Note: Number of cases= 17. Lapsed RN data are weighted to adjust for different response rates in age groups. Items that were omitted by respondents who answered at least one of these items were assumed not to apply.

Figure 5.6 Importance of factors that might affect the decision to return to nursing work, for RNs with lapsed California licenses who say they are undecided, 2010



Note: Lapsed RN data are weighted to adjust for different response rates in age groups. Items that were omitted by respondents who answered at least one of these items were assumed not to apply.

The importance of factors that might encourage a nurse with an inactive license to return to nursing is reported by age in Table 5.28. Due to the small number of respondents who had lapsed licenses, those responses are not shown. Among nurses with inactive licenses under 65 years old, the factors most often rated as important or very important included flexible work hours (72.5%), adequate support staff (71.9%) and better nurse to patient ratios (70.8%). For inactive nurses over 65, flexible work hours (66.7%), and modified physical requirements of the job (50.0%) were identified as most important by more than half of older RNs.

Table 5.28 Share of nurses rating factors as important or very important in the decision to return to nursing, for nurses with inactive licenses, by age group, 2006-2010

	Inactive					
	2006		2008		2010	
	Under 65 years old	65 years or older	Under 65 years old	65 years or older	Under 65 years old	65 years or older
Affordable childcare at or near work	5.5%	0.0%	0.0%	0.0%	23.6%	0.0%
Flexible work hours	64.4%	27.4%	51.4%	24.8%	72.5%	66.7%
Modified physical requirements of job	32.8%	25.6%	40.0%	24.0%	57.9%	50.0%
Higher nursing salary	51.7%	22.2%	46.0%	20.9%	62.9%	27.8%
Better retirement benefits	50.0%	21.4%	36.7%	20.9%	56.7%	16.7%
Better support from nursing management	53.6%	29.9%	57.7%	26.4%	62.4%	44.4%
More support from other nurses	47.3%	29.1%	40.3%	21.7%	64.6%	33.3%
Better nurse to patient ratios	59.0%	35.0%	47.1%	26.4%	70.8%	44.4%
Adequate support staff for non-nursing tasks	60.0%	35.0%	55.4%	24.8%	71.9%	44.4%
Availability of re-entry programs and mentoring	69.9%	36.8%	57.7%	25.6%	64.1%	44.4%
Improvement in my health status	24.8%	23.9%	34.1%	15.5%	32.6%	44.4%

Note: 2010 had responses from 53 inactive RNs under 65 and 18 responses from RNs over 65. Inactive RN responses are weighted to reflect the statewide population of inactive RNs. Items that were omitted by respondents who answered at least one of these items were assumed not to apply

Working Outside of Nursing

RNs were asked in 2010 to report if they were employed outside nursing if they were not working as an RN. Over 23 percent of inactive RNs and 12 percent of lapsed RNs residing in California reported they held a non-nursing job (Table 5.29). Most of the RNs working outside of nursing (54.8% of inactive nurses, and 78.4% of lapsed nurses) reported their outside position required nursing knowledge (Table 5.30). Over 33 percent of inactive nurses and 31.5 percent of lapsed nurses reported working in health services (Table 5.31). However, most of the inactive nurses and lapsed nurses indicated that their non-nursing jobs were in an “other” category (43.8% and 45.9%). The most common other jobs for inactive nurses were to work in real estate (10.1%). Too few lapsed nurses reported their other jobs to be compared.

Table 5.29 Employment outside of nursing for inactive and lapsed nurses residing in California and who are not working in nursing, 2010

	Inactive, 2010	Lapsed, 2010
No	74.6%	84.4%
Yes	23.2%	12.3%
No Response	2.2%	3.3%
Number of cases	317	170

Note: Inactive RN responses are weighted to reflect the statewide populations of inactive RNs. Lapsed RN responses are weighted to reflect the statewide population of lapsed RNs.

Table 5.30 Employment outside of nursing requires nursing knowledge as reported by inactive and lapsed nurses residing in California and who are not working in nursing, 2010

	Inactive, 2010	Lapsed, 2010
No	43.7%	21.6%
Yes	54.8%	78.4%
No Response	1.5%	0.0%
Number of cases	66	14

Note: Inactive RN responses are weighted to reflect the statewide populations of inactive RNs. Lapsed RN responses are weighted to reflect the statewide population of lapsed RNs.

Table 5.31 Field outside of nursing as reported by inactive and lapsed nurses residing in California and who are not working in nursing, 2010

	Inactive, 2010	Lapsed, 2010
Health Services	33.3%	31.5%
Retail sales	13.1%	8.2%
Education	6.9%	0.0%
Financial Services	16.5%	0.0%
Consulting	5.3%	2.7%
Other	43.8%	45.9%
Number of cases	66	14

Note: Inactive RN responses are weighted to reflect the statewide populations of inactive RNs. Lapsed RN responses are weighted to reflect the statewide population of lapsed RNs.

Change in Employment Status

Inactive and lapsed RNs were asked about employment status changes in the past year, regardless of current employment status (Table 5.32). Nearly 15 percent of inactive RNs residing in California and 26 percent of lapsed nurses reported a change in their employment status in 2010. Table 5.33 reflects for inactive RNs, the two most often reported changes were having left a registered nursing job (22.5%) and “other” change (49.3%) the most common of which were retired (56.0%) and disabled (20.3%). Among lapsed RNs, 18.3 percent reported they had left a registered nursing job, and 80.8 percent reported an “other” change, of which being retired (41.4%) and disabled (10.6%) made up more than half of responses.

Table 5.32 Change in employment status as reported by inactive and lapsed RNs residing in California, 2010

	Inactive, 2010	Lapsed, 2010
Yes, change	15.0%	26.0%
No, change	85.0%	74.0%
Number of cases	268	141

Note: Inactive RN responses are weighted to reflect the statewide populations of inactive RNs. Lapsed RN responses are weighted to reflect the statewide population of lapsed RNs.

Table 5.33 Type of change in employment status as reported by RNs who experienced a change in employment status in 2010 and residing in California, 2010

	Inactive, 2010	Lapsed, 2010
Increase hours	8.2%	5.4%
Decrease hours	14.4%	2.1%
New RN job	0.0%	0.0%
Left RN job	22.5%	18.3%
New Position, Same Employer	6.2%	4.2%
Same Position, New Employer	2.6%	2.1%
New Position, New Employer	0.0%	0.0%
Other	49.3%	80.8%
Number of cases	41	34

Note: Inactive RN responses are weighted to reflect the statewide populations of inactive RNs. Lapsed RN responses are weighted to reflect the statewide population of lapsed RNs.

Inactive and lapsed RNs were asked about the reasons for employment status changes in the past year (Table 5.34 & Table 5.35). Inactive RNs reported as very important being retired (22.4%), other family responsibilities (16.9%), change in financial status (16.9%), and wanting to work more convenient hours (16.9%). Lapsed RNs reported as very important having a change in health status (21.9%), wanting to work more convenient hours (21.9%), being retired (19.4%), and change in financial status (16.0%).

Table 5.34 Factors important to changes in employment status as reported by inactive RNs who experienced a change in employment status in 2010 and residing in California, 2010

	Inactive, 2010			
	Not at all Important	Somewhat Important	Important	Very Important
Retired	52.6%	3.5%	21.5%	22.4%
Childcare responsibilities	87.1%	0.0%	3.5%	9.4%
Other family responsibilities	71.7%	11.4%	0.0%	16.9%
Salary	64.6%	15.4%	16.1%	4.0%
Laid off	81.6%	3.5%	3.5%	11.4%
Change in spouse/partner situation	84.3%	3.5%	0.0%	12.2%
Change in financial status	79.6%	3.5%	0.0%	16.9%
Relocation	91.8%	0.0%	3.5%	4.7%
Promotion	83.1%	0.0%	7.5%	9.4%
Change in Health Status	69.4%	3.5%	14.5%	12.6%
Wanted more convenient hours	56.3%	15.4%	11.4%	16.9%
Dissatisfied with Job	76.0%	0.0%	11.4%	12.6%
Other	89.0%	0.0%	3.5%	7.5%

Note: 2010 number of cases=21. Responses are weighted to reflect the statewide populations of inactive RNs

Table 5.35 Factors important to changes in employment status as reported by RNs with lapsed licenses who experienced a change in employment status in 2010 and residing in California, 2010

	Lapsed, 2010			
	Not at all Important	Somewhat Important	Important	Very Important
Retired	63.5%	8.7%	8.3%	19.4%
Childcare responsibilities	97.2%	2.8%	0.0%	0.0%
Other family responsibilities	81.3%	2.8%	2.8%	13.2%
Salary	88.5%	2.8%	5.9%	2.8%
Laid off	97.2%	0.0%	2.8%	0.0%
Change in spouse/partner situation	84.0%	0.0%	2.8%	13.2%
Change in financial status	75.7%	2.8%	5.6%	16.0%
Relocation	100.0%	0.0%	0.0%	0.0%
Promotion	91.3%	0.0%	2.8%	5.9%
Change in Health Status	63.8%	0.0%	14.3%	21.9%
Wanted more convenient hours	72.5%	0.0%	5.6%	21.9%
Dissatisfied with Job	85.4%	5.9%	5.9%	2.8%
Other	97.2%	0.0%	2.8%	0.0%

Note: 2010 number of cases=25. Responses are weighted to reflect the statewide population of lapsed RNs

Chapter 6. Thematic Analysis of Nurses' Comments

Introduction

Narrative responses were invited in the comments section at the end of the 2010 Survey of Registered Nurses and were submitted by 1,265 survey respondents, representing 20 percent of the total 6,273 survey respondents. Nearly 40 percent of respondents indicated interest in the results of this survey and offered an email or street address for notification purposes.

The survey respondents who entered narrative comments are slightly older than those who did not comment, have been practicing nursing a little longer, and tended to under represent ethnic minorities (Table 6.1).

Table 6.1 Characteristics of respondents who commented and all survey respondents

	Respondents who Commented	All Survey Respondents
Years in nursing (yrs)	24.2	20.8
Age (yrs)	52.9	49.1
Ethnicity (% White)	69.4%	62.5%

Note: All survey respondents number of cases=6,273. Respondents who commented number of cases=1,265. Data in table is not weighted.

The percent of online respondents leaving narrative comments (24%) was greater than the corresponding percentage among hard-copy respondents (20%) (Table 6.2). The online narrative respondent's characteristics more closely mirrored the larger population in terms of age and experience.

Table 6.2 Characteristics of online narrative respondents vs. hard-copy narrative respondents

	Hard-Copy Respondents	Online Respondents
Years in nursing (yrs)	25.2	20.0
Age (yrs)	53.9	48.9
Ethnicity (% White)	70.0%	67.1%

Note: Number of total hard copy and online respondent cases=1,265. Data in table is not weighted.

It should be kept in mind that the comments made by 20 percent of the sample respondents may not necessarily reflect the opinions of the whole sample of surveyed RNs, let alone the whole of the California nursing workforce. Nonetheless, the fact that the expressed issues, opinions and concerns are shared by a considerable number of sampled nurses suggests that these are very real concerns and issues in the nursing workforce.

Some respondent comments were not relevant to this thematic analysis; approximately 2 percent merely wanted to express their thanks for being included in the survey, and 8 percent wrote to clarify responses to questions earlier in the survey. Approximately 2 percent of comments included specific critiques of this survey instrument and focus of the survey questions, which will be considered for future surveys. The majority of the comments concerned the practice of nursing in the hospital setting.

This analysis utilizes a set of five themes identified from the past three BRN Surveys of Registered Nurses. These five thematic areas are: (1) the culture of nursing, (2) work relationships, (3) job-related concerns, (4) nursing education, and (5) compensation for work. Overall, the tone and content of the 2010 survey comments remain very similar to past surveys. This is not surprising as the concerns voiced in these comments are fundamental issues affecting how nursing is practiced in the midst of an evolving health care industry and integration of rapidly changing technology. The 2010 survey comments break from the past surveys in that there

are comments indicating that recent nursing graduates are having difficulty finding employment in nursing. The thematic analysis below highlights nurses' perceptions of their profession and working conditions.

Theme 1: Culture of Nursing

A common theme among the narrative comments of the 2010 Survey of RNs was the changing nature of "being a nurse." These comments often reflected the clash between long-held practices and perceptions of nursing and the changing demands of a challenging work environment.

State of Nursing Today

Of the many comments about the changing nature of nursing, only one commenter felt nursing was changing for the better. Negative changes were linked with increased documentation requirements and correspondingly less time at the bedside, heavy workloads, unprepared new nursing graduates, and facilities where cost-cutting and efficiency are a priority, all resulting in less than the highest quality of care.

"Nursing has become a very fast paced profession. There is not enough time for patient care and patient education. The paper work is overwhelming. It seems like a conveyor belt where the emphasis is to get patients in and out of the hospital as fast as you can. The day of having time to talk to patients is long over."

"I returned to bedside nursing for more direct satisfaction with my work. Although the financial compensation is adequate, the flexibility of scheduling is not. The physical and emotional demands are enormous, and the system makes it challenging to maintain a healthy balance with an outside life. I have loved being a nurse, but I am less and less certain that it is possible to provide warm, compassionate care in the face of relentless changes in regulations and technology."

"I am very concern with the direction of the nursing profession in California. 1)aging rn population, 2)young rns unwilling to work in demanding conditions, 3)rn to patient ratio higher, 4)Minimal to no break rebets [sic,recte reliefs] 5)patient acuity levels higher 5)over taxing rns lead to minimal rn support to each other.6)low morale in the work place 7)Older RNs having to learn and utilize the many computerized health information systems in one institution. 8) minimal administration acknowledgement of conditions thus providing minimal solutions to problem."

The nursing workplace may feel more precarious than in the past. New nursing graduates as well as older, returning nurses are having trouble finding a position. Working nurses may be working in a position where nursing does not resemble traditional practice. RNs may be experiencing cuts in pay, benefits, and hours, while working in a stressful, understaffed work environment. Many pointed to new rules and regulations that require more documentation, new technologies to learn, too little time at the bedside with patients, and too much time at the computer. All of these changes are happening in the midst of the worst economic recession in memory.

"I have a hard time with information overload and the constant changes in policies/procedures, protocols, equipment, computer programs, etc. Liability always looms over our heads, too much paperwork/charting, not enough time with patients and families."

Pride in the Nursing Profession

Except for three respondents who felt their decision to go into the nursing profession was a bad one, the pride in being a nurse and commitment to the profession's high standards were evident throughout the comments. Many of the critical comments reflected frustration and disappointment that the practice of nursing does not meet

its own high standards. Some respondents were unequivocal in their pride and satisfaction with their nursing career:

“I have been with the same hospital my entire nursing career thus far, and I am very proud of my profession and have the opportunity to work with a staff that is customer service focused ... and we have a great working relationship while working hard together.”

“I have practiced as a nurse in California for 37 years. It is a field of dedicated, honest, ethical, moral and principled practitioners I have always been proud to be a part of.”

“Choosing nursing as a career was the best choice I could have ever made. Even now in this economy and scary time I am grateful of the job security that my nursing career can offer.”

More often than not, respondents offered criticism and advice, along with their appreciation for nursing. Areas of criticism included inadequate nursing education, perceived reliance on foreign nurses, lack of nursing leadership, and the decline of nursing as a profession.

“I must express my disappointment in the direction nursing has taken. It is now a job focused on how much money you can make. Patient care begins and ends with the shift. No continuity of care. No care delivery standards. A patient’s care is dependent on your nurses the unit, the shift. None of these should make a difference. Boy, I would love to say more. Nursing was good to me and I was proud to be one.”

“Having had recent experience as an in-patient, I am very disappointed in the lack of professionalism, adherence to BASIC nursing principles and “caring” aspect of most (not all) RNs I encountered. What happened to personal integrity/responsibility/pride?”

“BRN should require some sort of verbal fluency with English in order to obtain licensure. Many RN students can read and mostly understand English, but have significant difficulty with the verbal communication which creates potential safety issues for clients.”

“The focus of nursing has become more employees of corporations than patient advocates which was why I chose to become a nurse. Very difficult to see purpose when overworked or buried in paperwork to make charts look good for surveyors.”

Similar to 2008 survey comments, several respondents remarked on a perceived attitude among younger nurses who seem to treat nursing as a “job” with flexible hours and good pay. Respondents perceived this behavior as undermining professionalism and quality patient care.

“Generation gaps also pose a big problem since there are different ages of working nurses - younger nurses are lazier and focus more on paper/computer work than actual pt care. Nurses should have to work as nursing assistants prior to being accepted into nursing school!”

“I have tremendous respect for the nursing profession... My observation is that the quality/caliber of individuals attracted to the profession has declined as women (in particular) are able to choose from higher status, more highly compensated professions.”

“Too many nurses graduating with no common sense, no work ethics. Students need to be better educated to patient care and better work ethics.”

The mean satisfaction ratings given by all active nurses were all relatively high (Chapter 3, Figure 3.11). Active nurses scored their “job overall” with a 4.2 rating, “nursing profession overall” with 4.1, “quality of patient care” with 4.1, and “work is meaningful” with a 4.2, on a 5 point scale where 1 = “very dissatisfied” and 5 = “very

satisfied”. These scores indicate that the negative comments about the nursing profession written in the open-ended comment section do not necessarily reflect the views of the majority of the survey respondents.

Respect for Nursing

The issue of lack of respect and appreciation of nursing skills and responsibilities was often mentioned in the context of employers and managers who treat nursing staff as a pool of technicians to be maneuvered to increase efficiency. Nurses see inadequate staffing, increased housekeeping duties, and heavy workloads as an expression of disrespect and lack of appreciation for the nursing profession by their administrators and managers. These comments are consistent with some of the lower rated areas of satisfaction identified by working nurses in the 2010 RN Survey Report: involvement in policy and management decisions (3.2), non-nursing tasks required (3.3), leadership from nursing administration (3.3), and recognition for a job well done (3.5) (Chapter 3, Figure 3.11).

“Nursing is a difficult job and I believe there is not enough respect for Nurses in California. Patients are treating nurses like waiters or the “cleaning” person and do not realize how much is done for their care.”

“I think it’s getting harder and harder to be a nurse. Every week there are new regulations or additional paperwork. More responsibility and accountability and no additional pay or appreciation. Nurses are ultimately responsible for anything that goes wrong in the hospital - not management or MD’s. No one to protect nurses.”

Suggestions to Strengthen the Nursing Profession

Suggestions provided by survey respondents to strengthen the nursing profession included introducing students to nursing as early as middle school; more education to assist nurses in moving to new specialty areas; provide social networking and a website to assist new nursing graduates, a strong and active Board of Registered Nursing; and stronger leadership from nursing administrators. Many respondents commented on the need to raise salaries for nursing instructors to attract the best nurses into academia. Respondents also suggested that flexible scheduling and less physically demanding job roles would allow the older, experienced nurses to continue contributing to a profession they love.

“The Board should find more ways of having programs that would support new grads, especially those not affiliated with any hospitals per their internship. Network with hospitals and nursing schools statewide and countrywide/nationwide that would hire new grads, provide a website where new grads can resource.”

“Love nursing! In the hospital setting - nursing Dept. can’t bill for nursing care. Nursing services is included in the price of the hospital room along with housekeeping and dietary. It does not elevate nursing as a professional. Higher education alone would not do it. Until we put a monetary value for our service, we will not have the recognition that nurses deserve.”

“In some capacity, there is little support for RN’s with disabilities, I’ve found from my own experience as well as my prior experience as a Nurse Manager. Perhaps besides eating our young, we are also not very good at taking care of our older and disabled RN’s! I’d love to return to Nursing in some capacity, but I will never physically be able to meet the job description I once held. Even RN’s that maintain gd physical health, but wish to semi-retire face difficulties.”

“It is difficult to change specialties because new employers always want experience in their area. More educational classes should be offered to allow RN’s to move from one specialty to another like RN’s did in the past. There’s not much room to move up the ladder so you look to move laterally.”

Theme 2: Work Relationships

Relationships with Patients

The 2010 RN respondents rated interactions with patients (4.3) as the highest area of satisfaction (Chapter 3, Figure 3.11).

“I love being a nurse and being able to help and serve people.”

As many narrative responses indicate, providing compassionate, quality patient-centered care is felt to define the practice of nursing. A majority of the critical narrative responses submitted in 2010 reflect the frustration of nurses not being able to provide appropriate care due to circumstances beyond their control. Respondents also mentioned a changing patient population that can make nursing more stressful; a very few respondents indicated that some patients do not seem to respect the nurse.

“Nursing is becoming more and more stressful as patients become sicker and more dangerous as they become heavier.”

“I believe the nursing profession should educate the patients in what our role is in the medical field. I’m perplexed why patients believe my primary role as a RN is to follow the physician around and do “his bidding”. I believe patients would be surprised at how many times physicians are wrong in drug dosage, orders, tests, etc.”

Relationships with Physicians

There were fewer comments regarding relations with physicians than in the 2008 Survey of RNs. A few comments indicated improvement in physician relations at their facility, however, typically, respondents noted no change in the perceived lack of respect or appreciation from physicians.

“Not enough administrative support to deal with difficult doctors (i.e. rudeness, disrespectfulness, demeaning, arrogant, unapproachable) this causes a severe breakdown in communication which then affects patient safety! (a few doctors make me not even want to come to work!)”

“I won’t even start with a list of the criticisms of the MDs”

Relations with Management and Employers

Few of the narrative responses were positive about management and employers. Lack of support, failure to understand or respect the complexity and intensity of nursing practice in the hospital, and making efficiency a higher priority than quality care were common themes in comments about administration. Heavy workload, inflexible scheduling, low wages, and ignoring physicians’ incivility were cited as examples. Most respondents felt that their needs and their voice were not heard by their administration.

“I now have to punch in and out 4x/day on a time check as an hourly employee. What profession (MDs, lawyers, teachers, etc) is expected to do this? I hope this type of “treatment” shows up on another survey. I love my actual work but have always been dissatisfied with administration’s rules, regulations, and treatment of staff.”

“In the hospital environment I found it to be the non-medical administrative people who showed negativity towards staff.”

“The poor state of our economy has definitely made an impact in the hospital and the nurses... we now are being pushed harder and harder to send patients home quicker to reduce the census so staff can be sent home. ...More importantly, we feel the pressure and

have to push back and often explain why our patients did not 'get out' in a timely fashion. The patients' needs are always first, and met, but we feel very pushed and shoved at times. Our manager is supportive and works with us, but we know she is being heavily directed from upper management."

"I love being a nurse. I love caring for my patients. Administration in both hospitals I have worked in do all they can to interfere with patient care. They are so concerned about the money; it actually costs them more by preventing nurses from giving thorough care."

Relations Among Nurses

While fewer than in 2008, some narrative responses submitted in 2010 mention the lack of support among nurses in some workplaces, including a few responses stating nurses not only lack support of their fellow nurses but also actively undermine one another. This area was a source of stress for some respondents. Critical comments regarding relations among nurses are not reflected in the 4.0 satisfaction score for "support from other nurses" as well as the 4.1 score for "teamwork between coworkers" identified in the 2010 RN Survey Report (Chapter 3, Figure 3.11).

"Nurses are given an awesome amount of responsibility yet no authority. Nursing is one profession that "eats its own" there needs to be much more support for one another and from nursing administration/leadership. The Blame game needs to stop."

"I think this bullying is a big reason why a lot of people leave hospitals - because a lot of hospitals DO tolerate bullying and don't speak out against those who do it. "

Suggestions to Improve Work Relationships

Suggestions for improving relations among nurses included more support from nursing administration/managers, standardization of entry-level nurses at BSN or higher, and a stop to creating new titles/degrees that result in a more segmented nursing profession.

Theme 3: Job-related concerns

While comments are overwhelmingly positive in regards to the practice of nursing, many comments reflected dissatisfaction with their particular employer. Narrative responses in 2010 in this area differ from previous surveys in that many respondents indicated the inability to find employment as a nurse. Specifically, new graduates of nursing programs are remaining on the job market for months, if not a year or longer, and returning nurses are finding it difficult to be hired in the current job market.

"I'm a new grad with the BSN degree. Yet unable to find a position in an acute care setting, sub-acute care, or even a nursing home. I'm still looking for a position now."

"My biggest regret in life is having gone back to school to become an R.N. I've spent 7 years pursuing my degree and there are no new grad positions to be found. Every day that passes I become more unemployable. Nursing Shortage? Where!?"

"The re-entry programs to hospital nursing is seriously lacking. When I moved to Sacramento, I would have loved to return to the hospital setting, but re-entry was not available and my years of experience were considered as nothing."

For employed RNs, the main issues in the workplace that were mentioned included (1) paperwork and documentation requirements, (2) staffing or workload, (3) scheduling, and (4) quality of care. All of these issues were cited as stressors that negatively impact the quality of patient care. The inordinate amount of time required

for charting and documentation, resulting in time lost for patient care, was the most frequent complaint among these narrative responses.

Paperwork and Documentation

The increasing amount of paperwork required of nurses was the subject of the greatest number of critical job-related comments. Excessive demands for documentation were felt to take nurses away from direct patient care. The amount of paperwork required received the lowest satisfaction rating, 3.0, on a 5.0 scale, in the 2010 RN Survey (Chapter 3, Figure 3.11). While the amount of paperwork required was the greatest complaint, some respondents were especially critical of their electronic documentation systems.

“The paperwork is overwhelming. In a typical day when my primary duties are ‘nursing care’ about 40% of that day is taken up with documentation and audits.... There must be a way to do all this documentation AND take excellent care of the pt too!”

“There is too much emphasis placed on documentation not enough time spent at the bedside with the patient. Very frustrating at times.”

“Electronic medical records has changed my practice very time consuming, limits responses, encourages checking a box and not thinking critically, unable to make changes in clinical practice due to lack of IT personnel/budget constraints, forces 80-20 rule standard care or treatment, not allowing for individualized care. Takes nurses away from bedside, more time spent on computer, less interacting with patients.”

Staffing and Workload

Understaffing, or heavy workload, was among the most commonly identified concern among respondents. The satisfaction ratings with workload as discussed in the 2010 RN Survey were rated 3.4 on a 5 point scale (Chapter 3, Figure 3.11), indicating that survey respondents have a slightly satisfied view of their workload. In many comments the heavy workload is considered evidence that the management does not understand the challenges of nursing in a hospital. Some respondents feel that budget-cutting and efficiency have replaced quality patient care as a priority.

“There are patient care standards we must abide to, unfortunately our workloads do not allow this to occur. Many nurses skip breaks and or lunch, due to inadequate staffing. Most of us love the jobs we do, but do not have time to provide appropriate care. Not enough time for teaching, and have many tasks we sometimes cannot get to. Primary care nursing is great, if we had appropriate assignments that would allow us to do our jobs well.”

“Hospitals are dangerously understaffed and frequently are in violation of standards of care.”

California’s mandated nurse-patient ratios were universally praised especially by those nurses who had experience in nursing in other states. Often, though, that praise was balanced by complaints about cuts to support staff that accompanied implementation of nurse ratios. Non-compliance with the mandated ratios was mentioned by several respondents.

“I have worked as critical care nurse in many other states. The staffing laws in California are the primary reason I settled in California to finish my nursing career”

“The nurse/patient ratio seemed like a good idea but now I see ancillary staff (CNA’s) cut and their care is really what makes the patients satisfaction higher. So overall I do not see that it has helped.”

“The board needs to look at nurse - patient ratio, again. Taking care of 5 patients in a busy medical - surgical unit, without CNAs to help and then covering an extra 2 patients - is just too much!”

Scheduling

The demand of long shifts and inflexible scheduling was a common complaint and cited as a reason for leaving the nursing profession and/or the hospital environment. At the same time, the wide range of scheduling configurations available to nurses has clearly been a benefit for many raising families or attending school. The issue of working through breaks and or lunch came up frequently in connection with the issue of understaffing on the job. The satisfaction rating for work schedule as discussed in the 2010 RN Survey was 4.1 on a 5 point scale (Chapter 3, Figure 3.11), indicating that survey respondents are generally satisfied with their work schedule.

“Nursing has fit my personal and family needs through the years. I was able to increase or decrease hours when my children were young and increase or work extra.”

“I feel that twelve hour shifts are unsafe. There’s so much to do during a shift. Twelve hours is too long to be safe.”

“12 hour shifts and increasing acuity drove me out of acute care nursing.”

“I am in a hospital which also uses the Charge RN as an additional RN, when other RN’s are at ratio, so that I am ‘pulled’ as charge RN/relief RN to take admissions. Hence, all RN’s get no break, even lunch break, because there is no relief RN. RN’s are required to clock out on time and work overtime, without pay, or be ‘counseled.’”

Quality of Care

Quality of care, and patient safety, were frequently mentioned as concerns among respondents. Heavy workloads and lack of sufficient support staff were cited as the main obstacles to delivering quality care. The inadequate skill level of new nursing graduates was mentioned as a concern by several respondents.

“I’m the ‘old’ generation with training in complete patient care - I never feel confident in the 2 year grads with little hands on care - I feel sorry for them as they seem lost in some situations - let’s hope it goes back to 3&4 year programs and better hands on patient care.”

“Unfortunately, I have had several occasions lately to encounter nurses in hospital situations because of sick family members. Some have been terrific dedicated nurses, and some not so dedicated. This is very upsetting when nurses don’t measure up to what I consider good standards of care and I make it a point to let administration know.”

“I quit my previous job when, to save money, they cut back drastically on CNA hours. As a result, patient care deteriorated. I would drive home crying - because my patients’ care needs were not met.”

Theme 4: Nursing Education

Nursing education was a common theme including (1) inadequate preparatory education and (2) lack of available nursing re-entry programs. Many commenters were frustrated with nursing education because increasing levels of education did not necessarily translate into corresponding increases in salary across the various practice settings.

Preparatory Education

Comments regarding preparatory nursing education were focused around two themes: the need for more schools that can accommodate all the people eager to become nurses, and the failure to produce graduates who were prepared to work with skill and confidence in the clinical setting. Some comments state that they fault the caliber of nursing program applicants being accepted as well as the nursing programs themselves. It was evident that respondents did not feel that all nursing programs are equal, nor did they feel that a higher degree indicated a better-prepared nurse.

“I teach new nursing students and nurse practitioners and the decreasing level of both civility and critical thinking skills are alarming.”

“I wish something could be done to expedite the time it takes students to get into an RN programs with a 2yr waiting list with all prerequisites are done!”

“There are too many on line RN programs that are accepting poorly qualified applicants and then sending out too many poorly skilled nurse with limited nursing knowledge. Many of the two year nursing schools are doing a poor job selecting and training nurses. Only nursing students graduating from baccalaureate schools should be eligible to become registered nurses. The LVN’s of 30 years ago had better training and skills than many of these new two year nurses.”

Re-entry Programs

Several respondents indicated they are returning nurses who would like to continue practicing nursing but have had difficulty locating information about reputable nursing re-entry programs, particularly programs that could be found nearby. The comments remind us, also, that these returning nurses are an overlooked addition to the state’s nursing workforce.

“I would like to see programs in place in hospitals for nurses who would like to return to hospital nursing. There are a lot of nurses that would like to return after raising families. They want part-time and flexible hours. They are not wanting complete retirement. They want to review procedures and refurbish their skills in a hospital setting with supervision, classes or something to get them back to work in this area.”

“I know of several experienced RNs who are unable to find jobs in clinical settings after being away for more than 5 years. Several have taken re-entry programs, but these have been difficult to find, expensive, usually in cities many miles away, and usually without any clinical component. If our nursing shortage is so severe and there are nurses willing to work why is it so difficult to come back and why is no one addressing this?”

Theme 5: Compensation for Work

The 2010 RN Survey findings showed the average compensation for working RNS in California was \$82,134 (Chapter 3, Table 3.29). Earnings from nursing work were reported to be very important to the households of nurses, accounting for the majority of the household income among 68.5 percent of working nurses (Chapter 3, Table 3.34). Almost universally, narrative responses regarding compensation expressed dissatisfaction with salary, benefits, or both.

Salary

A few respondents remarked that part of the attraction to working in California is the high salaries (even with a high cost of living), but the majority of respondents felt their salary was inadequate considering the amount of work and responsibility required of them. The current recessionary economy was also cited as significantly affecting nursing incomes. The satisfaction rating for salary as discussed in the 2010 RN survey was 3.9 on a 5 point scale (Chapter 3, Figure 3.11), which is the highest rating ever received and indicates that the majority of nurses are increasingly satisfied with their salary.

“Prior to this recession my answers would have been different. Recently my wages, benefits and job security have all been greatly reduced - (as I am sure has happened to many people).”

“NPs are very underpaid & deserves better salaries. With the new Healthcare Reform something needs to be done about the salary.”

“At this point in my career the financial aspect is very very important. At our hospital we have had our matching 403b funds stopped, no raise this entire year and bonus's for years of service removed until further notice. I still do a great job for my patients but not very motivated for the organization.”

Some respondents expressed dissatisfaction with perceived salary inequities within the nursing profession.

“I do have a certification in post-anesthesia nursing (have had this for 20 years.) The only compensation my hospital gives for being certified is a \$1,000 bonus each time recertified (every 3 years.) I feel that there should be a pay differential when RN holds a specialty certification.”

“There should be uniform pay increases/incentives for having a BSN!”

“I resent the high salaries acute care nurses receive, the little effort put forth in their jobs and the extreme amount of complaining they do! The RNs I work with in Skilled run circles around most med surg. Acute care nurses with very little or no professional recognition!”

Benefits

Benefits, while not mentioned as often as salary, were noted as an important and desirable aspect of a fair compensation package.

“And yet we get very little when we retire. We have the lowest retirement plans. We took care of everyone and yet we don't get any when we retire”.

Summary of Thematic Findings

While it is unlikely that the perspectives voiced in the comments section fully represent all nurses with active California licenses, the recurrence of key issues indicates their relevance to a sizable number of nurses. The issues voiced in these comments are not new; the list of concerns among the respondents is nearly identical to those of the 2004, 2006, and 2008 surveys.

Significant numbers of 2010 narrative responses indicate that nurses feel dissatisfied with heavy workloads, demanding schedules, and support systems perceived as inadequate. Many nurses were experiencing difficulty finding work due to a weak job market, and some expressed greater insecurity about their positions due to layoffs and salary freezes. Underlining many of these comments are collective concerns about the resulting quality of care

and patient safety. Comments show that nurses are frustrated and distressed by a work environment perceived to erode professional respect and pride, and more importantly, their ability to provide the highest quality patient-centered care.

These narrative comments offer some insight into issues which respondents consider in their decisions to continue a career in the nursing profession or work in the hospital setting. Comments from the 2010 RN Survey dramatically remind us that nurses work in an industry that is not immune to the fluctuations of the marketplace. In a time of shrinking budgets and downsizing, nurses are confronting cuts in compensation and heavier workloads, and re-evaluating the physical and emotional cost of doing what they love – giving compassionate, quality care to their patients.

Chapter 7. Conclusions

California has a diverse workforce of nurses, and this diversity is increasing with the entry of more men and minorities into the profession. In general, the trends in nursing seen between 2004 and 2010 have remained the same. The workforce continues to age -- 46.9 percent of nurses with active California licenses are 50 years or older. Nurses are well educated, and a large share of nurses pursue additional education after entering the profession. Employment rates of registered nurses are very high, particularly for a profession composed of many older and female workers. However, RNs in 2010 reported changes to the working environment that led more RNs to seek work and delay retirement despite fewer hours and the stabilization of wages.

In 2010, about 37 percent of nurses with active California licenses received some additional education. Nurses have a wide range of job opportunities available, and can take advantage of even more with appropriate educational advancement. However, there is often a long gap between when nurses complete their initial RN education and later complete a higher degree. For example, if a nurse completes an initial associate degree and pursues additional education, she is awarded a baccalaureate degree in nursing nearly 9.5 years later. In 2010, 54.1 percent of California's nurses with active licenses had a college degree before matriculating to nursing school. Many people who enter the nursing profession do so at older ages. Only 30.6 percent of recent pre-licensure graduates were under 25 years, and over 28.4 percent were 35 years or older. Over 56 percent of California's RNs completed their pre-licensure education within California. Internationally educated nurses make up 23 percent of the actively licensed nurse population. More than fifteen percent of California's nurses were educated in the Philippines.

Eighty-seven percent of nurses with active licenses and California addresses were working in nursing positions in 2010. Over 90 percent of nurses younger than 55 years old are employed in nursing positions. Of particular interest is the surprisingly high level of employment of RNs ages 60-64 years. In prior years, between 21 and 27 percent of nurses in this cohort were not working. In 2010, the number of non-working nurses in the 60-64 year cohort was only 18.6 percent. The number of nurses under 30 who were employed declined for the first time since these surveys were launched in 1990. Larger numbers of younger RNs with lapsed licenses reported living outside of California. Among active, working RNs living outside the state, a record high of 64.4 percent reported not working in California in 2010. The apparent loss of the younger nurses to the workforce is disquieting, as California has spent considerable money on increasing school enrollments to abate the nursing shortage.

Nurses who hold active California licenses but live outside the state also contribute to the labor supply. Of the actively licensed nurses residing outside California, 35.6 percent worked in California in the previous year. Over sixteen percent of out-of-state nurses worked for a temporary agency, registry, or traveling agency, and over 7 percent worked for a telenursing employer with California clients. Nurses employed with a traveling or temporary agency worked an average of 2.1 months and 39.7 hours per week in California during the previous year. Thirty percent of nurses who have active California licenses but reside outside the state plan to work intermittently in California in the future, indicating that this non-resident workforce is important to meeting the health care needs of Californians.

The employment settings of RNs have been relatively stable over the past decade, with most nurses working in staff nurse positions, and most working in acute-care hospitals. Nurses work in a wide range of roles, including long-term care, management, patient care coordination, education, and other roles. Over 17 percent of working RNs who reside in California reported that they hold more than one nursing position.

Compensation for nurses has risen substantially, from an average of \$31,504 in 1990 to \$82,134 in 2010, but earnings growth slowed between 2008 and 2010. Twenty-two percent of RNs earn more than \$100,000 per year. As in previous years, nursing incomes within California are highest in the San Francisco Bay Area and lowest in the mostly-rural counties north of Sacramento. Earnings from nursing are very important to the households of nurses, with 48.1 percent of nurses reporting their nursing income comprised at least eighty percent of household income. RNs were asked about fringe benefits received. Over 70 percent of RNs receive personal health insurance, and/or a retirement plan from employers. Over 76 percent of RNs receive health insurance for their families, while only 59 percent received dental insurance.

In 2010, nurses were generally satisfied with their jobs, the profession, and their interactions with patients. The five aspects of nursing that received the highest satisfaction ratings in 2010 were interactions with patients,

feeling that work is meaningful, job overall, team work between coworkers, and work schedule. The five lowest rated areas of satisfaction were the amount of paperwork required, involvement in policy and management decisions, non-nursing tasks required, leadership from administration, and recognition for a job well done.

Some nurses choose to leave nursing work for several years over the course of their careers for a variety of reasons. In 2010, 11.5 percent of nurses with active licenses said they stopped working for more than a year. Over half of the nurses who said they stopped working for one or more years did so due to childcare responsibilities. Other important reasons for temporarily leaving nursing work include other family responsibilities, relocation, and stress on the job.

About 13 percent of nurses with active California licenses who lived in California were not working in nursing jobs in 2010. About 49 percent of RNs who have active licenses residing in California but do not work in nursing, have been out of nursing for five or more years. This share is smaller than in the past; in 1990, 62 percent of nurses who were not working in the profession had been away from nursing at least five years. The factors most frequently identified as “very important” reasons for not working in nursing were retirement, stress on the job, other family responsibilities, and childcare responsibilities. More than 34 percent said they plan to return to nursing or are currently seeking employment, and 26.1 percent were uncertain of their plans. The factors that are most important in the decision to return to nursing are flexible work hours, availability of re-entry programs, better nurse to patient ratios, better support from nursing management, and adequate support staff for non-nursing tasks. Some nurses who are not in nursing positions work in other fields, some of which are related to health care. In 2010, 35.1 percent of California residents not in nursing positions were working outside nursing, and 70 percent of these said their non-nursing job used their nursing knowledge.

Some nurses maintain an inactive license, meaning they renew their license without providing documentation of completion of required continuing education. More than 80 percent of RNs with inactive licenses are 55 years or older, suggesting the inactive license status may be sought by nurses who have retired but do not want to allow their licenses to fully lapse. Nearly half of nurses with inactive licenses say they are retired, and 35 percent report no plan to work in California now but might reactivate their license later. Over eleven percent plans to return to nursing in California within five years. The primary reasons nurses obtain inactive licenses status are retirement, stress on the job, and family responsibilities. Nurses with inactive licenses rated as most important in their decision to return to nursing work are flexible work hours, better nurse to patient ratios, and adequate support staff.

Some nurses maintain a lapsed license, meaning they had not renewed their license on time, and thus it has expired. Fifty-seven percent of nurses with lapsed licenses are younger than sixty-five years old. Forty-one percent of nurses with lapsed licenses say they are retired, and 16.7 percent report no plan to work in California now but might reactivate their license later. Approximately 81 percent of nurses with lapsed licenses said they do not plan to practice in California in the next five years, but 9.2 percent plan to return to nursing in California within five years. The primary reasons nurses obtain lapsed licenses status are retirement, stress on the job, other job dissatisfaction, and non-child-care family responsibilities. Nurses with lapsed licenses rated as most important in their decision to return to nursing work are re-entry and mentoring programs, flexible work hours, and adequate support staff.

One-fifth of all survey respondents offered comments in addition to their survey responses. Most comments included positive remarks about the nursing profession, although many comments were tempered by a short or long list of conditions at their job or in the profession that need fixing. Significant numbers of comments indicate that nurses feel stressed under heavy workloads, demanding schedules, excessive documentation, and support systems perceived to be inadequate. Underlying many of these comments are nurses’ collective concerns about quality of care and patient safety. Some respondents offered solutions to improve nursing in California as well as suggestions to improve this biennial BRN survey of RNs.

Nursing remains a strong profession in California, but the 2010 survey shows signs of stress among nurses caused by the recession of the late 2000s. The average age of nurses has stabilized since 2004, at about 47 years, and many new people are entering the field. However, employment rates of younger RNs dropped between 2008 and 2010, indicating that recent graduates are having more difficulty finding nursing work. At the same time, employment rates of older RNs have risen, and fewer RNs intend to retire in the next five years. The satisfaction of RNs with most aspects of their work has improved over recent years, as has overall job satisfaction and satisfaction

with the nursing profession as a whole. The dominant reasons nurses do not hold nursing positions are retirement, childcare responsibilities, and family responsibilities; however, a larger share of nurses are not working as RNs because they cannot find a suitable position.

The nursing workforce in California is becoming increasingly diverse in both gender and ethnicity, and thus is even better positioned to meet the health care needs of Californians. RNs remain dedicated to improving their skills, and their ongoing commitment to education is one of the strengths of the nursing workforce. In 2010, more RNs are reporting seeking work in nursing, working RNs are more satisfied than previous years, and older nurses are delaying their retirement. As a result, 2010, unlike prior years, has more RNs than ever seeking work in nursing in California. It is likely that this is temporary as nurses who have been delaying retirement decide to retire. Many nurses continue, temporarily or permanently, to leave the profession due to job dissatisfaction and stress on the job. Employers and health care leaders will continue to benefit from supporting this dynamic workforce, seeking to improve the factors that frustrate nurses, and promoting the aspects of nursing which attract RNs to the profession.

Appendices

Appendix A. Survey Tabulations of all questions in the California Board of Registered Nursing, Survey of Registered Nurses 2010. California Residents only, Active Nurses.¹

1. What was the highest level of education you completed *prior* to your basic RN nursing education?

	2006	2008	2010
Less than High School Diploma	0.4%	0.2%	0.6%
High School Diploma	45.1%	41.9%	45.7%
Associates Degree	27.6%	28.3%	25.8%
Baccalaureate Degree	23.4%	25.8%	24.0%
Master's Degree	2.9%	3.0%	3.1%
Doctoral Degree	0.5%	0.7%	0.8%
Number of Cases	4456	4822	5503

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

2. **Immediately prior** to starting your basic RN nursing education, were you employed in a health occupation?

	2006	2008	2010
No	57.0%	58.1%	57.9%
Clerical or Administrative	*	5.0%	5.1%
Military medical Corps	*	0.7%	0.6%
Nursing Aide	19.3%	17.3%	15.7%
Other Health Technician	*	3.7%	5.5%
Medical Assistant	*	2.8%	2.7%
LP/LVN	10.2%	8.1%	9.2%
Other	13.5%	4.4%	3.2%
Number Cases	4461	4807	5495

* Question was not asked in this survey year.

Note: Data are weighted to represent all RNs with active licenses.

¹ Responses only for Registered Nurses that held active licenses and resided in California at the time of the survey. Questions regarding non-California residents were excluded (BRN 2010 Survey questions 56-59). Data are weighted to reflect the population of active RNs residing in California. Where available, total number of active, California respondents appears for each question. Questions where multiple answers could be selected by respondent do not include cases.

3. In what kind of program did you receive your initial, pre-licensure RN education?

	2006	2008	2010
Diploma	16.9%	16.0%	12.4%
Associates Degree Program	47.4%	45.9%	45.0%
Baccalaureate Program	34.9%	36.6%	38.0%
Masters Program	0.1%	0.3%	1.5%
Entry Level Master Program	0.6%	1.2%	0.2%
Doctoral program	0.0%	0.1%	0.2%
30 Unit option program	*	*	2.8%
Number of Cases	4440	4773	5476

* Question was not asked in this survey year.

Note: Data are weighted to represent all RNs with active licenses.

4. In what state or country did you complete your pre-licensure RN education?

	2006	2008	2010
California	60.1%	54.6%	56.2%
Other US state	22.0%	23.2%	22.3%
Australia	0.1%	0.0%	0.2%
Canada	1.4%	1.2%	1.0%
China	0.2%	0.2%	0.4%
England	0.8%	0.9%	0.8%
India	0.5%	0.7%	0.6%
Ireland	0.1%	0.1%	0.0%
Korea	0.9%	1.0%	1.3%
Philippines	11.1%	13.7%	14.0%
Other Country	3.0%	4.4%	3.3%
Number of Cases	4351	4775	5480

Note: Data are weighted to represent all RNs with active licenses.

5. In what year did you graduate from that program?

	2006	2008	2010
1940s	0.2%	0.2%	0.2%
1950s	2.7%	2.3%	1.3%
1960s	8.3%	8.3%	6.1%
1970s	23.3%	21.7%	17.4%
1980s	25.1%	22.7%	20.4%
1990s	25.8%	25.2%	24.1%
2000s	14.6%	19.8%	30.3%
2010s	*	*	0.1%
Number of Cases	4375	4688	5463

* Question was not asked in this survey year.

Note: Data are weighted to represent all RNs with active licenses.

6. In what year were you first licensed as an RN?

	2006	2008	2010
1940s	0.1%	0.2%	0.2%
1950s	2.5%	2.1%	1.1%
1960s	7.9%	7.8%	5.8%
1970s	21.3%	19.8%	16.4%
1980s	25.1%	22.8%	20.2%
1990s	26.5%	24.8%	23.4%
2000s	16.5%	22.3%	31.8%
2010s	*	*	1.1%
Number of Cases	4448	4767	5551

* Question was not asked in this survey year.

Note: Data are weighted to represent all RNs with active licenses.

7. In what state/country were you first licensed as an RN?

	2006	2008	2010
California	63.9%	60.1%	61.7%
Other US	20.1%	21.5%	20.5%
Australia	0.1%	0.0%	0.2%
Canada	1.6%	1.1%	1.0%
China	0.1%	0.3%	0.3%
England	0.7%	1.0%	0.6%
India	0.4%	0.6%	0.5%
Ireland	0.1%	0.1%	0.0%
Korea	0.8%	0.8%	1.1%
Philippines	9.6%	10.9%	11.7%
Other Country	2.7%	3.7%	2.6%
Number of Cases	4447	4790	5480

Note: Data are weighted to represent all RNs with active licenses.

8. In what year were you first licensed as an RN in California?

	2006	2008	2010
1940s	0.1%	0.1%	0.0%
1950s	1.2%	1.0%	0.6%
1960s	5.2%	5.3%	3.9%
1970s	16.9%	14.6%	11.9%
1980s	26.5%	23.6%	20.3%
1990s	26.2%	22.2%	20.1%
2000s	23.9%	33.2%	42.0%
2010s	*	*	1.2%
Number of Cases	4459	4765	5490

* Question was not asked in this survey year.

Note: Data are weighted to represent all RNs with active licenses.

9. Do you presently have an active RN license in California?

Asked first in 2010; all reported respondents had to be actively licensed.

10. In how many states, **other than California**, do you hold an *active* RN license?

	2006	2008	2010
0	88.2%	88.0%	90.0%
1	8.5%	8.4%	7.0%
2	2.3%	2.5%	2.2%
3	0.7%	0.5%	0.4%
4	0.2%	0.3%	0.2%
5 or more	0.1%	0.3%	0.2%
Number of Cases	4456	4746	5551

Note: Data are weighted to represent all RNs with active licenses

11. Since graduating from the basic RN nursing program, have you earned any additional degrees?

	1950s	1960s	1970s	1980s	1990s	2000s	2010s	Number of Cases
ASN	0.5%	2.3%	15.5%	26.6%	16.3%	37.6%	1.4%	157
BSN	0.5%	1.5%	7.6%	18.1%	25.3%	42.0%	5.1%	651
MSN	0.1%	0.8%	6.7%	11.6%	26.0%	44.3%	10.6%	353
Doctorate, Nursing	0.0%	0.0%	0.0%	7.5%	22.6%	53.6%	16.2%	12
Associated, non-nursing	0.7%	1.6%	15.0%	18.6%	13.3%	47.4%	3.5%	104
Bachelor's, non-nursing	0.0%	1.2%	8.7%	21.2%	27.6%	32.9%	8.4%	213
Master's, non-nursing	0.0%	0.2%	4.9%	19.3%	19.9%	44.8%	10.9%	230
Doctorate, non-Nursing	0.0%	0.0%	1.1%	7.9%	40.9%	49.0%	1.1%	42

Note: Respondents could report obtaining multiple additional degrees, so columns will not add to 100%. Data are weighted to represent all RNs with active licenses.

12. Which of the following certifications, if any, have you received from the California Board of Registered Nursing since your initial licensure as an RN?

	2006	2008	2010
Nurse Anesthetist	0.8%	0.4%	0.4%
Public Health Nurse	16.1%	17.5%	15.2%
Nurse Midwife	1.3%	0.6%	0.4%
Psychiatric/Mental Health Nurse	3.2%	1.1%	1.3%
Nurse Practitioner	5.6%	7.4%	5.7%
Clinical Nurse Specialist	3.2%	3.0%	2.8%
None	77.2%	76.7%	76.8%
Number of Cases	*	*	5142

* Question was not asked in this survey year.

Note: Nurses can have more than one certification, so columns will not total 100%. Data are weighted to represent all RNs with active licenses.

13. How long have you practiced as an RN? Exclude years since graduation during which you did not work as an RN.

	2006	2008	2010
Less than 5 years	14.1%	15.7%	19.2%
5 to 9 years	15.5%	14.7%	16.4%
10 to 14 years	14.5%	13.8%	13.5%
15-19 years	12.3%	11.8%	12.0%
20-24 years	13.5%	12.2%	9.7%
25-29 years	12.2%	11.7%	9.7%
30-34 years	9.3%	9.4%	8.9%
35+ years	8.7%	10.8%	10.6%
Number of Cases	4345	4754	5242

Note: Data are weighted to represent all RNs with active licenses

14. Are you currently enrolled in a nursing degree program or specialty certification program?

	2006	2008	2010
No	93.5%	93.0%	91.8%
Yes	6.5%	7.0%	8.3%
Number of Cases	4440	4814	5444

Note: Respondents could report multiple sources of funding, so columns will not add to 100%. Data are weighted to represent all RNs with active licenses

15. What is your degree objective?

	2006	2008	2010
Associates Degree	0.3%	1.0%	0.3%
Baccalaureate Degree	33.7%	34.4%	31.2%
Master's Degree	44.1%	38.5%	44.1%
Non-degree specialty certification	17.4%	21.2%	17.6%
Doctoral Degree	4.4%	4.9%	6.8%
Number of Cases	242	285	360

Note: Data are weighted to represent all RNs with active licenses

16. How satisfied are you with the nursing profession overall?

	2006	2008	2010
Very Dissatisfied	2.40%	1.60%	2.30%
Dissatisfied	10.60%	8.40%	6.00%
Neither satisfied nor dissatisfied	12.40%	12.80%	9.30%
Satisfied	54.20%	52.70%	50.60%
Very satisfied	20.40%	24.50%	31.80%
Number of Cases	*	*	5404

* Question was not asked in this survey year.

Note: Rows might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses

17. Are you **currently employed** in registered nursing?

	2006	2008	2010
Employed in nursing	86.7%	86.9%	12.6%
Not employed in nursing	13.3%	13.1%	87.4%
Number of Cases	4,346	4,890	5,551

Note: Data are weighted to represent all RNs with active licenses

18. How many **hours** do you normally work as an RN?

A. Hours per day	2006	2008	2010
Under 5 hours	1.7%	0.7%	1.1%
5-7.5 hours	4.0%	3.9%	3.8%
8 hours	42.8%	39.5%	41.7%
8.5-11.5 hours	15.3%	13.5%	11.6%
12 hours	34.7%	40.8%	40.1%
More than 12 hours	1.6%	1.5%	1.8%
Number of Cases	3,109	3,559	3986

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses

B. Hours per week	2006	2008	2010
Less than 1 Hour	0.0%	0.0%	0.0%
1 to 20 Hours	8.9%	7.2%	6.8%
21 to 30 Hours	14.0%	13.3%	13.4%
31 to 40 hours	62.7%	63.9%	65.7%
41 to 60 hours	13.2%	13.6%	12.6%
60+ hours	1.2%	2.0%	1.5%
Number of Cases	3649	3984	4603

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses

C. Overtime hours per week	2006: any overtime	2008, any overtime	2010, any overtime
None or less than one hour	50.9%	57.0%	65.5%
1-2hours	14.6%	14.3%	11.8%
3-4 hours	10.6%	7.6%	6.6%
5-6 hours	6.4%	4.3%	3.4%
7-8 hours	4.1%	4.6%	4.0%
8+ hours	13.4%	12.2%	8.7%
Number of Cases	3,313	3952	4605

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses

D. On Call Hours per week	2006	2008	2010
No on-call hours	*	86.2%	86.6%
0.5-9 hours	*	5.7%	6.0%
10-19 hours	*	4.3%	3.7%
20-29 hours	*	1.0%	1.4%
30 or more hours	*	2.9%	2.3%
Number of Cases	*	3,951	4615

* Question was not asked in this survey year.

Note: Columns might not total 100% due to rounding. 2008 and 2010 data are weighted to represent all RNs with active licenses.

19. How many **weeks** per year do you work as an RN?

	2006	2008	2010
0 to 13 weeks	0.8%	0.6%	0.4%
14 to 26 weeks	2.1%	2.1%	0.4%
27 to 39 weeks	2.5%	3.7%	1.2%
40 to 52 weeks	94.60%	93.60%	98.10%
Number of Cases	3697	3870	4631

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

20. Within the next five years, what are your intentions?

	2006	2008	2010
Plan to increase hours of nursing work	9.5%	10.1%	13.1%
Plan to work approximately as much as now	53.1%	54.6%	60.2%
Plan to reduce hours of nursing work	21.6%	19.8%	15.2%
Plan to leave nursing entirely, but not retire	3.0%	3.1%	2.0%
Plan to retire	12.8%	12.4%	9.5%
Number of Cases	3,694	4,037	4660

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

21. In your **principal** nursing position, are you...

	2006	2008	2010
Regular Employee	96.0%	95.8%	96.2%
Temp or Agency	2.4%	2.6%	1.3%
Self-Employed	1.7%	1.6%	2.0%
Traveling RN	*	*	0.5%
Number of Cases	3800	4032	4652

* Question was not asked in this survey year.

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

22. How many **hours per week** do you normally work in your **principal** nursing position?

	2006	2008	2010
0 to 20 Hours	10.5%	10.0%	7.6%
21 to 30 Hours	15.1%	13.5%	14.4%
31 to 40 hours	61.6%	63.4%	66.4%
41 to 60 hours	11.1%	10.2%	10.3%
60+ hours	1.7%	3.0%	1.3%
Number of Cases	3778	4031	4644

Note: Data are weighted to represent all RNs with active licenses.

23. How many **weeks per year** do you normally work in your **principal** nursing position?

	2006	2008	2010
0 to 13 weeks	0.8%	0.6%	0.5%
14 to 26 weeks	2.5%	2.1%	0.4%
27 to 39 weeks	2.9%	3.7%	1.3%
40 to 52 weeks	93.9%	93.5%	97.8%
Number of Cases	3667	3903	4623

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

24. Where is your **principal** nursing position located?

This question was excluded for confidentiality.

25. How many miles is it from your home to your **principal** nursing position? If you work for an agency or registry, write the average **one-way distance** to your employment.

	2006	2008	2010
Less than 5 miles	16.5%	17.7%	17.7%
5-9 miles	23.0%	21.4%	20.6%
10-19 miles	30.7%	30.7%	31.8%
20-39 miles	22.7%	23.9%	22.7%
40 or more miles	7.2%	6.4%	7.1%
Number of Cases	3750	3961	4210

Note: Data are weighted to represent all RNs with active licenses.

26. How long have you been employed with your **principal** employer?

	2006	2008	2010
Less than 5 years	46.3%	46.1%	42.8%
5-9 years	21.4%	19.4%	24.0%
10-14 years	8.7%	8.2%	12.5%
More than 14 years	23.6%	26.3%	20.8%
Number of Cases	3,598	4,020	4617

Note: Data are weighted to represent all RNs with active licenses.

27. Which of the following **best** describes the type of setting of your **principal** nursing position? If you work for a temporary employment agency, in which setting do you most often work?

	2006	2008	2010
Hospital, acute care department	55.6%	56.3%	53.4%
Hospital, nursing home unit	0.5%	0.5%	0.4%
Hospital-based ambulatory care department	4.8%	5.5%	7.8%
Hospital-based ancillary department	1.8%	1.4%	2.3%
Hospital, other department	*	0.7%	*
Skilled nursing/extended care / rehabilitation	2.3%	3.0%	2.8%
University or college	3.3%	*	1.6%
Academic nursing program	*	1.4%	0.0%
Public health dept/community health agency	2.5%	2.6%	1.7%
Home health nursing agency or service	3.0%	2.5%	3.3%
Hospice	1.7%	1.4%	1.4%
Ambulatory care setting (office, surgery center)	6.3%	9.3%	7.3%
Dialysis	1.5%	1.2%	1.6%
Telenursing organization / call center	*	1.1%	0.7%
Occupational health/employee health	0.5%	0.3%	0.3%
School health (K-12 or college)	1.8%	2.1%	1.7%
Mental health/drug and alcohol treatment	3.8%	0.8%	1.9%
Insurance organization	*	0.6%	*
Forensic setting (correctional facility, prison, jail)	2.0%	1.2%	1.9%
Government agency (local, state, federal)	1.4%	1.0%	1.7%
Case management/ disease management	*	2.3%	2.2%
Self employed	0.5%	0.7%	0.7%
Long term care	*	*	0.4%
Rehabilitation	*	*	1.2%
Urgent Care	*	*	0.8%
Other	6.9%	4.1%	3.0%
Number of Cases	3,661	4,080	4671

* Question was not asked in this survey year.

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

28. Which one of the following **best** describes the **job title** of your **principal** nursing position?

	2006	2008	2010
Direct patient care provider/staff nurse	61.2%	58.5%	59.8%
Senior management, any setting	1.0%	1.9%	1.5%
Middle management, any setting	7.7%	5.8%	6.0%
Front-line management	5.9%	3.0%	2.9%
Charge Nurse	*	7.6%	8.4%
Direct care and Charge Nurse (both)	*	0.8%	*
Clinical Nurse Specialist	1.6%	1.1%	0.8%
Certified Registered Nurse Anesthetist	0.4%	0.4%	0.4%
Certified Nurse Midwife	0.2%	0.3%	0.2%
Nurse Practitioner	4.7%	4.1%	3.4%
School Nurse	1.8%	1.8%	1.5%
Public Health Nurse	1.9%	1.3%	1.5%
Educator, academic setting	2.5%	1.5%	1.4%
Educator, service setting/clinical nurse educator	1.7%	1.6%	1.3%
Patient care coordinator/case manager/discharge planner	3.9%	4.2%	4.0%
Infection Control Nurse	0.3%	0.3%	0.2%
Quality Improvement Nurse /Utilization Review	1.7%	1.9%	1.3%
Occupational Health Nurse	0.3%	0.2%	0.2%
Telenursing	0.7%	1.3%	1.1%
Nurse Coordinator	*	0.2%	1.0%
Consultant	*	0.3%	*
Researcher	*	0.2%	0.2%
Patient Educator	*	*	0.5%
Other	2.6%	1.7%	2.5%
Number of Cases	3,675	4,108	4689

* Question was not asked in this survey year.

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

29. Approximately what percentage of your time is spent on each of the following functions during a typical week in your **principal** position?

Direct patient care & Charting	2006	2008	2010
0 to 25 percent of time	*	*	26.3%
26 to 50 percent of time	*	*	19.6%
51 to 75 percent of time	*	*	26.7%
76 to 100 percent of time	*	*	27.5%
Number of Cases	*	*	4484

* Question was not asked in this survey year.

Note: Data are weighted to represent all RNs with active licenses.

Patient Education	2006	2008	2010
0 to 25 percent of time	93.3%	93.4%	90.6%
26 to 50 percent of time	5.5%	5.2%	8.4%
51 to 75 percent of time	0.7%	0.6%	0.6%
76 to 100 percent of time	0.6%	0.8%	0.4%
Number of Cases	3320	4018	4484

Note: Data are weighted to represent all RNs with active licenses.

Indirect patient/client care (consultation, planning, evaluating care)	2006	2008	2010
0 to 25 percent of time	86.3%	93.1%	91.2%
26 to 50 percent of time	8.2%	4.0%	5.3%
51 to 75 percent of time	2.0%	1.4%	1.6%
76 to 100 percent of time	3.5%	1.4%	2.0%
Number of Cases	3320	4018	4484

Note: Data are weighted to represent all RNs with active licenses.

Education of students in health care occupations (including preparation time)	2006	2008	2010
0 to 25 percent of time	97.7%	97.3%	95.9%
26 to 50 percent of time	0.9%	1.1%	1.9%
51 to 75 percent of time	0.4%	0.6%	0.5%
76 to 100 percent of time	0.9%	1.0%	1.7%
Number of Cases	3320	4018	4484

Note: Data are weighted to represent all RNs with active licenses.

Supervision	2006	2008	2010
0 to 25 percent of time	91.5%	91.7%	89.6%
26 to 50 percent of time	5.4%	5.0%	5.1%
51 to 75 percent of time	1.5%	1.3%	2.6%
76 to 100 percent of time	1.6%	1.9%	2.7%
Number of Cases	3320	4018	4484

Note: Data are weighted to represent all RNs with active licenses.

Administration	2006	2008	2010
0 to 25 percent of time	93.8%	92.7%	96.5%
26 to 50 percent of time	2.4%	3.8%	2.1%
51 to 75 percent of time	0.9%	1.3%	0.5%
76 to 100 percent of time	2.9%	2.1%	1.0%
Number of Cases	3320	4018	4484

Note: Data are weighted to represent all RNs with active licenses.

Research	2006	2008	2010
0 to 25 percent of time	*	*	99.5%
26 to 50 percent of time	*	*	0.3%
51 to 75 percent of time	*	*	0.1%
76 to 100 percent of time	*	*	0.1%
Number of Cases	*	*	4484

* Question was not asked in this survey year.

Note: Data are weighted to represent all RNs with active licenses.

Non-nursing tasks (housekeeping, etc)	2006	2008	2010
0 to 25 percent of time	*	99.0%	99.2%
26 to 50 percent of time	*	0.8%	0.6%
51 to 75 percent of time	*	0.1%	0.1%
75 to 100 percent of time	*	0.1%	0.0%
Number of Cases	*	4018	4484

* Question was not asked in this survey year.

Note: Data are weighted to represent all RNs with active licenses.

Other	2006	2008	2010
0 to 25 percent of time	*	96.7%	96.2%
26 to 50 percent of time	*	1.1%	1.5%
51 to 75 percent of time	*	0.6%	0.4%
75 to 100 percent of time	*	1.6%	1.9%
Number of Cases	*	4018	4484

* Question was not asked in this survey year.

Note: Data are weighted to represent all RNs with active licenses.

30. Mark the clinical area in which you **most frequently** provide direct patient care in your **principal** nursing position.

	2006	2008	2010
Not involved in direct patient care	10.4%	12.0%	11.9%
Ambulatory/outpatient	*	10.2%	8.2%
Cardiology	*	2.0%	2.3%
Community/public health	1.6%	1.3%	1.2%
Correction	1.3%	0.8%	1.4%
Dialysis	1.4%	1.3%	1.7%
Emergency Trauma	6.3%	5.8%	5.9%
Geriatrics	2.3%	2.2%	2.4%
Home health care	2.6%	2.4%	2.6%
Hospice	1.6%	1.4%	1.3%
Intensive Care	10.8%	9.8%	9.4%
Labor & delivery	*	3.6%	3.5%
Medical/surgical	15.3%	11.5%	10.3%
Mother-baby	*	2.5%	2.5%
Neonatal Care	3.8%	3.4%	2.9%
Oncology	*	2.1%	1.9%
Pediatrics	3.9%	2.9%	2.9%
Peri-op	6.6%	6.0%	6.9%
Pysch/Mental Health	2.8%	2.8%	3.1%
Rehabilitation	2.1%	1.4%	1.4%
School (K-12)	2.2%	2.0%	1.5%
Step down unit	2.7%	1.7%	1.4%
Telemetry	*	4.5%	4.2%
Multiple area	1.4%	2.0%	2.0%
Ob-Gyn	6.3%	0.2%	1.3%
Endoscopic	*	0.1%	*
Radiology	*	0.2%	*
Orthopedics	*	0.2%	*
Other	14.5%	2.9%	5.8%
Number of Cases	3812	4100	4633

* Question was not asked in this survey year.

Note: Columns might not total 100% due to rounding. Note: Data are weighted to represent all RNs with active licenses.

31. Which of the following computerized health information systems, if any, do you use in your **principal** nursing position?

	2006		2008		2010 Number of cases=4640	
	No	Yes	No	Yes	No	Yes
Electronic patient records	53.0%	47.0%	47.4%	52.6%	40.4%	59.6%
Electronic nursing charts	*	*	53.9%	46.1%	43.1%	56.9%
Electronic radiology reports	*	*	49.4%	50.6%	45.4%	54.6%
Electronic care plans	*	*	70.8%	29.2%	61.2%	38.8%
Electronic lab reporting	*	*	40.6%	59.4%	37.0%	63.0%
Computerized physician orders	79.4%	20.6%	75.1%	24.9%	66.1%	33.9%
Scanning system for supplies inventory	84.0%	16.0%	83.7%	16.3%	79.8%	20.2%
Computerized medication distribution (Pyxis/Omniceil)	*	*	45.9%	54.1%	50.4%	49.6%
Barcode scanning	88.1%	11.9%	85.9%	14.1%	78.1%	21.9%
Electronic medication administration	*	*	70.4%	29.6%	62.1%	37.9%
Other	79.9%	20.1%	91.3%	8.7%	96.2%	3.8%
None of the above	64.5%	35.5%	85.0%	15.0%	86.1%	13.9%

* Question was not asked in this survey year.

Note: Data are weighted to represent all RNs with active licenses. No cases – check all that apply.

32. What is your experience with the information systems in your **principal nursing position**?

	2006	2008	2010
All systems work well	13.3%	11.4%	15.1%
Systems are generally helpful, but have some flaws	51.4%	56.4%	57.2%
Systems have problems that affect my work	16.8%	18.6%	15.4%
Systems interfere with my delivery of care	6.4%	6.0%	3.4%
No system	12.1%	7.6%	8.9%
Number of Cases	3751	3972	4600

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

33. Please specify the **annual earnings** for your **principal position only**, before deductions for taxes, social security, etc. If you do not have a set annual salary, please estimate your annual earnings for last year.

	2006	2008	2010
Less than 25,000	3.7%	2.9%	3.1%
25,000 to 49,999	12.9%	9.3%	7.4%
50,000 to 74,999	41.0%	32.3%	29.1%
75,000 to 99,999	30.9%	34.7%	33.4%
100,000 to 124,999	9.4%	15.4%	19.0%
over 125,0000	2.1%	5.4%	8.0%
Number of Cases	3567	3711	3707

Note: Data are weighted to represent all RNs with active licenses.

34. Does your compensation from your **principal position** include:

	2006		2008		2010	
	No	Yes	No	Yes	No	Yes
Retirement Plan	*	*	15.2%	84.8%	15.8%	84.2%
Personal Health insurance	*	*	16.4%	83.6%	15.6%	84.5%
Dental Insurance	*	*	11.5%	88.5%	11.4%	88.6%
Family Health Insurance	*	*	30.0%	70.0%	31.3%	68.7%

* Question was not asked in this survey year.

Note: Data are weighted to represent all RNs with active licenses.

35. Please rate each of the following factors of your **most recent** nursing position:

	2006				
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
Your job overall	1.0%	7.0%	8.7%	47.5%	35.9%
Your salary	2.8%	16.2%	14.3%	47.3%	19.5%
Employee benefits	3.8%	16.1%	13.8%	45.5%	20.9%
Adequacy of RN skill level where you work	1.1%	8.8%	11.8%	51.0%	27.2%
Adequacy of the number of RNs where you work	4.7%	21.8%	14.7%	41.2%	17.6%
Adequacy of clerical support services	5.7%	20.7%	17.9%	43.2%	12.5%
Non-nursing tasks required	6.4%	23.8%	28.5%	34.8%	6.6%
Amount of paperwork required	11.9%	32.7%	20.0%	30.0%	5.5%
Your workload	5.4%	18.2%	19.6%	47.4%	9.4%
Physical work environment	3.7%	15.4%	17.8%	47.2%	15.8%
Work schedule	1.7%	6.5%	9.3%	48.8%	33.6%
Job security	2.1%	6.0%	10.6%	43.9%	37.3%
Opportunities for advancement	3.8%	14.0%	26.6%	39.0%	16.6%
Support from other nurses you work with	1.8%	7.5%	12.4%	44.8%	33.6%
Teamwork between coworkers and yourself	1.7%	8.4%	10.9%	43.2%	35.9%
Leadership from your nursing administration	10.5%	22.0%	20.5%	31.4%	15.7%
Relations with physicians	2.3%	7.5%	16.3%	40.5%	23.4%
Relations with other non-nursing staff	1.1%	3.9%	12.5%	59.2%	23.4%
Relations with agency/registry nurses	0.9%	5.6%	27.7%	53.9%	11.9%
Interaction with patients	0.4%	1.5%	7.7%	46.8%	43.7%
Time available for patient education	4.6%	23.6%	17.2%	38.3%	16.3%
Involvement in policy/ management decisions	7.6%	23.7%	28.6%	31.1%	9.0%
Opportunities to use your skills	0.9%	5.4%	11.0%	54.4%	28.3%
Opportunities to learn new skills	1.7%	11.9%	17.6%	47.4%	21.3%
Quality of preceptor and mentor programs	4.8%	18.5%	24.7%	39.1%	12.9%
Employer-supported educational opportunities	5.3%	19.2%	20.4%	37.9%	17.3%
Quality of patient care where you work	1.3%	8.8%	13.2%	49.4%	27.4%
Feeling that work is meaningful	1.5%	4.9%	9.5%	43.6%	40.5%
Recognition for a job well done	6.9%	18.8%	19.8%	36.3%	18.2%

Note: In 2010 this question was asked only of Employed CA RNs. In prior years it was asked to all RNs, and the responses of employed and non-employed RNs were tabulated. 2006 and 2008 percentages for this table have therefore changed to represent only employed RNs. Data are weighted to represent all RNs with active licenses. Rows might not total 100% due to rounding.

	2008				
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
Your job overall	1.4%	6.3%	8.6%	47.3%	36.3%
Your salary	2.3%	15.5%	12.5%	46.9%	22.8%
Employee benefits	2.8%	13.9%	14.2%	44.1%	25.1%
Adequacy of RN skill level where you work	1.0%	7.4%	11.7%	50.4%	29.5%
Adequacy of the number of RNs where you work	3.9%	19.0%	14.1%	43.5%	19.5%
Adequacy of clerical support services	5.4%	21.0%	17.6%	41.8%	14.2%
Non-nursing tasks required	6.4%	22.3%	29.1%	35.3%	6.9%
Amount of paperwork required	11.1%	31.6%	20.6%	31.3%	5.5%
Your workload	4.4%	19.9%	17.6%	48.3%	9.8%
Physical work environment	3.8%	15.3%	16.9%	47.1%	17.0%
Work schedule	1.7%	5.8%	9.6%	48.1%	34.7%
Job security	2.0%	6.2%	10.4%	44.9%	36.5%
Opportunities for advancement	3.7%	13.2%	25.7%	39.8%	17.6%
Support from other nurses you work with	2.1%	6.8%	13.1%	45.3%	32.7%
Teamwork between coworkers and yourself	1.7%	7.7%	11.4%	43.3%	35.8%
Leadership from your nursing administration	10.2%	21.8%	19.2%	33.5%	15.4%
Relations with physicians	1.7%	7.6%	17.8%	49.0%	23.8%
Relations with other non-nursing staff	0.7%	3.8%	12.1%	58.2%	25.1%
Relations with agency/registry nurses	1.1%	4.9%	29.4%	52.3%	12.2%
Interaction with patients	0.3%	1.7%	6.2%	45.9%	45.8%
Time available for patient education	4.4%	21.4%	17.8%	40.2%	16.2%
Involvement in policy/ management decisions	7.3%	23.8%	26.5%	32.3%	10.1%
Opportunities to use your skills	1.1%	5.4%	10.8%	54.7%	28.1%
Opportunities to learn new skills	2.1%	10.9%	16.9%	48.0%	22.2%
Quality of preceptor and mentor programs	5.3%	17.7%	23.7%	39.1%	14.2%
Employer-supported educational opportunities	5.9%	16.9%	20.2%	40.3%	16.7%
Quality of patient care where you work	1.4%	7.5%	12.8%	49.9%	28.4%
Feeling that work is meaningful	1.4%	4.3%	8.4%	44.6%	41.2%
Recognition for a job well done	7.2%	17.3%	19.4%	36.4%	19.8%

Note: In 2010 this question was asked only of Employed CA RNs. In prior years it was asked to all RNs, and the responses of employed and non-employed RNs were tabulated. 2006 and 2008 percentages for this table have therefore changed to represent only employed RNs. Data are weighted to represent all RNs with active licenses. Rows might not total 100% due to rounding.

	2010						Number of Cases
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied	Does not Apply	
Your job overall	0.9%	5.1%	7.1%	47.8%	39.1%	0.1%	4657
Your salary	1.4%	11.9%	11.5%	47.6%	27.4%	0.2%	4666
Employee benefits	2.3%	10.1%	12.7%	41.7%	27.2%	6.0%	4613
Adequacy of RN skill level where you work	0.7%	6.3%	10.2%	48.9%	32.0%	1.9%	4665
Adequacy of the number of RNs where you work	3.0%	17.1%	13.2%	40.6%	22.5%	3.5%	4666
Adequacy of clerical support services	4.2%	18.6%	17.5%	40.7%	16.5%	2.5%	4663
Non-nursing tasks required	3.9%	17.0%	27.8%	35.9%	8.7%	6.7%	4617
Amount of paperwork required	9.9%	27.9%	20.5%	32.9%	7.4%	1.5%	4648
Your workload	4.2%	17.9%	18.0%	47.2%	12.4%	0.3%	4664
Physical work environment	2.8%	11.8%	16.3%	49.1%	19.4%	0.7%	4676
Work schedule	1.2%	5.9%	9.1%	47.9%	35.8%	0.2%	4679
Job security	2.5%	7.5%	12.2%	45.5%	31.8%	0.6%	4673
Opportunities for advancement	3.2%	14.0%	23.1%	38.4%	17.2%	4.0%	4664
Support from other nurses you work with	1.5%	5.9%	11.0%	42.2%	36.4%	3.0%	4679
Teamwork between coworkers and yourself	1.5%	5.7%	9.8%	41.2%	40.3%	1.4%	4687
Leadership from your nursing administration	9.0%	19.9%	17.4%	32.1%	17.1%	4.5%	4678
Relations with physicians	1.3%	6.1%	16.0%	48.5%	24.8%	3.3%	4683
Relations with other non-nursing staff	0.4%	3.0%	11.2%	56.7%	27.6%	1.2%	4682
Relations with agency/registry nurses	0.2%	2.3%	18.5%	32.8%	7.9%	38.4%	4653
Interaction with patients	0.3%	1.1%	6.5%	45.3%	41.9%	4.9%	4680
Time available for patient education	3.5%	19.4%	15.8%	39.4%	14.8%	7.0%	4684
Involvement in policy/ management decisions	6.5%	20.5%	27.2%	28.9%	10.5%	6.4%	4651
Opportunities to use your skills	1.0%	5.6%	10.2%	52.4%	30.5%	0.4%	4628
Opportunities to learn new skills	2.1%	11.5%	16.0%	45.1%	24.6%	0.8%	4642
Quality of preceptor and mentor programs	4.3%	13.2%	20.8%	32.6%	14.3%	14.9%	4640
Employer-supported educational opportunities	6.3%	15.7%	17.7%	38.1%	18.7%	3.5%	4655
Quality of patient care where you work	0.7%	5.8%	12.6%	45.8%	31.4%	3.8%	4662
Feeling that work is meaningful	1.1%	3.9%	9.5%	41.7%	43.6%	0.2%	4628
Recognition for a job well done	7.2%	16.6%	19.1%	36.2%	20.5%	0.4%	4591

Note: 2010 Total potential number of cases=4,726.. Rows might not total 100% due to rounding. employed RNs. In 2010 this question was asked only of Employed CA RNs. In prior years it was asked to all RNs, and the responses of employed and non-employed RNs were tabulated. 2006 and 2008 percentages for this table have therefore changed to represent only employed RNs. Data are weighted to represent all RNs with active licenses. Rows might not total 100% due to rounding

36. Do you currently hold more than one nursing job?

	2006	2008	2010
No	82.0%	82.2%	82.7%
Yes	18.0%	17.8%	17.3%
Number of Cases	3826	4047	4,628

Note: Data are weighted to represent all RNs with active licenses

37. How many nursing positions do you hold **in addition to** your **principal** job?

	2006	2008	2010
One	76.7%	80.3%	75.6%
Two	20.9%	18.7%	21.3%
Three or more	2.4%	1.0%	*
Three	*	*	2.2%
Four or more	*	*	0.8%
Number of Cases	627	652	696

* Question was not asked in this survey year.

Note: Columns might not total 100% due to rounding. 2006, 2008, and 2010 data are weighted to represent all RNs with active licenses.

38. In your other **nursing** positions, are you...

	2006	2008	2010
Regular employee	72.0%	73.7%	77.1%
Employed through a temporary service agency	17.4%	15.3%	13.3%
Self-employed	17.1%	14.1%	11.4%
Travel nurse or employed through a travel agency	*	*	2.5%
Number of Cases	*	*	668

* Question was not asked in this survey year.

Note: Columns will not total 100% because respondents could select multiple categories, due to holding more than one additional job. Data are weighted to represent all RNs with active licenses.

39. What type of work do you do in your **other nursing positions**?

	2006	2008	2010
Hospital staff	45.2%	44.0%	40.4%
Public health/community health	2.1%	1.1%	1.4%
Long Term Acute Care	*	2.0%	2.5%
Nursing home/skilled nursing facility staff	5.7%	6.7%	6.5%
Mental health/substance abuse	3.4%	3.1%	3.2%
Home health or hospice	9.4%	7.4%	7.6%
Teaching health professions/nursing students	11.0%	9.4%	11.4%
Ambulatory care, school health, occupational health	9.2%	8.9%	15.5%
Self-Employed	5.9%	3.7%	3.8%
School Health	*	*	1.4%
Telehealth/telenursing	*	*	2.0%
Other	31.1%	23.1%	17.2%
Number of Cases	*	*	690

* Question was not asked in this survey year.

Note: Columns will not total 100% because respondents could select multiple categories, due to holding more than one additional job. 2006, 2008, and 2010 data are weighted to represent all RNs with active licenses. No cases – check all that apply.

40. Please indicate the following for your other nursing positions.

Hours worked per week	Additional Job 1	Additional Job 2	Additional Job 3	All other additional nursing positions
Less than 8	35.8%	51.2%	97.4%	100.0%
9-16	41.8%	44.0%	2.6%	0.0%
17-24	15.7%	4.5%	0.0%	0.0%
25-32	3.5%	0.3%	0.0%	0.0%
33-40	3.0%	0.0%	0.0%	0.0%
More than 40	0.2%	0.0%	0.0%	0.0%
Number of Cases	629	80	9	2

Note: Data are weighted to represent all RNs with active licenses

Months worked per year	Additional Job 1	Additional Job 2	Additional Job 3	All other additional nursing positions
Less than 4	5.9%	16.2%	0.0%	0.0%
4-6	6.5%	4.6%	3.7%	55.0%
7-9	7.8%	4.9%	0.0%	0.0%
10-12	79.8%	74.3%	96.3%	45.0%
Number of cases	573	77	8	2

Note: Data are weighted to represent all RNs with active licenses

Estimated pre-tax annual income

Job 1	2006	2008	2010
Less than 25,000	72.5%	68.3%	97.5%
25,000 to 49,999	18.5%	23.0%	1.7%
50,000 to 74,999	6.9%	7.0%	0.9%
75,000 to 99,999	1.6%	1.0%	0.0%
100,000 to 124,999	0.5%	0.6%	0.0%
over 125,0000	0.1%	0.1%	0.0%
Number of Cases	582	549	521

Note: Data are weighted to represent all RNs with active licenses

Job 2	2006	2008	2010
Less than 25,000	87.0%	100%	98.6%
25,000 to 49,999	6.4%	0.0%	1.4%
50,000 to 74,999	3.6%	0.0%	0.0%
75,000 to 99,999	1.3%	0.0%	0.0%
100,000 to 124,999	0.0%	0.0%	0.0%
over 125,0000	1.7%	0.0%	0.0%
Number of Cases	110	3	65

Note: Data are weighted to represent all RNs with active licenses

Job 3	2006	2008	2010
Less than 25,000	100.0%	0%	100.0%
25,000 to 49,999	0.0%	0.0%	0.0%
50,000 to 74,999	0.0%	0.0%	0.0%
75,000 to 99,999	0.0%	0.0%	0.0%
100,000 to 124,999	0.0%	0.0%	0.0%
over 125,0000	0.0%	0.0%	0.0%
Number of Cases	14	0	6

Note: Data are weighted to represent all RNs with active licenses

All other nursing jobs:	2006	2008	2010
Less than 25,000	100.0%	99.9%	100.0%
25,000 to 49,999	0.0%	0.1%	0.0%
50,000 to 74,999	0.0%	0.0%	0.0%
75,000 to 99,999	0.0%	0.0%	0.0%
100,000 to 124,999	0.0%	0.0%	0.0%
over 125,0000	0.0%	0.0%	0.0%
Number of Cases	1	2	1

Note: Data are weighted to represent all RNs with active licenses

41. Are you currently employed through a temporary agency, traveling agency, or registry?

	2006	2008	2010
Temporary agency or registry	3.4%	2.9%	3.3%
Traveling agency	1.2%	1.2%	0.6%
Neither temporary nor traveling agency	95.4%	95.9%	96.3%
Number of Cases	3820	4032	4500

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses

42. Please indicate which of the following reasons describe why you work for a temporary agency, traveling agency, or registry.

	2006	2008	2010
Wages	59.5%	58.6%	28.0%
Control of work location	54.1%	39.8%	31.1%
Maintain skills/get experience	27.3%	22.5%	25.9%
Benefits	5.7%	7.9%	1.1%
Control of work conditions	26.1%	24.2%	9.3%
Waiting for a desirable permanent position	12.8%	16.1%	16.5%
Control of schedule	57.2%	56.9%	52.6%
Supplemental income	36.6%	42.6%	46.2%
Travel/see other parts of the country	15.4%	15.8%	6.7%
Unable to find a permanent RN job of work enough hours at my primary Job	*	*	13.8%
Other	16.1%	12.9%	5.3%
Number of Cases	114	125	121

* Question was not asked in this survey year.

Note: Columns will not total 100% because respondents could select multiple items. Data are weighted to represent all RNs with active licenses

43. Have you ever stopped working as a registered nurse for a period of more than one year?

	2006	2008	2010
No	85.1%	87.6%	88.5%
Yes	14.9%	12.4%	11.5%
Number of Cases	3,855	4,117	4,561

Note: Data are weighted to represent all RNs with active licenses.

44. How long did you stop working as a registered nurse?

	2006	2008	2010
Less than 5 years	62.3%	62.9%	59.4%
5 to 9 years	19.8%	20.5%	21.0%
10 to 14 years	10.3%	11.9%	10.6%
15 or more years	7.7%	4.7%	8.9%
Number of Cases	556	567	612

Note: Data are weighted to represent all RNs with active licenses

45. How important are each of the following reasons you stopped working as a registered nurse for a period of more than one year.

	2006			2008		
	Important	Very important	Not at all important/ Does not apply	Somewhat important	Important	Very important
Child care responsibilities	5.9%	76.9%	41.5%	1.2%	4.7%	52.6%
Other family responsibilities	16.3%	55.0%	49.1%	7.7%	11.3%	31.9%
Moving to a different area	10.9%	49.2%	68.8%	3.9%	7.7%	19.6%
Stress on the job	25.4%	36.0%	67.8%	7.7%	6.6%	17.9%
Job-related injury or illness	7.7%	36.4%	84.8%	1.8%	4.5%	8.8%
Non-job-related injury or illness	7.7%	26.4%	84.3%	1.4%	5.1%	9.3%
Salary	19.1%	19.3%	78.1%	3.0%	7.1%	11.8%
Dissatisfied with benefits	11.2%	16.0%	84.7%	3.3%	6.8%	5.2%
Laid off	7.9%	7.3%	91.3%	0.5%	2.3%	5.9%
Return to school	10.1%	38.9%	78.9%	3.3%	5.0%	12.7%
Travel	13.4%	21.7%	86.1%	4.0%	4.0%	5.9%
To try another occupation	16.4%	40.9%	75.3%	4.7%	7.8%	12.3%
Other dissatisfactions with your job	24.9%	29.8%	81.0%	4.8%	7.0%	7.1%
Dissatisfaction with the nursing profession	18.6%	34.5%	75.7%	6.5%	7.6%	10.2%
Other	18.3%	45.2%	92.0%	0.6%	2.7%	4.7%

Note: Data are weighted to represent all RNs with active licenses

	2010					Number of Cases
	Not at all Important	Somewhat Important	Important	Very important	Does not Apply	
Child care responsibilities	8.2%	2.0%	4.7%	61.1%	24.0%	548
Other family responsibilities	10.6%	4.1%	11.9%	42.7%	30.8%	493
Moving to a different area	13.5%	4.9%	9.5%	25.4%	46.8%	484
Stress on the job	15.0%	8.0%	12.1%	21.8%	43.1%	479
Job-related injury or illness	16.8%	1.5%	5.3%	9.3%	67.2%	475
Non-job-related injury or illness	16.5%	2.3%	5.5%	10.2%	65.5%	476
Salary	22.2%	4.9%	11.3%	7.3%	54.3%	465
Dissatisfied with benefits	23.8%	4.0%	6.4%	3.8%	61.9%	467
Laid off	15.7%	1.0%	2.5%	4.4%	76.3%	464
Return to school	15.9%	1.1%	7.7%	11.4%	64.0%	475
Travel	18.0%	2.6%	7.0%	7.5%	65.0%	465
To try another occupation	13.7%	5.8%	10.2%	13.4%	57.0%	483
Other dissatisfactions with your job	15.1%	7.5%	10.6%	11.6%	55.2%	471
Dissatisfaction with the nursing profession	18.4%	8.9%	9.2%	7.6%	55.9%	470
Other	7.6%	0.4%	8.0%	14.0%	70.1%	185

Note: Data are weighted to represent all RNs with active licenses

46. What was the last year you worked for pay as a registered nurse?

	2006	2008	2010
One year ago or less	32.3%	22.1%	29.8%
2-4 years ago	27.8%	27.2%	24.3%
5-9 years ago	18.6%	21.4%	26.0%
10-14 years	11.5%	13.4%	10.1%
15-24 years	8.2%	12.5%	7.0%
25 or more years	1.7%	3.5%	2.8%
Number of Cases	568	617	714

Note: Data are weighted to represent all RNs with active licenses

47. How important were each of the following factors in your decision to leave nursing?

	2006			
	Not at all important/ Does not apply	Somewhat important	Important	Very important
Retired	30.3%	9.3%	20.0%	40.4%
Childcare responsibilities	37.1%	6.5%	9.2%	47.2%
Other family responsibilities	24.9%	13.4%	19.5%	42.2%
Moving to a different area	50.3%	6.4%	13.3%	30.0%
Stress on the job	11.7%	16.0%	23.6%	48.7%
Job-related illness/injury	48.6%	12.2%	12.6%	26.5%
Non-job-related illness/injury	47.3%	13.0%	17.4%	22.3%
Salary	32.7%	20.1%	22.7%	24.6%
Dissatisfied with benefits	47.1%	15.9%	15.8%	21.1%
Other dissatisfaction with your job	19.7%	15.2%	22.4%	42.6%
Dissatisfaction with the nursing profession	33.0%	15.8%	24.7%	26.6%
Travel	49.0%	12.3%	22.2%	16.4%
Wanted to try another occupation	42.5%	15.6%	14.9%	26.9%
Inconvenient schedules in nursing jobs	34.2%	16.6%	20.8%	28.4%
Difficult to find a nursing position/laid off	72.2%	4.4%	7.7%	15.8%
Other	16.1%	1.9%	24.9%	57.0%

Note: Rows might not total 100% due to rounding. Note: Data are weighted to represent all RNs with active licenses

	2008				2010					
	Not at all important/ Does not apply	Somewhat important	Important	Very important	Not at all Important	Somewhat Important	Important	Very Important	Does not Apply	Number of Cases
Retired	62.1%	5.5%	9.9%	22.5%	9.5%	4.6%	12.5%	26.0%	47.4%	739
Childcare responsibilities	71.4%	2.9%	3.8%	22.0%	11.6%	3.0%	4.4%	20.7%	60.3%	690
Other family responsibilities	60.7%	5.6%	11.3%	22.5%	11.4%	7.0%	11.3%	22.6%	47.7%	703
Moving to a different area	86.5%	0.4%	4.0%	9.1%	14.6%	2.0%	4.1%	7.6%	71.6%	693
Stress on the job	41.5%	11.0%	17.2%	30.3%	11.6%	13.9%	15.8%	24.8%	34.0%	702
Job-related illness/injury	80.4%	2.3%	5.0%	12.4%	13.6%	2.8%	4.1%	8.5%	71.0%	697
Non-job-related illness/injury	78.3%	2.8%	5.3%	13.6%	12.6%	2.2%	6.2%	13.8%	65.2%	691
Salary	63.7%	8.5%	14.3%	13.5%	23.8%	9.7%	13.1%	10.2%	43.3%	690
Dissatisfied with benefits	77.9%	7.1%	9.7%	5.3%	26.1%	8.6%	6.5%	7.1%	51.7%	683
Other dissatisfaction with your job	51.2%	11.5%	17.3%	19.9%	16.6%	10.6%	15.3%	18.1%	39.5%	687
Dissatisfaction with the nursing profession	64.3%	12.7%	12.8%	10.2%	21.6%	13.8%	13.4%	7.8%	43.5%	694
Travel	78.9%	7.2%	8.7%	5.2%	21.3%	6.8%	7.0%	4.4%	60.6%	687
Wanted to try another occupation	74.6%	4.7%	7.6%	13.1%	18.0%	3.9%	8.0%	11.9%	58.2%	695
Inconvenient schedules in nursing jobs	67.0%	6.1%	11.4%	15.5%	18.9%	10.3%	10.6%	12.0%	48.1%	695
Difficult to find a nursing position/laid off	90.3%	1.6%	3.5%	4.6%	19.1%	3.7%	6.3%	15.4%	55.5%	699
Laid off	*	*	*	*	14.4%	1.5%	3.2%	6.7%	74.2%	684
Other	84.9%	0.1%	6.6%	8.4%	7.3%	1.6%	10.6%	21.1%	59.4%	369

* Question was not asked in this survey year.

Note: Rows might not total 100% due to rounding. Note: Data are weighted to represent all RNs with active licenses

48. Which of the following best describes your current intentions regarding work in nursing?

	2006	2008	2010
Currently seeking employment in nursing	4.7%	4.4%	20.3%
Plan to return to nursing in the future	30.1%	19.8%	14.1%
Retired	15.6	33.7	32.8%
Definitely will not return to nursing but not retired	16.0%	12.9%	6.8%
Undecided at this time	33.7%	29.12%	26.1%
Number of Cases	173	682	782

Note: Data are weighted to represent all RNs with active licenses

49. Would any of the following factors affect your decision to return to nursing?

	2006			
	Not at all important / Does not apply	Somewhat important	Important	Very Important
Affordable childcare at or near work	78.1%	7.6%	2.1%	12.1%
Flexible work hours	16.0%	9.3%	17.6%	57.0%
Modified physical requirements of job	25.3%	13.9%	22.6%	38.2%
Higher nursing salary	15.4%	16.4%	26.1%	42.1%
Better retirement benefits	24.7%	13.1%	16.7%	45.5%
Better support from nursing management	12.2%	12.6%	19.2%	55.9%
More support from other nurses	17.6%	16.0%	27.1%	39.3%
Better nurse to patient ratios	15.1%	7.3%	23.2%	54.4%
Adequate support staff for non-nursing tasks	13.2%	8.6%	32.4%	45.8%
Availability of re-entry programs / mentoring	14.6%	10.3%	20.4%	54.7%
Improvement in my health status	28.4%	11.6%	14.4%	45.5%
Other	34.9%	*	11.8%	53.4%

Note: Rows might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

	2008				2010					Number of cases
	Not at all important / Does not apply	Somewhat important	Important	Very Important	Not at all important	Somewhat important	Important	Very important	Does not apply	
Affordable childcare at or near work	90.2%	2.0%	2.8%	5.0%	16.1%	6.2%	5.0%	7.7%	65.1%	194
Flexible work hours	23.7%	3.1%	20.2%	53.0%	2.2%	6.3%	23.0%	60.5%	8.0%	202
Modified physical requirements of job	50.6%	10.6%	12.8%	26.0%	12.9%	16.7%	18.0%	27.1%	25.3%	196
Higher nursing salary	27.3%	11.1%	24.5%	37.1%	10.4%	23.2%	19.5%	36.3%	10.7%	197
Better retirement benefits	34.0%	7.1%	27.1%	31.8%	10.0%	19.5%	23.6%	33.0%	13.8%	195
Better support from nursing management	30.1%	5.6%	29.5%	34.9%	6.1%	5.8%	23.9%	48.1%	16.2%	198
More support from other nurses	36.5%	9.2%	28.6%	25.8%	6.8%	16.4%	18.3%	37.9%	20.6%	195
Better nurse to patient ratios	33.9%	5.7%	16.9%	43.6%	7.1%	7.9%	14.6%	51.8%	18.7%	197
Adequate support staff for non-nursing tasks	27.8%	6.6%	27.7%	37.8%	1.7%	14.0%	22.8%	45.3%	16.2%	197
Availability of re-entry programs / mentoring	28.3%	5.7%	27.3%	38.7%	4.6%	11.8%	11.1%	60.6%	12.0%	198
Improvement in my health status	61.5%	5.4%	11.2%	22.0%	14.1%	5.2%	13.3%	22.3%	45.2%	198
Other	93.6%	0.1%	3.5%	2.8%	4.9%	0.0%	10.2%	23.5%	61.4%	74

Note: In 2010, the question was limited to RNs who were undecided about their future plans; In 2006 and 2008 it was limited to RNs who were retired, not planning on returning to nursing, and undecided about their future plans. Rows might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

50. Are you currently employed outside nursing?

	2006	2008	2010
No	66.1%	74.6%	73.1%
Yes	33.9%	25.4%	26.9%
Number of Cases	641	682	802

Note: Data are weighted to represent all RNs with active licenses.

51. Does your position utilize any of your nursing knowledge?

	2006	2008	2010
No	27.7%	17.2%	30.4%
Yes	72.3%	82.8%	69.6%
Number of Cases	182	161	206

Note: Data are weighted to represent all RNs with active licenses.

52. Please indicate the field(s) of your work position(s) outside nursing. (Check all that apply.)

	Health Related Services	Retail Sales and Services	Education	Financial, accounting, and insurance services	Consulting	Other
No	54.8%	88.5%	87.8%	91.4%	94.3%	60.6%
Yes	45.3%	11.5%	12.2%	8.6%	5.7%	39.4%
Number of Cases	203	203	203	203	203	203

Note: Only 2010 Data

53. Please indicate the following for work positions outside of nursing.

Hours Worked per Week	2010		
	Position #1	Position #2	Position #3
Less than 8	0.0%	0.0%	0.0%
9-16	15.2%	19.0%	28.0%
17-24	13.3%	21.1%	0.0%
25-32	10.7%	7.0%	14.7%
33-40	40.0%	32.5%	38.2%
41-48	5.9%	7.4%	9.5%
Over 48	14.8%	13.0%	9.5%
Number of Cases	161	21	7

Note: Data are weighted to represent all RNs with active licenses.

Estimated annual pre-tax income	2010		
	Position #1	Position #2	Position #3
Less than 25,000	38.1%	47.3%	70.0%
25,000 to 49,999	16.9%	15.8%	10.6%
50,000 to 74,999	16.0%	1.6%	0.0%
75,000 to 99,999	6.0%	27.7%	8.9%
100,000 to 124,999	10.2%	2.7%	10.5%
Over 125,000	13.0%	4.9%	0.0%
Number of Cases	130	26	6

Note: Data are weighted to represent all RNs with active licenses.

54. Has your employment status changed during the past year? (Check all that apply.)

	2010								
	No Change	Increased Hours	Decreased Hours	Now in a RN Job	Left RN Job	New position with same employer	Same position with different employer	New position with different employer	Other
No	28.5%	79.9%	73.7%	92.2%	90.9%	79.6%	90.5%	83.4%	81.2%
Yes	71.5%	20.1%	26.3%	7.8%	9.1%	20.4%	9.5%	16.6%	18.8%
Number of Cases	5413	1521	1521	1521	1521	1521	1521	1521	1521

Note: Data are weighted to represent all RNs with active licenses.

55. How important were each of the following factors in your change in employment during the past year? (Check all that apply.)

	2010					Number of Cases
	Not at all important	Somewhat important	Important	Very Important	Does not apply	
Retired	11.9%	2.4%	5.8%	12.3%	67.7%	1159
Childcare Responsibilities	11.4%	2.8%	7.2%	22.1%	56.4%	1177
Other Family Responsibilities	8.0%	7.2%	16.5%	29.2%	39.1%	1179
Salary	8.5%	8.4%	21.8%	39.8%	21.5%	1204
Laid off	9.4%	1.8%	3.2%	12.0%	73.5%	1136
Change in spouse/partner work situation	9.4%	2.8%	7.5%	17.7%	62.6%	1144
Change in financial status	6.9%	6.7%	13.4%	30.1%	42.9%	1170
Relocation/moved to a different area	10.2%	2.5%	5.4%	13.7%	68.2%	1143
Promotion/career advancement	8.6%	4.0%	11.6%	26.8%	49.0%	1151
Change in my health status	9.4%	4.7%	6.6%	16.0%	63.4%	1147
Wanted more convenient hours	8.6%	6.0%	13.3%	30.0%	42.2%	1179
Dissatisfaction with previous position	9.5%	7.6%	10.8%	21.9%	50.2%	1156
Other	4.1%	0.8%	8.2%	29.5%	57.5%	536

Note: Data are weighted to represent all RNs with active licenses.

56. Do you reside outside California?

This question was excluded as it did not pertain to California Residents

57. If you reside outside California, please **check all** of the following that apply regarding the **past 12 months**:

This question was excluded as it did not pertain to California Residents

58. How many months did you work in California in the past 12 months?

This question was excluded as it did not pertain to California Residents

59. If you reside outside California, do you plan to work as an RN in California in the **next five years**?

This question was excluded as it did not pertain to California Residents

60. Gender

	2006	2008	2010
Male	9.4%	13.8%	10.1%
Female	90.6%	86.2%	89.9%
Number of Cases	4477	4890	5480

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

61. Year of Birth

	2006	2008	2010
Under 30 years	7.5%	6.1%	9.3%
30-34 years	10.3%	9.3%	9.4%
35-39 years	10.6%	11.5%	11.2%
40-44 years	12.3%	11.2%	12.1%
45-49 years	13.9%	12.3%	11.2%
50-54 years	19.1%	17.0%	15.6%
55-59 years	12.6%	14.1%	13.2%
60-64 years	7.7%	9.8%	10.2%
65 years and older	6.1%	8.8%	7.9%
Number of Cases	4442	4890	5551

Note: Data are weighted to represent all RNs with active licenses.

62. Marital status

	2006	2008	2010
Never Married	11.9%	13.0%	15.2%
Married/Domestic Partnership	69.8%	68.2%	67.7%
Separated/Divorced	14.9%	15.1%	14.8%
Widowed	3.4%	3.6%	2.3%
Number of Cases	4494	4748	5441

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

63. What is your ethnic/racial background (select the **one** with which you most strongly identify)?

	2006	2008	2010
White	63.1%	58.6%	55.8%
African-American	4.2%	4.1%	4.3%
Latino	6.1%	7.5%	8.0%
Filipino	16.3%	18.0%	19.2%
Asian Indian	1.0%	1.3%	1.4%
Asian, not Filipino or Indian	6.2%	7.1%	7.7%
Native Hawaiian	0.2%	0.1%	0.2%
Native American	0.2%	0.4%	0.3%
Mixed race	2.3%	2.0%	2.6%
Other	0.4%	0.8%	0.5%
Number of Cases	4480	4726	5417

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

64. Other than English, what languages do you speak fluently?

	2006	2008	2010
Spanish	10.3%	11.4%	30.3%
Korean	1.1%	1.1%	3.7%
Vietnamese	0.5%	0.6%	2.0%
Tagalog	13.6%	*	*
Tagalog or other Filipino language	*	16.6%	44.0%
Hindi	0.8%	*	*
Hindi or other South Asian language	*	1.3%	3.6%
Mandarin	1.2%	2.2%	4.3%
Cantonese	0.8%	1.5%	2.6%
Other	8.0%	8.0%	15.3%
French			4.1%
German			2.0%
Number of Cases	*	*	1777

* Question was not asked in this survey year.

Note: Respondents could report fluency in multiple languages. Data are weighted to represent all RNs with active licenses.

65. Do you have children living at home with you?

	2006	2008	2010
No	48.0%	50.6%	48.9%
Yes	52.0%	49.4%	51.1%
Number of Cases	4500	4765	5449

Note: Data are weighted to represent all RNs with active licenses.

66 a-e. If Yes, **how many** are:

	2006				
	0 to 2 years	3 to 5 years	6 to 12 years	13-18 years	19+ years
0 children	81.7%	82.3%	66.1%	61.7%	57.6%
1 child	17.4%	16.7%	29.6%	32.6%	39.6%
2 children	0.9%	1.0%	4.1%	5.1%	2.2%
3 or more children	0.0%	0.0%	0.2%	0.7%	0.6%
Number of Cases	1481	1481	1481	1481	1481

Note: Data are weighted to represent all RNs with active licenses.

	2008					2010				
	0 to 2 years	3 to 5 years	6 to 12 years	13-18 years	19+ years	0 to 2 years	3 to 5 years	6 to 12 years	13-18 years	19+ years
0 children	83.9%	85.5%	70.4%	64.0%	58.6%	81.6%	84.7%	68.1%	70.5%	60.8%
1 child	14.2%	12.9%	21.4%	27.0%	32.3%	16.4%	12.9%	22.0%	21.8%	29.1%
2 children	1.6%	1.6%	7.2%	7.9%	7.6%	2.1%	2.5%	8.7%	6.8%	8.4%
3 or more children	0.3%	0.1%	0.9%	1.1%	1.5%	0.0%	0.0%	1.2%	0.9%	1.8%
Number of Cases	2189	2189	2189	2189	2189	2440	2440	2440	2440	2440

Note: Data are weighted to represent all RNs with active licenses.

67. Home Zip Code:

This question was excluded for confidentiality

68. Have any of your relatives been an RN, or are any an RN now? (Check all that apply.)

	2010						
	No RNs in my family	Mother/ Father	Aunt/ Uncle	Grandparent	Cousin	Sister/ Brother	Child
No	52.5%	91.0%	81.2%	96.4%	77.2%	82.8%	96.2%
Yes	47.5%	9.0%	18.8%	3.6%	22.8%	17.2%	3.8%
Number of Cases	5333	5333	5333	5333	5333	5333	5333

Note: Data are weighted to represent all RNs with active licenses.

69. Which category best describes how much income your **total household** received last year? This is the before-tax income of **all** persons living in your household:

	2006	2008	2010
Less than \$30,000	2.0%	1.4%	2.0%
\$30K-\$44,999	3.0%	2.5%	2.4%
\$45K-\$59,999	5.5%	3.8%	4.0%
\$60K-\$74,999	12.4%	10.0%	9.4%
\$75K-\$99,999	21.8%	19.4%	17.8%
\$100K-124,999	21.5%	22.3%	21.5%
\$125K-\$149,999	13.4%	13.0%	13.6%
\$150K-\$174,999	8.5%	10.8%	10.4%
\$175K-\$199,999	4.8%	5.8%	6.6%
\$200K or more	7.2%	11.0%	12.2%
Number of Cases	4302	4468	5028

Note: Data are weighted to represent all RNs with active licenses.

70. Approximately what percentage of your **total household** income comes from your nursing job(s)?

	2006	2008	2010
None	*	*	8.4%
Less than 20 percent	4.1%	3.4%	3.5%
20 to 39 percent	9.7%	9.3%	7.5%
40 to 59 percent	23.9%	21.5%	18.5%
60 to 79 percent	17.7%	19.5%	18.5%
80 to 99 percent	14.6%	13.9%	12.6%
100 percent	30.1%	32.5%	31.1%
Number of Cases	3,676	3,983	5,324

* Question was not asked in this survey year.

Note: Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Appendix B. Letters and mailings

First Post Card

Hello!

We recently mailed you a survey about your experiences as a registered nurse. This research is sponsored by the **California Board of Registered Nursing**. We want to hear from people with both active and inactive licenses, nurses currently working in nursing, those working in other fields, and those who have retired from nursing altogether. I understand that we have not yet received your completed questionnaire. Your response is valuable to this report and I hope that you will take 15 minutes to complete your questionnaire and mail it back in the postage-paid envelope. If you've misplaced your questionnaire, please call 1-877-276-8277 and I'll see that you receive another copy. (If you have recently mailed your completed questionnaire, please disregard this notice.) Thank you for your assistance.

Sincerely,
Dennis Keane, Project Director
School of Nursing
UC San Francisco

Follow up Post Card

CHECKING IN.

The **California Board of Registered Nursing**, working with the University of California, mailed you a copy of the 2010 RN Survey a month ago and again two weeks ago. We have not heard from you and wanted to make sure you received a copy of the survey. It was sent to people with both active and inactive licenses, to nurses currently working in nursing, those working in other fields, as well as those who have retired from nursing altogether.

We need your input to better gauge the health of the nursing profession in California.

You also have the option of completing the survey online. If you need another copy of the questionnaire or want to know how to do it on-line, **please call me toll-free at 1-877-276-8277** or email me at dkeane@thecenter.ucsf.edu. (If you have already mailed your completed questionnaire, please disregard this notice.) Thank you.

Dennis Keane, Project Manager
School of Nursing
UC San Francisco

Letter for Active RNs

Dear XXXXX;

We are pleased to inform you the Board of Registered Nursing has chosen you as one of a select group of registered nurses to provide the Board with vital information concerning current nursing practice. Only 10,000 of California's estimated 355,000 registered nurses are being surveyed, giving you a unique opportunity to contribute to an important study of the nursing profession and future workforce planning. With the pivotal role of the nursing profession in workforce planning and policy in California, it is vital for the Board to be able to accurately present your opinions about working conditions, salaries and other issues pertinent to registered nursing practice. Survey results will be used by the Board to guide public policy, plan for California's future nursing workforce needs. Summary results of the survey will be published on the Board's website in early 2011.

Your individual survey responses are absolutely confidential and individual responses will not be identified or reported. Your participation in the survey is voluntary and you may skip any questions you choose not to answer, but we hope to have a great response to the survey to ensure that the Board has a representative picture of California nurses.

The University of California, San Francisco is conducting the survey for the Board. The attached survey has been sent to registered nurses with active California licenses residing in and outside of California. Completion of the survey should take no more than 20 minutes. The survey may be completed as attached in the paper/pencil format or ONLINE. If completing the attached survey by paper and pencil, please return in the postage-paid return envelope. You may complete the enclosed survey online at http://futurehealth.ucsf.edu/BRN_Active.

Your online USERNAME is: XXXXXXXXXX.

Your online PASSWORD is the first three letters of your last name or your complete last name, if it is equal to or fewer than three letters.

If you have any difficulty completing either version of the survey, or if you have any questions about your participation in this study, please call Dennis Keane at UC San Francisco toll-free at 1-877-276-8277. You may also contact Joanne Spetz, Ph. D., Principal Investigator, by phone at (415) 502-4443. You also have the option of contacting the UC San Francisco Human Research Protection Program at (415) 476-1814 or via email at chr@ucsf.edu.

We hope we can count on your participation and look forward to receiving your completed survey.

Sincerely,



Louise Bailey, M.Ed, RN

Interim Executive Officer

California Board of Registered Nursing

Letter for Inactive RNs

Dear XXXXX;

We are pleased to inform you the Board of Registered Nursing has chosen you as one of a select group to provide the Board with vital information from registered nurses who changed their license status within the last two years. You have been selected to participate in this survey because our records show your California license was renewed with "inactive" status, or your license was not renewed. You may have retired from nursing, be in a temporary hiatus from nursing, moved out of California, or decided to seek employment outside the nursing profession.

Only 1,000 of California's registered nurses in the inactive or non-renewed license status are being surveyed, giving you a unique opportunity to contribute to an important study of the nursing profession. For workforce planning and policy in California, it vital for the Board to be able to accurately present your opinions about working conditions, salaries and other issues pertinent to registered nursing practice. Survey results will guide public policy and planning for California's future nursing workforce needs. Results of the survey will be published on the Board's website in early 2011.

Your individual survey responses are absolutely confidential and individual responses will not be identified or reported. Your participation in the survey is voluntary and you may skip any questions you choose not to answer, but we hope to have a great response to the survey to ensure that the Board has a representative picture of California nurses.

The University of California, San Francisco is conducting the survey for the Board. Completion of the survey should take no more than 20 minutes. The survey may be completed as attached in the paper format or ONLINE. If completing the attached paper survey, please return in the postage-paid return envelope.


You may complete the enclosed survey online at http://futurehealth.ucsf.edu/BRN_Active.

Your online LOGIN is: XXXXXXXXX

Your online PASSWORD is the first three letters of your last name or your complete last name, if it is equal to or fewer than three letters. Please enter your password in ALL CAPITAL LETTERS.

If you have any difficulty completing either version of the survey, or if you have any questions about your participation in this study, please call Dennis Keane at UC San Francisco toll-free at 1-877-276-8277. You may also contact Joanne Spetz, Ph. D., Principal Investigator, by phone at (415) 502-4443. You also have the option of contacting the UC San Francisco Human Research Protection Program at (415) 476-1814 or via email at chr@ucsf.edu.

We hope we can count on your participation and look forward to receiving your completed survey.

Sincerely,


Louise Bailey, M.Ed, RN

Interim Executive Officer

California Board of Registered Nursing

Follow up Letter for both Active and Inactive RNs

Dear XXXXX:

A few weeks ago we sent you a questionnaire asking about your experiences as a current or former registered California nurse. We have not yet received your completed questionnaire, and I wanted to make a special plea for your help.

Even if you are not currently practicing in the field of nursing, we still need your participation. Your input will help the Board understand factors that contribute to nurses' decisions to leave the profession.

The California Board of Registered Nursing is extremely interested in evaluating the experiences and needs of California's nursing community. Hearing from people like you and the thousands of other nurses we have contacted is the only way we can learn first-hand about the challenges and concerns facing today's nurses. This will help California plan for its future nursing needs as well as to develop policies that will increase the value of providing nursing services in California.

I've taken the liberty of enclosing a new questionnaire for you to complete, in the event that you may have misplaced yours. Completion of the survey should take no more than 15-20 minutes, and a postage-paid return envelope is enclosed for your convenience. Your responses will remain strictly confidential. All information will be summarized, and no information that could be used to identify individuals will be released.

You may complete the enclosed survey online at http://futurehealth.ucsf.edu/BRN_Inactive.

Your online USERNAME is: XXXXXX

Your online PASSWORD is the first three letters of your last name or your complete last name, if it is equal to or fewer than three letters.

Participation in this research is completely voluntary and you are free to skip any questions you don't want to answer. Your responses are very important to the success of this project, and you will be contributing in a significant way to the profession of registered nursing and its future. We hope that we can count on your participation.

If you have questions or require any additional information, please contact my colleague, Dennis Keane, at the Center for the Health Professions at UC San Francisco. You can call him toll-free at 1-877-276-8277 or email him at dkeane@thecenter.ucsf.edu.

Thank you in advance for your cooperation.

Sincerely,



Louise Bailey, M.Ed, RN

Interim Executive Officer

California Board of Registered Nursing

California Board of Registered Nursing

Survey of Registered Nurses 2010

Conducted for the Board of Registered Nursing by

School of Nursing and Center for the Health Professions,
University of California, San Francisco

Here's how to fill out the Survey:

- Use pen or pencil.
- Please try to answer each question.
- Most questions can be answered by checking a box or writing a number or a few words on a line.
- Never check more than one box, except when it says **Check all that apply**.
- Sometimes we ask you to skip one or more questions. An arrow will tell you what question to answer next, like this:

_1 YES

_2 NO

SKIP TO Question 23

- If none of the boxes is just right for you, please check the one that fits you the best. Feel free to add a note of explanation. If you are uncomfortable answering a particular question, feel free to skip it and continue with the survey.
- If you need help with the survey, call toll-free (877) 276-8277.
- **REMEMBER:** An online version of this survey is available. Follow the instructions in the cover letter that came with this questionnaire to access the online survey.

After you complete the survey, please mail it back to us in the enclosed envelope. No stamps are needed. Thank you for your prompt response.

**CALIFORNIA BOARD OF REGISTERED NURSING
2010 NURSE SURVEY**

SECTION A: OPINIONS ABOUT YOUR MOST RECENT NURSING

A nursing position is an RN position requiring an active RN license.

1. Please rate each of the following factors of your **current or most recent** nursing position:

	<u>Very dissatisfied</u>	<u>Dissatisfied</u>	<u>Neither satisfied nor dissatisfied</u>	<u>Satisfied</u>	<u>Very satisfied</u>	<u>Does not apply</u>
A. Your job overall	_1	_2	_3	_4	_5	_6
B. Your salary	_1	_2	_3	_4	_5	_6
C. Employee benefits	_1	_2	_3	_4	_5	_6
D. Adequacy of RN skill level where you work	_1	_2	_3	_4	_5	_6
E. Adequacy of the number of RN staff where you work	_1	_2	_3	_4	_5	_6
F. Adequacy of clerical support services	_1	_2	_3	_4	_5	_6
G. Non-nursing tasks required	_1	_2	_3	_4	_5	_6
H. Amount of paperwork required	_1	_2	_3	_4	_5	_6
I. Your workload	_1	_2	_3	_4	_5	_6
J. Physical work environment	_1	_2	_3	_4	_5	_6
K. Work schedule	_1	_2	_3	_4	_5	_6
L. Job security	_1	_2	_3	_4	_5	_6
M. Opportunities for advancement	_1	_2	_3	_4	_5	_6
N. Support from other nurses you work with	_1	_2	_3	_4	_5	_6
O. Teamwork between coworkers and yourself	_1	_2	_3	_4	_5	_6
P. Leadership from your nursing administration	_1	_2	_3	_4	_5	_6
Q. Relations with physicians	_1	_2	_3	_4	_5	_6
R. Relations with other non-nursing staff	_1	_2	_3	_4	_5	_6
S. Relations with agency or registry nurses	_1	_2	_3	_4	_5	_6
T. Interaction with patients	_1	_2	_3	_4	_5	_6

	<u>Very dissatisfied</u>	<u>Dissatisfied</u>	<u>Neither satisfied nor dissatisfied</u>	<u>Satisfied</u>	<u>Very satisfied</u>	<u>Does not apply</u>
U. Time available for patient education	_1	_2	_3	_4	_5	_6
Continue on the next page						
V. Involvement in policy or management decisions	_1	_2	_3	_4	_5	_6
W. Opportunities to use my skills	_1	_2	_3	_4	_5	_6
X. Opportunities to learn new skills	_1	_2	_3	_4	_5	_6
Y. Quality of preceptor and mentor programs	_1	_2	_3	_4	_5	_6
Z. Employer-supported educational opportunities	_1	_2	_3	_4	_5	_6
AA. Quality of patient care where you work	_1	_2	_3	_4	_5	_6
BB. Feeling that work is meaningful	_1	_2	_3	_4	_5	_6
CC. Recognition for a job well done	_1	_2	_3	_4	_5	_6

2. How satisfied are you with the nursing profession overall?

<u>Very dissatisfied</u>	<u>Dissatisfied</u>	<u>Neither satisfied nor dissatisfied</u>	<u>Satisfied</u>	<u>Very satisfied</u>
_1	_2	_3	_4	_5

3. Do you presently have an **active** RN license in California?

_1 Yes _2 No

4. Are you **currently employed** in a position that requires a registered nursing license?

_1 **Yes**, working full or part-time _2 **No** → **Skip to page 8, Section C.**
Continue to the next page, Section B.



SECTION B: FOR NURSES CURRENTLY EMPLOYED IN NURSING

5. How many **hours** do you normally work as an RN? **(Please complete all items.)**
- a. _____ # hours per **day**
 - b. _____ # hours per **week** (do not include unworked hours)
 - c. _____ # overtime hours per **week**
 - d. _____ # hours **on call** not worked per week
6. How many **months** per year do you work as an RN? _____ # months per **year**
7. Within the next five years, what are your intentions regarding your nursing employment? **(Check only one.)**
- _1 Plan to increase hours of nursing work
 - _2 Plan to work approximately as much as now
 - _3 Plan to reduce hours of nursing work
 - _4 Plan to leave nursing entirely but not retire
 - _5 Plan to retire

Questions 8 through 21 refer to your principal nursing position, which is the RN position in which you spend most of your working time.

8. In your **principal** nursing position, are you... **(Check only one.)**
- | | |
|---|--|
| _1 A regular employee | _3 Self-employed |
| _2 Employed through a temporary employment service agency | _4 Travel nurse or employed through a traveling nurse agency |
9. How many **hours per week** do you normally work in your **principal** nursing position?
_____ # hours per week
10. How many **months per year** do you normally work in your **principal** nursing position?
_____ # months per year
11. Where is your **principal** nursing position located?
- | | |
|-------------------|---------------------------|
| a. Zip Code _____ | c. City _____ |
| b. County _____ | d. State _____ (2-letter) |

12. How many miles is it **one-way** from your home to your **principal** nursing position? If you work for a traveling nurse agency or registry, write the average **one-way distance** to your current or most recent employment location.
 _____ miles

13. How long have you been employed as an RN with your **principal** employer?
 _____ years and _____ months

14. Which of the following best describes the type of setting of your **principal** nursing position? If you work for a temporary employment or traveling nurse agency, in which setting do you most often work? (**Check only one.**)

- | | | |
|--|--|--|
| <input type="checkbox"/> _1 Hospital, inpatient care or emergency department | <input type="checkbox"/> _9 Medical practice, clinic, physician office, surgery center | <input type="checkbox"/> _17 Government agency other than public/community health or corrections |
| <input type="checkbox"/> _2 Hospital, ancillary unit | <input type="checkbox"/> _10 Urgent care, not hospital-based | <input type="checkbox"/> _18 Hospice |
| <input type="checkbox"/> _3 Hospital, ambulatory care department (surgical, clinic) | <input type="checkbox"/> _11 Public health or community health agency | <input type="checkbox"/> _19 School health service (K-12 or college) |
| <input type="checkbox"/> _4 Hospital, nursing home unit | <input type="checkbox"/> _12 Outpatient mental health/substance abuse | <input type="checkbox"/> _20 Call center/telenursing center |
| <input type="checkbox"/> _5 Nursing home, extended care, or skilled nursing facility | <input type="checkbox"/> _13 Inpatient mental health/substance abuse | <input type="checkbox"/> _21 University or college (academic department) |
| <input type="checkbox"/> _6 Long-term acute care | <input type="checkbox"/> _14 Occupational health or employee health service | <input type="checkbox"/> _22 Case management/disease management |
| <input type="checkbox"/> _7 Home health agency/ home health service | <input type="checkbox"/> _15 Dialysis | <input type="checkbox"/> _23 Self-employed |
| <input type="checkbox"/> _8 Rehabilitation facility/long term acute care/group home | <input type="checkbox"/> _16 Correctional facility, prison or jail | |
| <input type="checkbox"/> _24 Other (Please describe: _____) | | |

15. Which one of the following best describes the **job title** of your **principal** nursing position? (**Check only one.**)

- | | |
|---|---|
| <input type="checkbox"/> _1 Staff nurse/direct care nurse | <input type="checkbox"/> _12 Public Health/Community Health Nurse |
| <input type="checkbox"/> _2 Senior management (Vice President, Nursing Executive, Dean) | <input type="checkbox"/> _13 Educator, academic setting (professor, instructor at a school of nursing) |
| <input type="checkbox"/> _3 Middle management (Asst. Director, Dept. Head, House Supervisor, Nurse Manager, Associate Dean) | <input type="checkbox"/> _14 Staff educator, service setting (in-service educator, clinical nurse educator) |
| <input type="checkbox"/> _4 Front-line management (Head Nurse, Supervisor) | <input type="checkbox"/> _15 Patient education |
| <input type="checkbox"/> _5 Charge Nurse or Team Leader | <input type="checkbox"/> _16 Patient care coordinator/case manager/discharge planner |
| <input type="checkbox"/> _6 Clinical Nurse Specialist (CNS) | <input type="checkbox"/> _17 Quality Improvement nurse, utilization review |
| <input type="checkbox"/> _7 Certified Registered Nurse Anesthetist | <input type="checkbox"/> _18 Infection control nurse |

- _8 Certified Nurse Midwife
- _19 Occupational health nurse
- _9 Nurse Practitioner
- _20 Telenursing
- _10 School Nurse
- _21 Researcher
- _11 Nurse Coordinator
- _22 Other (**Please describe:** _____)

16. Approximately what percentage of your time is spent on each of the following functions during a typical week in your **principal** position?

- a. _____% Patient care and charting
- b. _____% Patient Education
- c. _____% Indirect patient/client care (consultation, planning, evaluating care)
- d. _____% Teaching, precepting or orienting students or new hires/staff (include prep time)
- e. _____% Supervision/Management
- f. _____% Administration
- g. _____% Research
- h. _____% Non-nursing tasks (housekeeping, etc)
- i. _____% Other (**Please describe:** _____)
- _____100% Total

17. Mark the clinical area in which you **most frequently** provide direct patient care in your **principal** nursing position. (**Check only one.**)

- | | | |
|--|--|--|
| _1 Not involved in direct patient care | _10 Hospice | _18 Pediatrics |
| _2 Ambulatory/outpatient | _11 Intensive Care/Critical Care | _19 Psychiatry/mental health |
| _3 Cardiology | _12 Labor and delivery | _20 Rehabilitation |
| _4 Community/public health | _13 Medical-surgical | _21 School health (K-12 or post-secondary) |
| _5 Corrections | _14 Mother-baby unit or normal newborn nursery | _22 Step-down or transitional bed unit |
| _6 Dialysis | _15 Neonatal care | _23 Surgery/pre-op/post-op/PACU/anesthesia |
| _7 Emergency/trauma | _16 Obstetrics/gynecology | _24 Telemetry |
| _8 Geriatrics | _17 Oncology | _25 Work in multiple areas and do not specialize |
| _9 Home health care | _26 Other (Please describe: _____) | |

18. Which of the following computerized health information systems, if any, do you use in your **principal** nursing position? (**Check all that apply.**)

- _a Electronic patient records
- _b Electronic nurse charting/nursing notes
- _c Electronic radiology reports
- _d Electronic care plans/pathways
- _e Electronic lab reporting
- _k Other (**Please describe:** _____)
- _l None of the above
- _f Computerized physician orders
- _g Barcode scanning for medication administration
- _h Barcode scanning for supplies/other
- _i Computerized medication distribution (such as Pyxis)
- _j Electronic medication administration record

19. What is your experience with the information systems in your **principal** nursing position? (**Check only one.**)

- _1 All systems work well
- _2 Systems are generally helpful, but may have some flaws
- _3 Systems have problems that affect my work
- _4 Systems interfere with my work
- _5 No systems in my workplace

20. Please specify the **total annual earnings** for your **principal nursing position only**, before deductions for taxes, social security, etc. If you do not have a set annual salary, please estimate your annual earnings for last year.

\$ _____ /year

21. Does your compensation from your **principal** nursing position include: (**Check all that apply.**)

- _a Retirement plan
- _b Personal health insurance
- _c Dental insurance
- _d Family health insurance

22. Do you currently hold more than one nursing job?

- _1 Yes
- _2 No → **Skip to Question #27 on the next page.**



23. How many nursing positions do you hold **in addition to** your **principal** job?

- _1 One
- _2 Two
- _3 Three
- _4 Four or more

24. In your other **nursing** positions, are you... (**Check all that apply.**)

- _a A regular employee
- _b Employed through a temporary employment service agency, not traveling
- _c Self-employed
- _d Travel nurse or employed through a traveling nurse agency

31. How important are each of the following reasons you stopped working as a registered nurse for a period of more than one year?

	Not at all <u>important</u>	Somewhat <u>important</u>	<u>Important</u>	Very <u>important</u>	Does not <u>apply</u>
A. Childcare responsibilities	_1	_2	_3	_4	_5
B. Other family responsibilities	_1	_2	_3	_4	_5
C. Moving to a different area	_1	_2	_3	_4	_5
D. Stress on the job	_1	_2	_3	_4	_5
E. Job-related illness or injury	_1	_2	_3	_4	_5
F. Non-job-related illness or injury	_1	_2	_3	_4	_5
G. Salary	_1	_2	_3	_4	_5
H. Dissatisfied with benefits	_1	_2	_3	_4	_5
I. Laid off	_1	_2	_3	_4	_5
J. Go back to school	_1	_2	_3	_4	_5
K. Travel	_1	_2	_3	_4	_5
L. Try another occupation	_1	_2	_3	_4	_5
M. Other dissatisfaction with job	_1	_2	_3	_4	_5
N. Dissatisfaction with the nursing profession	_1	_2	_3	_4	_5
O. Other	_1	_2	_3	_4	_5

(Please specify: _____)

PLEASE SKIP TO PAGE 10, SECTION D

SECTION C: FOR PERSONS NOT EMPLOYED IN REGISTERED NURSING

The purpose of this section is to learn why persons are not employed in nursing or have left nursing practice.

32. What was the last year you worked for pay as a registered nurse? ___ ___ ___ ___

33. How important were each of the following factors in your decision to leave nursing?

	<u>Not at all important</u>	<u>Somewhat important</u>	<u>Important</u>	<u>Very important</u>	<u>Does not apply</u>
A. Retired	_1	_2	_3	_4	_5
B. Childcare responsibilities	_1	_2	_3	_4	_5
C. Other family responsibilities	_1	_2	_3	_4	_5
D. Moving to a different area	_1	_2	_3	_4	_5
E. Stress on the job	_1	_2	_3	_4	_5
F. Job-related illness/injury	_1	_2	_3	_4	_5
G. Non-job-related illness/injury	_1	_2	_3	_4	_5
H. Salary	_1	_2	_3	_4	_5
I. Dissatisfied with benefits	_1	_2	_3	_4	_5
J. Other dissatisfaction with your job	_1	_2	_3	_4	_5
K. Dissatisfaction with the nursing profession	_1	_2	_3	_4	_5
L. Travel	_1	_2	_3	_4	_5
M. Wanted to try another occupation	_1	_2	_3	_4	_5
N. Inconvenient schedules in nursing jobs	_1	_2	_3	_4	_5
O. Difficult to find a nursing position	_1	_2	_3	_4	_5
P. Laid off	_1	_2	_3	_4	_5
Q. Other	_1	_2	_3	_4	_5

(Specify: _____)

34. Which of the following best describes your current intentions regarding work in nursing?

1 Currently seeking employment in nursing → **Skip to the next page, Section D.**

2 Plan to return to nursing in the future

34a. How soon? 1 Less than one year

2 1-2 years

3 3-4 years

4 5 or more years

Skip to the next page, Section D.

3 Retired

4 Definitely will not return to nursing, but not retired

Skip to the next page, Section D.

5 Undecided at this time (**Continue to Question #35.**)



35. Would any of the following factors affect your decision to return to nursing?

	<u>Not at all important</u>	<u>Somewhat important</u>	<u>Important</u>	<u>Very important</u>	<u>Does not apply</u>
A. Affordable childcare at or near work	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
B. Flexible work hours	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
C. Modified physical requirements of job	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
D. Higher nursing salary	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
E. Better retirement benefits	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
F. Better support from nursing management	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
G. More support from other nurses	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
H. Better nurse to patient ratios	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
I. Adequate support staff for non-nursing tasks	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
J. Availability of re-entry programs/mentoring	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
K. Improvement in my health status	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
L. Other	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

(Specify: _____)

SECTION D: EMPLOYMENT OUTSIDE NURSING

36. Are you currently employed in a non-nursing position (that does not require a Registered Nursing license)?

Yes



No → **Skip to the next page, Section E.**

37. Does your position utilize any of your nursing knowledge? Yes No

38. Please indicate the field(s) of your work position(s) outside of nursing. **(Check all that apply)**

Health related services outside of nursing

Retail sales and services

Education, elementary and secondary

Financial, accounting, and insurance services

Consulting organization

Other **(Specify: _____)**

39. Please indicate the following for work positions **outside of nursing.**

Work positions outside of nursing	Hours worked per week	Estimated <u>pre-tax</u> annual income
Position #1 Title: _____ a1	_____ Hrs/week a2	_____ \$/year a3
Position #2 Title: _____ b1	_____ Hrs/week b2	_____ \$/year b3
Position #3 Title: _____ c1	_____ Hrs/week c2	_____ \$/year c3

SECTION E: CHANGES IN THE PAST YEAR

40. Has your employment status changed during the past year? **(Check all that apply.)**

- _a No change in employment status → **Skip to the next page, Section F.**
- _b Increased hours
- _c Decreased hours
- _d I was not working in registered nursing but am now in a registered nursing job
- _e I was working in registered nursing but left registered nursing
- _f New position with the same employer
- _g Same position with a different employer
- _h New position with a different employer
- _i Other **(Please specify)** _____

41. How important were each of the following factors in your change in employment during the past year? **(Check all that apply.)**

	<u>Not at all</u> <u>important</u>	<u>Somewhat</u> <u>important</u>	<u>Important</u>	<u>Very</u> <u>important</u>	<u>Does not</u> <u>apply</u>
A. Retired	_1	_2	_3	_4	_5
B. Childcare responsibilities	_1	_2	_3	_4	_5
C. Other family responsibilities	_1	_2	_3	_4	_5
D. Salary	_1	_2	_3	_4	_5
E. Laid off	_1	_2	_3	_4	_5
F. Change in spouse/partner work situation	_1	_2	_3	_4	_5
G. Change in financial status	_1	_2	_3	_4	_5
H. Relocation/moved to a different area	_1	_2	_3	_4	_5
I. Promotion/career advancement	_1	_2	_3	_4	_5
J. Change in my health status	_1	_2	_3	_4	_5
K. Wanted to work more convenient hours	_1	_2	_3	_4	_5
L. Dissatisfaction with previous position	_1	_2	_3	_4	_5
M. Other	_1	_2	_3	_4	_5

(Please specify: _____)

SECTION F: RESIDENCE OUTSIDE CALIFORNIA

42. Do you reside primarily outside California? _1 Yes _2 No → **Skip to the next page, Section G.**



43. If you reside outside California, please check any of the following that apply regarding the **past 12 months. (Check all that apply.)**

- _a Worked as an RN in California for temporary agency/registry
- _b Worked as an RN for California employer in telenursing
- _c Worked as an RN for out-of-state telenursing employer with California clients
- _d Lived in border state, commuted to California for an RN job
- _e Worked as an RN in California but have since moved out
- _f Did not work as an RN in California

44. How many months did you work in California as an RN in the past 12 months?

_____ months or _0 Did not work in CA

45. If you reside outside California, do you plan to work as an RN in California in the **next five years? (Check all that apply.)**

- _a **Yes**, I plan to travel to California intermittently to work as an RN
- _b **Yes**, I plan to relocate to California and work as an RN
- _c **Yes**, I plan to perform telenursing for a California employer
- _d **Yes**, I plan to perform telenursing for out-of-state employer with California clients
- _e **Yes**, I plan to commute from a border state
- _f **No**, I plan to keep my California license active but do not plan to practice in California
- _g **No**, I plan to let my California license lapse

SECTION G: EDUCATION AND LICENSURE

46. What was the highest level of education you completed **prior** to your basic RN education?

- | | | |
|---|--|---|
| <input type="checkbox"/> _1 Less than a high school diploma | <input type="checkbox"/> _3 Associate degree | <input type="checkbox"/> _5 Master's degree |
| <input type="checkbox"/> _2 High school diploma | <input type="checkbox"/> _4 Baccalaureate degree | <input type="checkbox"/> _6 Doctoral degree |

47. **Immediately prior** to starting your basic RN education, were you employed in a health occupation? (**Check only one.**)

- | | | |
|---|--|--|
| <input type="checkbox"/> _0 No | <input type="checkbox"/> _3 Yes, nursing aide/assistant | <input type="checkbox"/> _5 Yes, medical assistant |
| <input type="checkbox"/> _1 Yes, clerical or administrative in healthcare | <input type="checkbox"/> _4 Yes, other health technician/therapist | <input type="checkbox"/> _6 Yes, licensed practical/vocational nurse |
| <input type="checkbox"/> _2 Yes, military medical corps | <input type="checkbox"/> _7 Yes, other (Please specify: _____) | |

48. In what kind of program did you receive your initial, pre-licensure RN education that qualified you for RN licensure in the United States? (**Check only one**)

- | | | |
|--|--|--|
| <input type="checkbox"/> _1 Diploma program | <input type="checkbox"/> _4 Baccalaureate program | <input type="checkbox"/> _6 Master's program |
| <input type="checkbox"/> _2 Associate degree program | <input type="checkbox"/> _5 Entry-level Master's program | <input type="checkbox"/> _7 Doctoral program |
| <input type="checkbox"/> _3 30-unit option program (LVN to RN) | | |

49. In what state or country did you complete your pre-licensure RN education that qualified you for U.S. RN licensure?

- US:** ____ 2-letter state code **OR** Other country:
- | | | |
|---|-------------------------------------|---|
| <input type="checkbox"/> _1 Australia | <input type="checkbox"/> _4 England | <input type="checkbox"/> _7 Korea |
| <input type="checkbox"/> _2 Canada | <input type="checkbox"/> _5 India | <input type="checkbox"/> _8 Philippines |
| <input type="checkbox"/> _3 China | <input type="checkbox"/> _6 Ireland | |
| <input type="checkbox"/> _9 Other (Please specify: _____) | | |

50. In what year did you graduate from that program? ____ _

51. In what year were you first licensed as an RN? ____ _

52. In what state/country were you first licensed as an RN?

- US:** ____ 2-letter state code **OR** Other country:
- | | | |
|---|-------------------------------------|---|
| <input type="checkbox"/> _1 Australia | <input type="checkbox"/> _4 England | <input type="checkbox"/> _7 Korea |
| <input type="checkbox"/> _2 Canada | <input type="checkbox"/> _5 India | <input type="checkbox"/> _8 Philippines |
| <input type="checkbox"/> _3 China | <input type="checkbox"/> _6 Ireland | |
| <input type="checkbox"/> _9 Other (Please specify: _____) | | |

53. In what year were you first licensed as an RN **in California**? ____ _

SECTION H: DEMOGRAPHIC INFORMATION

60. Gender _1 Female _2 Male

61. Year of birth 19 ____ ____

62. In what country were you born? _____

63. Marital status

_1 Never married

_2 Currently married/
in domestic partner
relationship

_3 Separated or
divorced

_4 Widowed

64. What is your ethnic/racial background (select the **one** with which you most strongly identify)?

_1 White, not Hispanic or
Latino

_4 Filipino

_7 Native Hawaiian or other
Pacific Islander

_2 Black or African American

_5 Asian Indian

_8 Native American or Alaskan

_3 Hispanic or Latino

_6 Asian, not Filipino or
Indian

_9 Mixed race/ethnicity

_10 Other (**Please describe:** _____)

65. Other than English, what languages do you speak fluently? (**Check all that apply.**)

_a Spanish

_d Tagalog/other Filipino dialect

_g Mandarin

_b Korean

_e Hindi/Urdu/Punjabi/other South Asian language

_h Cantonese

_c Vietnamese

_f French

_i German

_j Other (please describe: _____)

66. Do you have children living at home with you? _1 Yes _2 No

If Yes, **how many** are:

a) 0-2 years ____ b) 3-5 years ____ c) 6-12 years ____ d) 13-18 years ____ e) 19+ years ____

67. Home Zip Code: _____ or other country (**Please specify:** _____)

68. Have any of your relatives been an RN, or are any an RN now? (**Check all that apply.**)

_a No RNs in my family

_b Mother/Father

_d Grandparent

_f Sister/Brother

_c Aunt/Uncle

_e Cousin

_g Child

69. Which category best describes how much income your **total household** received last year?
This is the before-tax income of **all** persons living in your household:

- | | | |
|--|---|---|
| <input type="checkbox"/> _1 Less than \$30,000 | <input type="checkbox"/> _4 \$60,000 - 74,999 | <input type="checkbox"/> _7 \$125,000 - 149,999 |
| <input type="checkbox"/> _2 \$30,000 - 44,999 | <input type="checkbox"/> _5 \$75,000 - 99,999 | <input type="checkbox"/> _8 \$150,000 - 174,999 |
| <input type="checkbox"/> _3 \$45,000 - 59,999 | <input type="checkbox"/> _6 \$100,000 - 124,999 | <input type="checkbox"/> _9 \$175,000 - 199,999 |
| | | <input type="checkbox"/> _10 \$200,000 or more |

70. Approximately what percentage of your **total household** income comes from your nursing job(s)?

- | | | | |
|-----------------------------------|------------------------------------|------------------------------------|----------------------------------|
| <input type="checkbox"/> _1 None | <input type="checkbox"/> _3 20-39% | <input type="checkbox"/> _5 60-79% | <input type="checkbox"/> _7 100% |
| <input type="checkbox"/> _2 1-19% | <input type="checkbox"/> _4 40-59% | <input type="checkbox"/> _6 80-99% | |

Thank you for completing the survey.
Please return the questionnaire in the postage-paid envelope provided

If you have additional thoughts or ideas about the nursing profession in California, please write them below. You may include your email address if you would like an email notification when the report on this survey is published.

Comments:

Yes, I would like to be notified when the report is published.

My email address is:

California Board of Registered Nursing

Survey of Registered Nurses 2010

Conducted for the Board of Registered Nursing by

School of Nursing and Center for the Health Professions,
University of California, San Francisco

Here's how to fill out the Survey:

- Use pen or pencil to complete the survey.
- Please try to answer each question.
- Most questions can be answered by checking a box or writing a number or a few words on a line.
- Never check more than one box, except when it says **Check all that apply**.
- Sometimes we ask you to skip one or more questions. An arrow will tell you what question to answer next, like this:

_1 YES
_2 NO **SKIP TO Question 23**

- If none of the boxes is just right for you, please check the one that fits you the best. Feel free to add a note of explanation. If you are uncomfortable answering a particular question, feel free to skip it and continue with the survey.
- If you need help with the survey, call toll-free (877) 276-8277.
- **REMEMBER:** An online version of this survey is available. Follow the instructions in the cover letter that came with this questionnaire to access the online survey.

After you complete the survey, please mail it back to us in the enclosed envelope. No stamps are needed. Thank you for your prompt response.

15. What is your degree objective?
- _1 Associate degree _3 Master's degree _5 Doctoral degree
- _2 Baccalaureate degree _4 Non-degree specialty certification program

16. How satisfied are you with the nursing profession overall?
- | | | | | |
|-----------------------------|---------------------|---|------------------|--------------------------|
| Very
<u>dissatisfied</u> | <u>Dissatisfied</u> | Neither
satisfied
<u>nor dissatisfied</u> | <u>Satisfied</u> | Very
<u>satisfied</u> |
| _1 | _2 | _3 | _4 | _5 |

17. Are you **currently employed** in a position that requires a registered nursing license?
- _1 **Yes**, working full or part-time _2 **No** → **Skip to page 10, Section C.**
Continue to the next page, Section B.



SECTION B: FOR NURSES CURRENTLY EMPLOYED IN NURSING

18. How many **hours** do you normally work as an RN? **(Please complete all items.)**
- a. _____ # hours per **day**
- b. _____ # hours per **week** (do not include unworked call hours)
- c. _____ # overtime hours per **week**
- d. _____ # hours **on call** not worked per week

19. How many **months** per year do you work as an RN? _____ # months per **year**

20. Within the next five years, what are your intentions regarding your nursing employment? **(Check only one.)**
- _1 Plan to increase hours of nursing work
- _2 Plan to work approximately as much as now
- _3 Plan to reduce hours of nursing work
- _4 Plan to leave nursing entirely but not retire
- _5 Plan to retire

Questions 21 through 35 refer to your principal nursing position, which is the RN position in which you spend most of your working time.

21. In your **principal** nursing position, are you... **(Check only one.)**
- _1 A regular employee _3 Self-employed
- _2 Employed through a temporary employment service agency _4 Travel nurse or employed through a traveling nurse agency

22. How many **hours per week** do you normally work in your **principal** nursing position?
 _____ # hours per week
23. How many **months per year** do you normally work in your **principal** nursing position?
 _____ # months per year
24. Where is your **principal** nursing position located?
 a. Zip Code _____ c. City _____
 b. County _____ d. State _____ (2-letter)
25. How many miles is it **one-way** from your home to your **principal** nursing position? If you work for a traveling nurse agency or registry, write the average **one-way distance** to your current or most recent employment location.
 _____ miles each way
26. How long have you been employed as an RN with your **principal** employer?
 _____ years and _____ months
27. Which of the following **best** describes the type of setting of your **principal** nursing position? If you work for a temporary employment or traveling nurse agency, in which setting do you most often work? (**Check only one.**)
- | | | |
|--|--|--|
| <input type="checkbox"/> _1 Hospital, inpatient care or emergency department | <input type="checkbox"/> _9 Medical practice, clinic, physician office, surgery center | <input type="checkbox"/> _17 Government agency other than public/community health or corrections |
| <input type="checkbox"/> _2 Hospital, ancillary unit | <input type="checkbox"/> _10 Urgent care, not hospital-based | <input type="checkbox"/> _18 Hospice |
| <input type="checkbox"/> _3 Hospital, ambulatory care department (surgical, clinic) | <input type="checkbox"/> _11 Public health or community health agency | <input type="checkbox"/> _19 School health service (K-12 or college) |
| <input type="checkbox"/> _4 Hospital, nursing home unit | <input type="checkbox"/> _12 Outpatient mental health/substance abuse | <input type="checkbox"/> _20 Call center/telenursing center |
| <input type="checkbox"/> _5 Nursing home, extended care, or skilled nursing facility | <input type="checkbox"/> _13 Inpatient mental health/substance abuse | <input type="checkbox"/> _21 University or college (academic department) |
| <input type="checkbox"/> _6 Long-term acute care | <input type="checkbox"/> _14 Occupational health or employee health service | <input type="checkbox"/> _22 Case management/disease management |
| <input type="checkbox"/> _7 Home health agency/home health service | <input type="checkbox"/> _15 Dialysis | <input type="checkbox"/> _23 Self-employed |
| <input type="checkbox"/> _8 Rehabilitation facility/long term acute care/group home | <input type="checkbox"/> _16 Correctional facility, prison or jail | |
| <input type="checkbox"/> _24 Other (Please describe: _____) | | |

28. Which one of the following best describes the **job title** of your **principal** nursing position?
(Check only one.)

- | | |
|---|---|
| <input type="checkbox"/> _1 Staff nurse/direct care nurse | <input type="checkbox"/> _12 Public Health/Community Health Nurse |
| <input type="checkbox"/> _2 Senior management (Vice President, Nursing Executive, Dean) | <input type="checkbox"/> _13 Educator, academic setting (professor, instructor at a school of nursing) |
| <input type="checkbox"/> _3 Middle management (Asst. Director, Dept. Head, House Supervisor, Nurse Manager, Associate Dean) | <input type="checkbox"/> _14 Staff educator, service setting (in-service educator, clinical nurse educator) |
| <input type="checkbox"/> _4 Front-line management (Head Nurse, Supervisor) | <input type="checkbox"/> _15 Patient education |
| <input type="checkbox"/> _5 Charge Nurse or Team Leader | <input type="checkbox"/> _16 Patient care coordinator/case manager/discharge planner |
| <input type="checkbox"/> _6 Clinical Nurse Specialist (CNS) | <input type="checkbox"/> _17 Quality Improvement nurse, utilization review |
| <input type="checkbox"/> _7 Certified Registered Nurse Anesthetist | <input type="checkbox"/> _18 Infection control nurse |
| <input type="checkbox"/> _8 Certified Nurse Midwife | <input type="checkbox"/> _19 Occupational health nurse |
| <input type="checkbox"/> _9 Nurse Practitioner | <input type="checkbox"/> _20 Telenursing |
| <input type="checkbox"/> _10 School Nurse | <input type="checkbox"/> _21 Researcher |
| <input type="checkbox"/> _11 Nurse Coordinator | |
| <input type="checkbox"/> _22 Other (Please describe: _____) | |

29. Approximately what percentage of your time is spent on each of the following functions during a typical week in your **principal** position?

- a. ___% Patient care and charting
- b. ___% Patient Education
- c. ___% Indirect patient/client care (consultation, planning, evaluating care)
- d. ___% Teaching, precepting or orienting students or new hires/staff (include prep time)
- e. ___% Supervision/Management
- f. ___% Administration
- g. ___% Research
- h. ___% Non-nursing tasks (housekeeping, etc)
- i. ___% Other (**Please describe:** _____)
- ___100% Total

30. Mark the clinical area in which you **most frequently** provide direct patient care in your **principal** nursing position. **(Check only one.)**

- | | | |
|---|---|---|
| <input type="checkbox"/> _1 Not involved in direct patient care | <input type="checkbox"/> _10 Hospice | <input type="checkbox"/> _18 Pediatrics |
| <input type="checkbox"/> _2 Ambulatory/outpatient | <input type="checkbox"/> _11 Intensive Care/Critical Care | <input type="checkbox"/> _19 Psychiatry/mental health |
| <input type="checkbox"/> _3 Cardiology | <input type="checkbox"/> _12 Labor and delivery | <input type="checkbox"/> _20 Rehabilitation |
| <input type="checkbox"/> _4 Community/public health | <input type="checkbox"/> _13 Medical-surgical | <input type="checkbox"/> _21 School health (K-12 or post-secondary) |
| <input type="checkbox"/> _5 Corrections | <input type="checkbox"/> _14 Mother-baby unit or normal newborn nursery | <input type="checkbox"/> _22 Step-down or transitional bed unit |
| <input type="checkbox"/> _6 Dialysis | <input type="checkbox"/> _15 Neonatal care | <input type="checkbox"/> _23 Surgery/pre-op/post-op/PACU/anesthesia |
| <input type="checkbox"/> _7 Emergency/trauma | <input type="checkbox"/> _16 Obstetrics/gynecology | <input type="checkbox"/> _24 Telemetry |
| <input type="checkbox"/> _8 Geriatrics | <input type="checkbox"/> _17 Oncology | <input type="checkbox"/> _25 Work in multiple areas and do not specialize |
| <input type="checkbox"/> _9 Home health care | <input type="checkbox"/> _26 Other (Please describe: _____) | |

31. Which of the following computerized health information systems, if any, do you use in your **principal** nursing position? **(Check all that apply.)**

- | | |
|---|--|
| <input type="checkbox"/> _a Electronic patient records | <input type="checkbox"/> _f Computerized physician orders |
| <input type="checkbox"/> _b Electronic nurse charting/nursing notes | <input type="checkbox"/> _g Barcode scanning for medication administration |
| <input type="checkbox"/> _c Electronic radiology reports | <input type="checkbox"/> _h Barcode scanning for supplies/other |
| <input type="checkbox"/> _d Electronic care plans/pathways | Computerized medication distribution (such as Pyxis) |
| <input type="checkbox"/> _e Electronic lab reporting | Electronic medication administration record |
| <input type="checkbox"/> _k Other (Please describe: _____) | |
| <input type="checkbox"/> _i None of the above | |

32. What is your experience with the information systems in your **principal** nursing position? **(Check only one.)**

- | | | | | |
|---|--|---|--|--|
| <input type="checkbox"/> _1 All systems work well | <input type="checkbox"/> _2 Systems are generally helpful, but may have some flaws | <input type="checkbox"/> _3 Systems have problems that affect my work | <input type="checkbox"/> _4 Systems interfere with my work | <input type="checkbox"/> _5 No systems in my workplace |
|---|--|---|--|--|

33. Please specify the **total annual earnings** for your **principal nursing position only**, before deductions for taxes, social security, etc. If you do not have a set annual salary, please estimate your annual earnings for last year.

\$_____ /year

34. Does your compensation from your **principal** nursing position include: **(Check all that apply.)**

- | | |
|---|---|
| <input type="checkbox"/> _a Retirement plan | <input type="checkbox"/> _c Dental insurance |
| <input type="checkbox"/> _b Personal health insurance | <input type="checkbox"/> _d Family health insurance |

35. Please rate each of the following factors of your **principal** nursing position:

	<u>Very dissatisfied</u>	<u>Dissatisfied</u>	<u>Neither satisfied nor dissatisfied</u>	<u>Satisfied</u>	<u>Very satisfied</u>	<u>Does not apply</u>
A. Your job overall	_1	_2	_3	_4	_5	_6
B. Your salary	_1	_2	_3	_4	_5	_6
C. Employee benefits	_1	_2	_3	_4	_5	_6
D. Adequacy of RN skill level where you work	_1	_2	_3	_4	_5	_6
E. Adequacy of the number of RN staff where you work	_1	_2	_3	_4	_5	_6
F. Adequacy of clerical support services	_1	_2	_3	_4	_5	_6
G. Non-nursing tasks required	_1	_2	_3	_4	_5	_6
H. Amount of paperwork required	_1	_2	_3	_4	_5	_6
I. Your workload	_1	_2	_3	_4	_5	_6
J. Physical work environment	_1	_2	_3	_4	_5	_6
K. Work schedule	_1	_2	_3	_4	_5	_6
L. Job security	_1	_2	_3	_4	_5	_6
M. Opportunities for advancement	_1	_2	_3	_4	_5	_6
N. Support from other nurses you work with	_1	_2	_3	_4	_5	_6
O. Teamwork between coworkers and yourself	_1	_2	_3	_4	_5	_6
P. Leadership from your nursing administration	_1	_2	_3	_4	_5	_6
Q. Relations with physicians	_1	_2	_3	_4	_5	_6
R. Relations with other non-nursing staff	_1	_2	_3	_4	_5	_6
S. Relations with agency or registry nurses	_1	_2	_3	_4	_5	_6
T. Interaction with patients	_1	_2	_3	_4	_5	_6
U. Time available for patient education	_1	_2	_3	_4	_5	_6
V. Involvement in policy or management decisions	_1	_2	_3	_4	_5	_6
W. Opportunities to use my skills	_1	_2	_3	_4	_5	_6
X. Opportunities to learn new skills	_1	_2	_3	_4	_5	_6
Y. Quality of preceptor and mentor programs	_1	_2	_3	_4	_5	_6
Z. Employer-supported educational opportunities	_1	_2	_3	_4	_5	_6
AA. Quality of patient care where you work	_1	_2	_3	_4	_5	_6

continue on the next page

PLEASE SKIP TO PAGE 12, SECTION D

SECTION C: FOR PERSONS NOT EMPLOYED IN REGISTERED NURSING

The purpose of this section is to learn why persons are not employed in nursing or have left nursing practice.

46. What was the last year you worked for pay as a registered nurse? __ __ __ __

47. How important were each of the following factors in your decision to leave nursing?

	<u>Not at all important</u>	<u>Somewhat important</u>	<u>Important</u>	<u>Very important</u>	<u>Does not apply</u>
A. Retired	_1	_2	_3	_4	_5
B. Childcare responsibilities	_1	_2	_3	_4	_5
C. Other family responsibilities	_1	_2	_3	_4	_5
D. Moving to a different area	_1	_2	_3	_4	_5
E. Stress on the job	_1	_2	_3	_4	_5
F. Job-related illness/injury	_1	_2	_3	_4	_5
G. Non-job-related illness/injury	_1	_2	_3	_4	_5
H. Salary	_1	_2	_3	_4	_5
I. Dissatisfied with benefits	_1	_2	_3	_4	_5
J. Other dissatisfaction with your job	_1	_2	_3	_4	_5
K. Dissatisfaction with the nursing profession	_1	_2	_3	_4	_5
L. Travel	_1	_2	_3	_4	_5
M. Wanted to try another occupation	_1	_2	_3	_4	_5
N. Inconvenient schedules in nursing jobs	_1	_2	_3	_4	_5
O. Difficult to find a nursing position	_1	_2	_3	_4	_5
P. Laid off	_1	_2	_3	_4	_5
Q. Other	_1	_2	_3	_4	_5

(Specify: _____)

48. Which of the following best describes your current intentions regarding work in nursing?

_1 Currently seeking employment in nursing → **Skip to the next page, Section D.**

_2 Plan to return to nursing in the future

48a. How soon? _1 Less than one year

_2 1-2 years

_3 3-4 years

_4 5 or more years

Skip to the next page, Section D.

_3 Retired

_4 Definitely will not return to nursing, but not retired

_5 Undecided at this time (**Continue to Question #49.**)

Skip to the next page, Section D.



49. Would any of the following factors affect your decision to return to nursing?

	<u>Not at all important</u>	<u>Somewhat important</u>	<u>Important</u>	<u>Very important</u>	<u>Does not apply</u>
A. Affordable childcare at or near work	_1	_2	_3	_4	_5
B. Flexible work hours	_1	_2	_3	_4	_5
C. Modified physical requirements of job	_1	_2	_3	_4	_5
D. Higher nursing salary	_1	_2	_3	_4	_5
E. Better retirement benefits	_1	_2	_3	_4	_5
F. Better support from nursing management	_1	_2	_3	_4	_5
G. More support from other nurses	_1	_2	_3	_4	_5
H. Better nurse to patient ratios	_1	_2	_3	_4	_5
I. Adequate support staff for non-nursing tasks	_1	_2	_3	_4	_5
J. Availability of re-entry programs/mentoring	_1	_2	_3	_4	_5
K. Improvement in my health status	_1	_2	_3	_4	_5
L. Other	_1	_2	_3	_4	_5

(Specify: _____)

SECTION D: EMPLOYMENT OUTSIDE NURSING

50. Are you currently employed in a non-nursing position (that does not require a Registered Nursing license)?

Yes

No → **Skip to the next page, Section E.**



51. Does your position utilize any of your nursing knowledge? Yes No

52. Please indicate the field(s) of your work position(s) outside of nursing. **(Check all that apply.)**

Health related services outside of nursing

Retail sales and services

Education, elementary and secondary

Financial, accounting, and insurance services

Consulting organization

Other **(Please specify: _____)**

53. Please indicate the following for work positions **outside of nursing.**

Work positions outside of nursing	Hours worked per week	Estimated <u>pre-tax</u> annual income
Position #1 Title: _____ a1	_____ Hrs/week a2	_____ \$/year a3
Position #2 Title: _____ b1	_____ Hrs/week b2	_____ \$/year b3
Position #3 Title: _____ c1	_____ Hrs/week c2	_____ \$/year c3

SECTION E: CHANGES IN THE PAST YEAR

54. Has your employment status changed during the past year? **(Check all that apply.)**

- _a No change in employment status **Skip to the next page, Section F.**
- _b Increased hours
- _c Decreased hours
- _d I was not working in registered nursing but am now in a registered nursing job
- _e I was working in registered nursing but left registered nursing
- _f New position with the same employer
- _g Same position with a different employer
- _h New position with a different employer
- _i Other **(Please specify)** _____

55. How important were each of the following factors in your change in employment during the past year? **(Check all that apply.)**

	<u>Not at all</u> <u>important</u>	<u>Somewhat</u> <u>important</u>	<u>Important</u>	<u>Very</u> <u>important</u>	<u>Does not</u> <u>apply</u>
M. Retired	_1	_2	_3	_4	_5
N. Childcare responsibilities	_1	_2	_3	_4	_5
O. Other family responsibilities	_1	_2	_3	_4	_5
P. Salary	_1	_2	_3	_4	_5
Q. Laid off	_1	_2	_3	_4	_5
R. Change in spouse/partner work situation	_1	_2	_3	_4	_5
S. Change in financial status	_1	_2	_3	_4	_5
T. Relocation/moved to a different area	_1	_2	_3	_4	_5
U. Promotion/career advancement	_1	_2	_3	_4	_5
V. Change in my health status	_1	_2	_3	_4	_5
W. Wanted to work more convenient hours	_1	_2	_3	_4	_5
X. Dissatisfaction with previous position	_1	_2	_3	_4	_5
M. Other	_1	_2	_3	_4	_5

(Please specify: _____)

SECTION F: RESIDENCE OUTSIDE CALIFORNIA

56. Do you reside primarily outside California? ₁ Yes ₂ No **Skip to the next page, Section G.**



57. If you reside outside California, please check any of the following that apply regarding the **past 12 months. (Check all that apply.)**

- _a Worked as an RN in California for temporary agency/registry
- _b Worked as an RN for California employer in telenursing
- _c Worked as an RN for out-of-state telenursing employer with California clients
- _d Lived in border state, commuted to California for an RN job
- _e Worked as an RN in California but have since moved out
- _f Did not work as an RN in California

58. How many months did you work in California as an RN in the past 12 months?

_____ months or ₀ Did not work in CA

59. If you reside outside California, do you plan to work as an RN in California in the **next five years? (Check all that apply.)**

- _a **Yes**, I plan to travel to California intermittently to work as an RN
- _b **Yes**, I plan to relocate to California and work as an RN
- _c **Yes**, I plan to perform telenursing for a California employer
- _d **Yes**, I plan to perform telenursing for out-of-state employer with California clients
- _e **Yes**, I plan to commute from a border state
- _f **No**, I plan to keep my California license active but do not plan to practice in California
- _g **No**, I plan to let my California license lapse

69. Which category best describes how much income your **total household** received last year? This is the before-tax income of **all** persons living in your household:

- | | | | | | |
|-----------------------------|--------------------|-----------------------------|---------------------|------------------------------|---------------------|
| <input type="checkbox"/> _1 | Less than \$30,000 | <input type="checkbox"/> _4 | \$60,000 - 74,999 | <input type="checkbox"/> _7 | \$125,000 - 149,999 |
| <input type="checkbox"/> _2 | \$30,000 - 44,999 | <input type="checkbox"/> _5 | \$75,000 - 99,999 | <input type="checkbox"/> _8 | \$150,000 - 174,999 |
| <input type="checkbox"/> _3 | \$45,000 - 59,999 | <input type="checkbox"/> _6 | \$100,000 - 124,999 | <input type="checkbox"/> _9 | \$175,000 - 199,999 |
| | | | | <input type="checkbox"/> _10 | \$200,000 or more |

70. Approximately what percentage of your **total household** income comes from your nursing job(s)?

- | | | | | | | | |
|-----------------------------|-------|-----------------------------|--------|-----------------------------|--------|-----------------------------|------|
| <input type="checkbox"/> _1 | None | <input type="checkbox"/> _3 | 20-39% | <input type="checkbox"/> _5 | 60-79% | <input type="checkbox"/> _7 | 100% |
| <input type="checkbox"/> _2 | 1-19% | <input type="checkbox"/> _4 | 40-59% | <input type="checkbox"/> _6 | 80-99% | | |

Thank you for completing the survey.

Please return the questionnaire in the postage-paid envelope provided

If you have additional thoughts or ideas about the nursing profession in California, please write them below. You may include your email address if you would like an email notification when the report on this survey is published.

Comments:

Yes, I would like to be notified when the report is published.

My email address is: _____

California Board of Registered Nursing

Survey of Registered Nurses 2010

Conducted for the Board of Registered Nursing by

School of Nursing and Center for the Health Professions,
University of California, San Francisco

Here's how to fill out the Survey:

- Use pen or pencil to complete the survey.
- Please try to answer each question.
- Most questions can be answered by checking a box or writing a number or a few words on a line.
- Never check more than one box, except when it says **Check all that apply**.
- Sometimes we ask you to skip one or more questions. An arrow will tell you what question to answer next, like this:

_1 YES
_2 NO **SKIP TO Question #14**

- If none of the boxes is just right for you, please check the one that fits you the best. Feel free to add a note of explanation. If you are uncomfortable answering a particular question, feel free to skip it and continue with the survey.
- If you need help with the survey, call toll-free (877) 276-8277.
- **REMEMBER:** An online version of this survey is available. Follow the instructions in the cover letter that came with this questionnaire to access the online survey.

After you complete the survey, please mail it back to us in the enclosed envelope. No stamps are needed. Thank you for your prompt response.

**CALIFORNIA BOARD OF REGISTERED NURSING
2010 NURSE SURVEY**

SECTION A: RN LICENSE STATUS & EMPLOYMENT

1. What is the status of your RN license **in California**?
- _1 Active → **Skip to Question #6 below.**
- _2 Inactive (paid license renewal fee but did not complete continuing education)
- _3 Lapsed (did not pay renewal fee)
2. Why did you allow your **California RN** license to become inactive or lapse?
(Check all that apply.)
- | | |
|---|---|
| <input type="checkbox"/> _a Retired | <input type="checkbox"/> _d Moved from California to another state/country |
| <input type="checkbox"/> _b Do not plan to work as an RN in California now, but might reactivate my license later | <input type="checkbox"/> _e Do not work in California now, but want to maintain an inactive license because my first RN license was in California |
| <input type="checkbox"/> _c Do not plan to work as an RN anymore | <input type="checkbox"/> _f Other (Please specify: _____) |
3. How long ago did you let your California license become inactive or lapse?
- _____ years and _____ months
4. How long ago did you last work as a registered nurse **in California**?
- _____ years and _____ months
5. Do you plan to work as an RN in California in the next five years? **(Check all that apply.)**
- | | | |
|---|--|---|
| <input type="checkbox"/> _a No , I do not plan to practice in California | <input type="checkbox"/> _c Yes , I live in California and plan to work as an RN | <input type="checkbox"/> _e Yes , I plan to relocate to California and work as an RN |
| <input type="checkbox"/> _b Yes , I plan to travel to California intermittently to work as an RN | <input type="checkbox"/> _d Yes , I plan to perform telenursing with California clients | <input type="checkbox"/> _f Yes , I plan to commute regularly from a border state |
6. In how many states, **other than California**, do you hold an **active** RN license?
- _____ # states **or** _0 No other states
7. Where is your primary residence? **(Check only one.)**
- | | | |
|--|---|---|
| <input type="checkbox"/> _1 California | <input type="checkbox"/> _2 Other state | <input type="checkbox"/> _3 Other country |
| (Specify: _____) | | (Specify: _____) |
8. Are you currently employed in registered nursing? A registered nursing position is a position that requires that you have an RN license, such as patient care, health professions education, etc.
- _2 **No**
- _1 **Yes**, working full or part-time in nursing
- Continue to Question #9 on the next page.** **Skip to page 4, Section B.** →



9. What was the last year you worked for pay as a registered nurse? ____ ____ ____ ____

10. How important was each of the following factors in your decision to leave nursing?

	Not at all important	Somewhat important	Important	Very important	Does not apply
A. Retired	_1	_2	_3	_4	_5
B. Childcare responsibilities	_1	_2	_3	_4	_5
C. Other family responsibilities	_1	_2	_3	_4	_5
D. Moved to a different area	_1	_2	_3	_4	_5
E. Stress on the job	_1	_2	_3	_4	_5
F. Job-related illness or injury	_1	_2	_3	_4	_5
G. Non-job-related illness or injury	_1	_2	_3	_4	_5
H. Salary	_1	_2	_3	_4	_5
I. Dissatisfied with benefits	_1	_2	_3	_4	_5
J. Other dissatisfaction with your job	_1	_2	_3	_4	_5
K. Dissatisfaction with the nursing profession	_1	_2	_3	_4	_5
L. Travel	_1	_2	_3	_4	_5
M. Wanted to try another occupation	_1	_2	_3	_4	_5
N. Inconvenient schedules in nursing jobs	_1	_2	_3	_4	_5
O. Better salaries available in other jobs	_1	_2	_3	_4	_5
P. Other job or profession is more rewarding professionally	_1	_2	_3	_4	_5
Q. Difficult to find a nursing position	_1	_2	_3	_4	_5
R. Nursing skills are out of date	_1	_2	_3	_4	_5
S. Laid off	_1	_2	_3	_4	_5
T. Other (Specify: _____)	_1	_2	_3	_4	_5

11. Are you currently employed in a non-nursing position (that does not require a Registered Nursing license)?

_1 Yes

_2 No

Continue to Question #12.

Skip to Question #15 on the next page ➔



12. Does your position utilize any of your nursing knowledge? _1 Yes _2 No

13. Please indicate the field(s) of your work position(s) outside of nursing. **(Check all that apply.)**

_a Health related services outside of nursing

_d Financial, accounting, and insurance services

_b Retail sales and services

_e Consulting organization

_c Education, elementary and secondary

_f Other **(Specify: _____)**

14. Please indicate the following for work positions **outside of nursing**

Work positions outside of nursing	Hours worked per week	Estimated <u>pre-tax</u> annual income
Position #1 Title: _____ (a1)	_____ Hrs/week (a2)	_____ \$/year (a3)
Position #2 Title: _____ (b1)	_____ Hrs/week (b2)	_____ \$/year (b3)
Position #3 Title: _____ (c1)	_____ Hrs/week (c2)	_____ \$/year (c3)

15. Which of the following best describes your current intentions regarding work in nursing?

1 Currently seeking employment in nursing —→ **Skip to the next page, Section B.**

2 Plan to return to nursing in the future

15a. How soon? 1 Less than one year

2 1-2 years

3 3-4 years

4 5 or more years

Skip to the next page, Section B.

3 Retired

4 Definitely will not return to nursing, but not retired

5 Undecided at this time

Skip to the next page, Section B.

(Continue to Question #16.)

16. How important would each of the following be in your decision to return to nursing?

	<u>Not at all</u> <u>important</u>	<u>Somewhat</u> <u>important</u>	<u>Important</u>	<u>Very</u> <u>important</u>	<u>Does not</u> <u>apply</u>
A. Affordable childcare at or near work	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
B. Flexible work hours	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
C. Modified physical requirements of job	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
D. Higher nursing salary	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
E. Better retirement benefits	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
F. Better support from nursing management	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
G. More support from other nurses	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
H. Better nurse to patient ratios	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
I. Adequate support staff for non-nursing tasks	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
J. Availability of re-entry programs/mentoring	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
K. Improvement in my health status	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

SECTION B: CHANGES IN THE PAST YEAR

17. Has your employment status changed during the past year? **(Check all that apply.)**

- a No change in employment status → **Skip to the next page, Section C.**
- b Increased hours
- c Decreased hours
- d I was not working in registered nursing but am now in a registered nursing job
- e I was working in registered nursing but left registered nursing
- f New position with the same employer
- g Same position with a different employer
- h New position with a different employer
- i Other **(Please specify)** _____

18. How important were each of the following factors in your change in employment during the past year? **(Check all that apply.)**

	Not at all <u>important</u>	Somewhat <u>important</u>	<u>Important</u>	Very <u>important</u>	Does not <u>apply</u>
Y. Retired	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>
Z. Childcare responsibilities	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>
AA. Other family responsibilities	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>
BB. Salary	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>
CC. Laid off	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>
DD. Change in spouse/partner work situation	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>
EE. Change in financial status	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>
FF. Relocation/moved to a different area	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>
GG. Promotion/career advancement	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>
HH. Change in my health status	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>
II. Wanted to work more convenient hours	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>
JJ. Dissatisfaction with previous position	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>
M. Other	<u>_1</u>	<u>_2</u>	<u>_3</u>	<u>_4</u>	<u>_5</u>

(Please specify: _____)

SECTION C: EDUCATION AND LICENSURE INFORMATION

19. What was the highest level of education you completed **prior** to your basic RN nursing education?

- | | | |
|---|--|---|
| <input type="checkbox"/> _1 Less than a high school diploma | <input type="checkbox"/> _3 Associate degree | <input type="checkbox"/> _5 Master's degree |
| <input type="checkbox"/> _2 High School diploma | <input type="checkbox"/> _4 Baccalaureate degree | <input type="checkbox"/> _6 Doctoral degree |

20. **Immediately prior** to starting your basic RN nursing education, were you employed in a health occupation? (**Check only one.**)

- | | | |
|---|--|--|
| <input type="checkbox"/> _0 No | <input type="checkbox"/> _3 Yes, nursing aide/assistant | <input type="checkbox"/> _5 Yes, medical assistant |
| <input type="checkbox"/> _1 Yes, clerical or administrative in healthcare | <input type="checkbox"/> _4 Yes, other health technician/therapist | <input type="checkbox"/> _6 Yes, licensed practical/vocational nurse |
| <input type="checkbox"/> _2 Yes, military medical corps | <input type="checkbox"/> _7 Yes, other (Please specify: _____) | |

21. In what kind of program did you receive your initial, pre-licensure RN education that qualified you for RN licensure in the United States?

- | | | |
|--|--|--|
| <input type="checkbox"/> _1 Diploma program | <input type="checkbox"/> _4 Baccalaureate program | <input type="checkbox"/> _6 Master's program |
| <input type="checkbox"/> _2 Associate degree program | <input type="checkbox"/> _5 Entry-level Master's program | <input type="checkbox"/> _7 Doctoral program |
| <input type="checkbox"/> _3 30-unit option program (LVN to RN) | | |

22. In what state or country did you complete your pre-licensure RN education that qualified you for RN licensure in the United States?

- US:** ____ 2-letter state code **OR** Other country: _1 Australia _4 England _7 Korea
_2 Canada _5 India _8 Philippines
_3 China _6 Ireland
_9 Other (**Please specify:** _____)

23. In what year did you graduate from that program? ____ _

24. In what year were you first licensed as an RN? ____ _

25. In what state/country were you first licensed as an RN?

- US:** ____ 2-letter state code **OR** Other country: _1 Australia _4 England _7 Korea
_2 Canada _5 India _8 Philippines
_3 China _6 Ireland
_9 Other (**Please specify:** _____)

26. In what year were you first licensed as an RN **in California**? ____ _

27. Since graduating from the basic RN nursing program that qualified you for licensure in the U.S., have you earned any additional degrees? In what year did you earn that degree? **(Check all that apply.)**

Degree		Year	Degree		Year
<input type="checkbox"/> _a	No additional degrees earned	↓	↓		
<input type="checkbox"/> _b	Associate degree in Nursing (ADN)		<input type="checkbox"/> _f	Other Associate degree (non-nursing)	
<input type="checkbox"/> _c	Baccalaureate of Science in Nursing (BSN)		<input type="checkbox"/> _g	Other Baccalaureate degree (non-nursing)	
<input type="checkbox"/> _d	Master's degree in Nursing (MSN)		<input type="checkbox"/> _h	Other Master's degree (non-nursing)	
<input type="checkbox"/> _e	Doctorate in Nursing (PhD, DNSc, DNP, etc.)		<input type="checkbox"/> _i	Other Doctoral degree (non-nursing)	

28. Which of the following certifications or listings, if any, do you have with the California Board of Registered Nursing since your initial licensure as an RN? **(Check all that apply.)**

- _a Nurse Anesthetist _c Nurse Midwife _e Nurse Practitioner
_b Public Health Nurse _d Psychiatric/Mental Health Nurse _f Clinical Nurse Specialist
_g None

29. Since completing your initial RN education, how many years and months have you worked in a job that requires a Registered Nursing license? Exclude years since graduation during which you did not work as an RN.

_____ years and _____ months

30. Are you currently enrolled in a nursing degree program or specialty certification program?

_1 Yes _2 No

Skip to the next page, Section D.



31. What is your degree objective?

- _1 Associate degree _3 Master's degree _5 Doctoral degree
_2 Baccalaureate degree _4 Non-degree specialty certification program

SECTION D: DEMOGRAPHIC INFORMATION

32. Gender _1 Female _2 Male

33. Year of birth 19 __ __

34. In what country were you born? _____

35. Marital status

_1 Never married _2 Currently married or in domestic partner relationship _3 Separated or divorced _4 Widowed

36. What is your racial/ethnic background (select the **one** with which you most strongly identify)?

_1 White, not Hispanic or Latino _4 Filipino _7 Native Hawaiian or other Pacific Islander
_2 Black or African American _5 Asian Indian _8 Native American or Alaskan
_3 Hispanic or Latino _6 Asian, not Filipino or Indian _9 Mixed race/ethnicity
_10 Other (**Please describe:** _____)

37. Other than English, what languages do you speak fluently? (**Check all that apply.**)

_a Spanish _d Tagalog/other Filipino dialect _g Mandarin
_b Korean _e Hindi/Urdu/Punjabi/other South Asian language _h Cantonese
_c Vietnamese _f French _i German
_j Other (**Please describe:** _____)

38. Do you have children living at home with you? _1 Yes _2 No

If Yes, **how many** are:

a) 0-2 years ____ b) 3-5 years ____ c) 6-12 years ____ d) 13-18 years ____ e) 19+ years ____

39. Home Zip Code: _____ **or** other country (**Please specify:** _____)

40. Have any of your relatives been an RN, or are any an RN now? **(Check all that apply.)**

_a No RNs in my family

_b Mother/Father

_d Grandparent

_f Sister/Brother

_c Aunt/Uncle

_e Cousin

_g Child

41. Which category best describes your total income before taxes **from nursing** last year?

_1 None

_5 \$30,000 – 39,999

_9 \$70,000 – 79,999

_2 \$1- 9,999

_6 \$40,000 – 49,999

_10 \$80,000 – 89,999

_3 \$10,000 - 19,999

_7 \$50,000 – 59,999

_11 \$90,000 – 99,999

_4 \$20,000 - 29,999

_8 \$60,000 – 69,999

_12 \$100,000 – 124,999

_13 \$125,000 or more

42. Which category best describes how much income your **total household** received last year? This is the before-tax income of **all** persons living in your household:

_1 Less than \$30,000

_4 \$60,000 - 74,999

_7 \$125,000 – 149,999

_2 \$30,000 - 44,999

_5 \$75,000 - 99,999

_8 \$150,000 – 174,999

_3 \$45,000 - 59,999

_6 \$100,000 – 124,999

_9 \$175,000 – 199,999

_10 \$200,000 or more

Thank you for completing the survey.
Please return the questionnaire in the postage-paid envelope provided.

If you have additional thoughts or ideas about the nursing profession in California, please write them in the comments section below. You may include your email address if you would like an email notification when the report on this survey is published.

Comments _____

Yes, I would like to be notified when the report is published.

My email address is:
