

California Board of Registered Nursing

2014 Survey of Registered Nurses



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Survey of Registered Nurses in California, 2014

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SURVEY OF REGISTERED NURSES IN CALIFORNIA, 2014

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Executive Summary

The 2014 Survey of California Registered Nurses is the ninth in a series of surveys designed to describe the population of registered nurses (RNs) licensed in California and to examine changes in this population over time. Other studies were completed in 1990, 1993, 1997, 2004, 2006, 2008, 2010, and 2012. The 2014 survey was mailed to 10,000 RNs with active California licenses and addresses in the United States. The survey response rate was 55.7 percent, yielding information for about 5,573 nurses.

Demographics

California has a large, diverse workforce of RNs. In 2014, 47.6 percent of California's actively-licensed RNs were 50 years or older. Between 1990 and 2004, the average age of working RNs residing in California rose from 42.9 to 47.6 years, and it has slightly declined since then to 46.7 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 2014, men made up 11.8 percent of employed California RNs. The ethnic diversity of California's working nurses has changed since 1990; the share of white nurses declined from 77.2 percent in 1990 to 51.6 percent in 2014. The most highly represented non-White ethnic groups in California are Filipinos (20.3%), Hispanics (7.2%), and non-Filipino Asians (8.5%). Whites do not comprise the majority of the nursing population under 45 years old; only 44.7 percent of RNs under 35 years and 38.3 percent of RNs 35-44 years are White.

Nursing education

Diploma programs continue to decline as a source of basic nursing education for California registered nurses. In 1990, the share of RNs whose initial education was in a diploma program was 32.3 percent and by 2014, it had dropped to 10.3 percent. The share that entered the profession with a baccalaureate or graduate degree rose from 28.7 percent in 1990 to 43 percent in 2014. In 2014, the majority (61.8%) of California's working RNs were educated in California, and 20.9 percent 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 2014, the average age was 27.7 years. Many nurses increase their education level after licensure; between 2012 and 2014, the overall share of working RNs who reported they had a baccalaureate or graduate degree in nursing increased from 53.2 percent to 61.5 percent. Nearly 17 percent reported they have a master's or doctoral degree in 2014.

Employment

About 83 percent of nurses with active licenses and California addresses were working in nursing positions at the time of the survey; this share has varied between 82.6 percent and 89.3 percent since 1990. Employment rates are associated with age, with the highest employment rates among those 45 to 49 years old (92.8%) and 50 to 54 years old (90.4%). In 2010, the percent of nurses under 30 who were working dropped considerably compared with prior years, and that decline continued between 2010 and 2014. In 2004, 96.1 percent, and in 2008, 97.7 percent of nurses under age 30 reported working. In 2014, only 89.5 percent of nurses under 30 years reported working in a nursing position. In 2014, 83.1 percent of nurses 55 to 59 years old who resided in California were working in nursing positions, as compared with 85.9 percent in 2012. The employment rate for nurses 60 to 64 years rose from 75.5 percent in 2008 to 81.4 percent in 2010, and dropped to 78 percent in 2014. There has been comparatively little change in the employment rates of RNs 45 to 54 years old between 2004 and 2014.

The average number of hours worked per week by RNs changed little between 1990 and 2014, ranging from a low of 35.2 in 2006 to a high of 36.5 hours in 2014 and 2008. Nearly 65 percent of RNs said they work less than one hour per week of overtime or no overtime, in their principal nursing position, while 9.2 percent said they work more than 8 hours of overtime per week.

Job titles and work settings

Just over half of working RNs report a primary job title of “staff nurse” or “direct care provider” (50.8%), and an additional 16.6 percent indicate they have a dual charge nurse/staff nurse role. The percentage of registered nurses employed in acute hospital settings declined from 67.9 percent in 1990 to 60.2 percent in 1997, and rose to 66.8 percent in 2014. There has been growth in the share of RNs who work in hospital-based ambulatory care departments, increasing from 4.8 percent of all nurses in 2006 to 10.1 percent in 2014. Other common workplaces of RNs include ambulatory care settings, such as clinics and outpatient surgery centers (5.4%), nursing homes, extended care facilities, or skilled nursing facilities (8.5%) and home health agencies (3.7%).

RNs were asked about employment status changes in the past year, regardless of current employment status. Slightly more than one-quarter (25.4%) of RNs residing in California reported a change in their work status, employer, or position over the prior year, and 31.9 percent changed how much they work. The most common change in work status, employer, or position was obtaining a new position with the same employer (27.4%). Another 27 percent reported they had a new position with a new employer. Among RNs who changed their work hours, 28.1 percent increased their hours of work by choice, and 28.7 percent chose to decrease their hours. Nearly thirteen percent indicated they were asked or forced by their employer to reduce their hours, while 13.6 percent experienced an employer-imposed increase in hours.

Slightly under 15 percent of RNs who reside in California reported that they held more than one nursing position in 2014 and, of these RNs, 25.2 percent reported holding more than one additional position. In comparison, in 1997 and 2004, a greater share of RNs reported holding more than one nursing position (23.6% and 21.9%, respectively), but a smaller share of those held more than one additional nursing position (16.6% in 1997 and 15.2 in 2004). Nearly 39 percent of California resident RNs with secondary positions work as hospital staff for at least one of their additional positions. Fourteen percent are engaged in ambulatory care, school health, or occupational health and another 12 percent are engaged in teaching health professions or nursing students. Slightly more than 16 percent were employed through a temporary agency for at least one of their additional positions, 1.9 percent were employed by a traveling agency, and 12.3 percent were self-employed.

Slightly more than two percent of RNs who reside in California work for a temporary agency or registry for their primary or secondary nursing jobs, and less than one percent work for a traveling agency. For nurses who reside in California, control of their schedule was the dominant reason for holding a temporary or traveling position (40.2%), followed by supplemental income (35%). Other common reasons for temporary and traveling work were wage (27.8%), to maintain skills or get experience (25%), and to have control of work location (19.7%). Over 14 percent said they were doing agency/registry work while waiting for a desirable permanent position, and another 17.5 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.

Nurses' earnings and benefits

Nurse earnings rose modestly between 1993 and 1997, grew rapidly between 1997 and 2008, returned to modest growth between 2008 and 2010, and then have increased small amounts each year between 2010 and 2014. In 1990, average annual income from nursing was \$31,504 for California residents; in 2004, it was \$59,937, and by 2008 it had reached \$81,428. Income growth was slower between 2008 and 2014, reaching \$93,911. About 77 percent of nurses received personal retirement benefits, dental benefits, and personal health insurance in 2014. Slightly more than 63 percent received health insurance for their families. Nearly 40 percent received tuition reimbursement benefits, and 18 percent received paid time off to pursue education.

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 2014 were interaction with patients, the nursing profession overall, feeling that work is meaningful, job overall, and relations with non-nursing staff. The five lowest rated aspects of nursing in 2014 were involvement in

policy and management decisions, amount of paperwork required, non-nursing tasks required, employer-supported educational/training programs, and quality of preceptor/mentor programs.

Future plans of working registered nurses

Since 1993, over half of respondents have indicated that they plan to work approximately as much as they do now in the next five years. Between 1993 and 2014, this share dropped from 60.1 to 53 percent. In 1993, the share planning to work at the same level was 60.1 percent, but declined to 53.1 percent by 2006. After 2006, the share planning to work at a stable rate increased again to 60.2 percent in 2010, and more recently has dropped to 53 percent in 2014. In 2014, 11.2 percent planned to increase their hours of nursing work. Nearly 20 percent planned to reduce their hours of nursing work; this share rose between 2010 (15.2%) and 2014. Starting with the 2004 survey, about 3 percent of nurses has reported that they plan to leave nursing entirely, but not retire. In 2014, 13.2 percent of RNs indicated they plan to retire in the next five years. Five percent plan to retire within 2 years.

Nurses residing outside California

In 2014, nearly 14 percent (53,407) of RNs with active California licenses lived in other states. In 2014, 14 percent indicated they had worked in California in the prior year, but had since relocated out of state. Slightly more than 14 percent had worked in California for a temporary or traveling agency. Out-of-state nurses who worked for a temporary or traveling agency worked in California an average of 3.7 months in the previous year, for 35.8 hours per week. Nearly 13 percent worked in telenursing, either for a California employer or with California patients. Slightly more than 3 percent commute to California from a bordering state. For nurses who were living outside California in 2014, 26.9 percent reported that they plan to travel to California to work as an RN intermittently over the next five years, and 22 percent plan to relocate to California to work in nursing.

Nurses who do not work in nursing

Nearly 17 percent of RNs who lived in California were not employed in nursing in 2014. The share of nurses working in non-nursing jobs was 26.3 percent. Of the nurses with active licenses who were not working in the profession at the time of the survey, 19.4 percent reported that retirement was an important or very important factor in their decision not to work in nursing in 2014 as compared with 30.5 percent in 2004. Among RNs under 55 years old, the most important reasons for not working in nursing were difficulty finding a desired nursing position (43.5%), childcare responsibilities (42.0%) and other family responsibilities (36.1%). Nearly 40 percent said it was difficult to find any nursing position. In 2014, 15.9 percent of not working nurses were currently seeking RN work.

Summary

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.

The employment settings and job titles of RNs have been relatively stable, but there has been notable growth in the share of RNs working in hospital-based ambulatory care departments, and decreases in the share working in hospital acute care units. This may be related to incentives provided by the Affordable Care Act to increase utilization of primary and ambulatory care services in order to reduce expensive hospitalizations.

The registered nursing labor market in California is beginning to show signs of recovery from the economic recession, but there has been a decline in the share of RNs employed in nursing since 2010, from 87.4 percent to 83.4 percent in 2014. This decline has been most notable among nurses under 40 years old, and many of these unemployed nurses indicated that they have not been able to find a job in nursing. At the same time, a growing share of older RNs indicates they plan to retire in the near future. As the economy continues to improve, it is likely that older nurses will reduce their employment. The high share of young RNs who are not employed is problematic, as California has spent considerable money on increasing school enrollments to abate the nursing

shortage. It is essential that recently-graduated RNs find employment opportunities so they are prepared to take on the roles of retiring RNs.

Chapter 1. Introduction and Methodology

This study of registered nurses with California licenses is the ninth 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, and every two years since 2004. The Board of Registered Nursing (BRN) has commissioned various organizations to conduct and analyze the surveys; surveys from 2006 onwards 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 2012 and 2014 studies consisted of a survey sent to RNs with active California licenses, with both California and out-of-state addresses. The 2004, 2006, 2008 and 2010 studies consisted of two surveys, one on RNs with active California licenses, and another for RNs whose California licenses had become inactive or lapsed in the two years prior to the survey. 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 measurement and analysis of trends in California's nursing workforce over time. As in prior years, the 2014 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 5 of this report.

Survey Development

UCSF worked with the BRN to update the survey questionnaires for 2014. Specifically, the survey update included the following steps:

- A review of past surveys conducted for the BRN, particularly the survey conducted in 2012;
- 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, including the BRN Nursing Workforce Advisory Committee;
- Development of formatted survey instruments;
- Testing of the survey instruments by nurses recruited by UCSF, the Nursing Workforce Advisory Committee, and the BRN;
- Development of the web-based surveys;
- 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

A cover letter from the Board of Registered Nursing was mailed to all RNs selected for the survey, which included information about how to complete the survey online, the survey, and a postage-paid return envelope. The survey was mailed on April 4, 2014. A reminder postcard was sent on April 18, and the questionnaire was re-

mailed on May 14 to non-respondents. Reminder postcards were sent on May 28 and June 11, 2014. Data collection ended on September 4, 2014.

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 re-mailing 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. 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 18.2 percent of the respondents completed the survey online, an increase of 1.1 percentage points from 2012.

The RN Sample

Selection of the RN Sample

The survey was sent to 10,000 active RNs with addresses in California and other states. The Board of Registered Nursing created a file of all RNs on February 26, 2014, 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 385,853 nurses with active licenses residing in the United States. Nurses were excluded from the survey if their birthdate was missing, indicated an age of younger than 20, or indicated an age greater than 100; this affected 13 cases. Thus, the working file from which nurses were sampled contained 385,840 RNs.

In order to obtain a survey dataset that could be used to examine the characteristics of nurses in different regions of California, we organized the eligible population into nine regions, and selected the sample to be surveyed based on target numbers for each region. Eight of the regions were agglomerations of California counties, and the ninth region included all other states. This type of sampling strategy, called a stratified 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 was planned to be 8,000 nurses. Our goal was to have at least 460 respondents per region. To reach this goal, we assumed that the response rate for each region would be the same as for the 2012 survey, thus requiring at least 720 surveys be mailed to nurses in each region. Some regions had lower response rates in 2012, and thus more surveys were allocated to those regions to obtain the targeted response of at least 460 nurses.

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 that met the needs of the Moore Foundation required the addition of four regions to the sampling strata. Thus, 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.

Response Rates

By the end of the data collection period (September 4, 2014), questionnaires were received from 5,599 of the actively licensed registered nurses to whom the survey packets were mailed. A total of 26 cases were determined ineligible for the survey due to being returned for lack of a current mailing address, reported death, or refusal to participate. Thus, the total number of usable responses from the 2014 survey was 5,573 of the 9,812 eligible nurses, which represents a 57 percent response rate for the eligible population and a 55.7 percent response rate when considering all surveys mailed. Table 1.2 details the survey response outcomes for all eight surveys (1990-2014).

Representativeness of Active RN Respondents

Survey responses were matched to the original sampling 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, Central Coast, and Nevada and Amador counties were more likely to respond to the survey, while the lowest response was from nurses residing in the Los Angeles area, and Sutter and Yuba counties. 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 20.5 percent of nurses under the age of 25 years and 38.3 percent of those 25 to 34 years completing the survey. In contrast, about two-thirds 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 2014 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 the sample file, for each region and each age group. We used Stata MP 13, 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.

Precision of Estimates

The size of the sample surveyed and the 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. 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 5,573 nurses with active licenses may vary from the true population values by +/-1.3 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 should be within a few percentage points of the true values.

Table 1.1. California’s nursing workforce, the survey sample, survey respondents, and the response rate, by region, 2014

		Actively Licensed RNs		Survey Sample		Survey Respondents		Response rate
Region	Counties	#	%	#	%	#	%	%
North of Sacramento, except Nevada County	Butte, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Plumas, Shasta, Siskiyou, Sierra, Tehama, Trinity	9,074	2.4%	720	7.2%	435	7.8%	60.4%
Sacramento, except Sutter and Yuba	El Dorado, Placer, Sacramento, Yolo	22,685	5.9%	1,711	17.1%	1,016	18.2%	59.4%
5-County San Francisco Bay Area	Alameda, Marin, San Francisco, San Mateo, Santa Clara,	49,020	12.7%	1,550	15.5%	853	15.3%	55.0%
Rest of San Francisco Area	Contra Costa, Napa, Santa Cruz, Solano, Sonoma	28,539	7.4%	320	3.2%	187	3.4%	58.4%
Central Valley & Sierra, except Amador	Alpine, Calaveras, Fresno, Inyo, Kern, Kings, Madera, Mariposa, Merced, Mono, San Joaquin, Stanislaus, Tulare, Tuolumne	31,583	8.2%	810	8.1%	445	8.0%	54.9%
Central Coast	Monterey, San Benito, San Luis Obispo, Santa Barbara	9,356	2.4%	780	7.8%	482	8.7%	61.8%
Los Angeles	Los Angeles, Orange, Ventura	110,564	28.7%	1,230	12.3%	639	11.5%	52.0%
Inland Empire	Riverside, San Bernardino	36,915	9.6%	950	9.5%	505	9.1%	53.2%
Border	Imperial, San Diego	32,144	8.3%	830	8.3%	464	8.3%	56.0%
Nevada County	Nevada	1,114	0.3%	136	1.4%	89	1.6%	65.4%
Sutter & Yuba Counties	Sutter, Yuba	1,135	0.3%	40	0.4%	21	0.4%	52.5%
Amador County	Amador	304	0.1%	23	0.2%	17	0.3%	73.9%
Outside California	All states other than California	53,407	13.8%	900	9.0%	420	7.5%	46.7%
TOTAL		385,840	100.0%	10,000	100.0%	5,573	100.0%	55.7%

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	2012	2014
Questionnaires mailed	5,400	3,685	4,000	8,796	9,000	10,000	10,000	10,000	10,000
In California				7,653	7,800	8,800	8,850	8,900	9,100
Outside California				1,143	1,200	1,200	1,150	1,100	900
Ineligible cases**	1,075	388	274	864	552	998	209	142	188
Eligible cases	4,680	3,297	3,726	7,932	8,448	9,002	9,791	9,858	9,812
Surveys returned				5,182	5,078	5,455	6,302	5,541	5,599
Refusals and incomplete surveys***				14	12	15	78	12	26
Total respondents	3,112	2,476	2,784	5,168	5,066	5,440	6,224	5,529	5,573
In California				4,575	4,546	4,890	5,551	4,967	5,047
Outside California				593	520	550	673	562	526
Response rate of all surveys mailed	57.6%	67.2%	69.6%	58.8%	56.3%	54.4%	62.2%	55.3%	55.7%
Response rate of eligible population	66.5%	75.1%	74.7%	65.2%	60.0%	60.4%	63.6%	56.1%	57.0%

* 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 were omitted from the analytical data. Starting in 2004 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, 2014

Age Group	Actively Licensed RNs		Survey Sample		Survey Respondents		Response rate
	#	%	#	%	#	%	%
Under 25 years	5,472	1.4%	122	1.2%	25	0.5%	20.5%
25-34 years	75,399	19.5%	1,820	18.2%	697	12.5%	38.3%
35-44 years	91,017	23.6%	2,367	23.7%	1,158	20.8%	48.9%
45-54 years	84,421	21.9%	2,304	23.0%	1,230	22.1%	53.4%
55-64 years	94,257	24.4%	2,522	25.2%	1,674	30.0%	66.4%
65 years and older	35,274	9.1%	865	8.7%	789	14.2%	91.2%
TOTAL	385,840	100.0%	10,000	100.0%	5,573	100.0%	55.7%

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 also 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 385,840 at the time this survey was conducted, is described in this chapter.

Employment Status of RNs with Active Licenses

Most of California’s registered nurses are currently employed in nursing positions, which are defined as positions that require an RN license. At the time of the survey, 83.4 percent of nurses with active licenses and California addresses were working in nursing (Table 2.1). This is the lowest rate of employment observed since 1993. 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	2012	2014
Employed in nursing	82.6%	89.3%	84.2%	87.5%	86.7%	86.9%	87.4%	85.1%	83.4%
Not employed in nursing	17.4%	10.7%	15.8%	12.5%	13.3%	13.1%	12.6%	14.9%	16.6%
Number of respondents	2,724	2,476	2,955	4,280	4,346	4,890	5,551	4,967	5,047

Note: Data (2006-2014) are weighted to represent all RNs with active licenses.

There is some variation in employment rates according to region, as shown in Table 2.2. Nurses living in the Inland Empire, Central Valley and Sierra, and Border regions are more likely to work than average, and nurses who reside in the Northern region, San Francisco Bay area, and the Central Coast are less likely to be employed in nursing. These patterns have changed somewhat over the years; in 2012, for example, Northern counties had a higher-than-average employment rate, but they had the lowest employment rate in 2014.

Table 2.2. Employment status of RNs with active California licenses, by region, 2010, 2012, & 2014

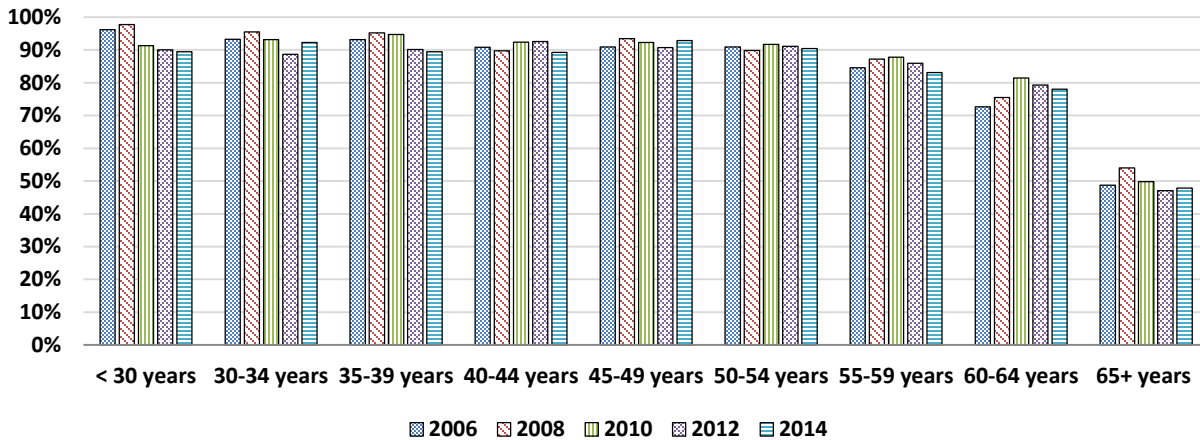
	2010		2012		2014	
	Not Employed in Nursing	Employed in Nursing	Not Employed in Nursing	Employed in nursing	Not Employed in Nursing	Employed in nursing
Northern counties	12.1%	87.9%	13.8%	86.2%	20.2%	79.8%
Sacramento	12.8%	87.2%	14.3%	85.7%	16.5%	83.5%
San Francisco Bay Area	14.1%	85.9%	16.1%	83.9%	17.9%	82.1%
Central Valley & Sierra	10.0%	90.0%	15.5%	84.5%	15.1%	84.9%
Central Coast	16.3%	83.7%	17.0%	83.0%	17.3%	82.7%
Los Angeles	12.6%	87.4%	15.7%	84.3%	16.5%	83.5%
Inland Empire	12.0%	88.0%	11.2%	88.8%	15.0%	85.0%
Border Counties	10.8%	89.2%	13.2%	86.8%	15.9%	84.1%
Outside California	16.6%	83.4%	15.4%	84.6%	17.0%	83.0%

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, as seen in Figure 2.1 and Table 2.3. Over 88 percent of nurses under age 55 were working in nursing positions. The shares of nurses 50 to 64 years old working in nursing positions had risen between 2008 and 2010, but dropped slightly between 2010 and

2012, and dropped again between 2012 and 2014. The share of RNs employed in nursing aged 65 years and older declined from 2008 through 2012, from 54 to 47.1 percent, and remained relatively stable in 2014. There was a decline from 2008 to 2012 in the shares of RNs under 40 years that were employed in nursing. Employment rates remained relatively stable between 2012 and 2014 for those under 30 years and between 35 and 39 years, and rose from 88.7 percent to 92.2 percent among those 30 to 34 years. The employed share of those 45 to 49 years rose from 90.7 to 92.8 percent.

Figure 2.1. Employment status of the statewide population of RNs with active California licenses, by age group, 2008-2014



Note: Number of cases=5,047. Data (2006-2014) are weighted to represent all RNs with active licenses.

Table 2.3. Percent of RNs residing in California working in nursing, by age group, 2004-2014

	2004	2006	2008	2010	2012	2014
Under 30 years	96.1%	96.2%	97.7%	91.3%	90.0%	89.5%
30-34 years	95.0%	93.3%	95.5%	93.2%	88.7%	92.2%
35-39 years	91.8%	93.2%	95.2%	94.7%	90.1%	89.5%
40-44 years	88.4%	90.8%	89.7%	92.4%	92.6%	89.3%
45-49 years	90.6%	90.9%	93.4%	92.3%	90.7%	92.8%
50-54 years	91.8%	90.9%	89.8%	91.7%	91.1%	90.4%
55-59 years	90.3%	84.6%	87.2%	87.8%	85.9%	83.1%
60-64 years	78.7%	72.7%	75.5%	81.4%	79.3%	78.0%
65 years and older	55.4%	48.7%	54.0%	49.8%	47.1%	47.8%

Note: Data (2006-2014) are weighted to represent all RNs with active licenses.

Age Distribution of California RNs

As seen in Table 2.4, in 2014, 47.6 percent of nurses with active California licenses are 50 years or older. This percentage has fluctuated slightly since 2006 and has declined from its high of 49 percent in 2008. The population of nurses with California addresses has a similar age distribution to that of all nurses with California licenses, with 48 percent being 50 years or older. The percent of nurses with active California licenses under 45 years of age has increased slightly from a low of 39.1 percent in 2008 to a high of 44 percent in 2012 and 42.4 percent in 2014.

Table 2.4. Age distribution of all RNs with active California licenses, 2006-2014

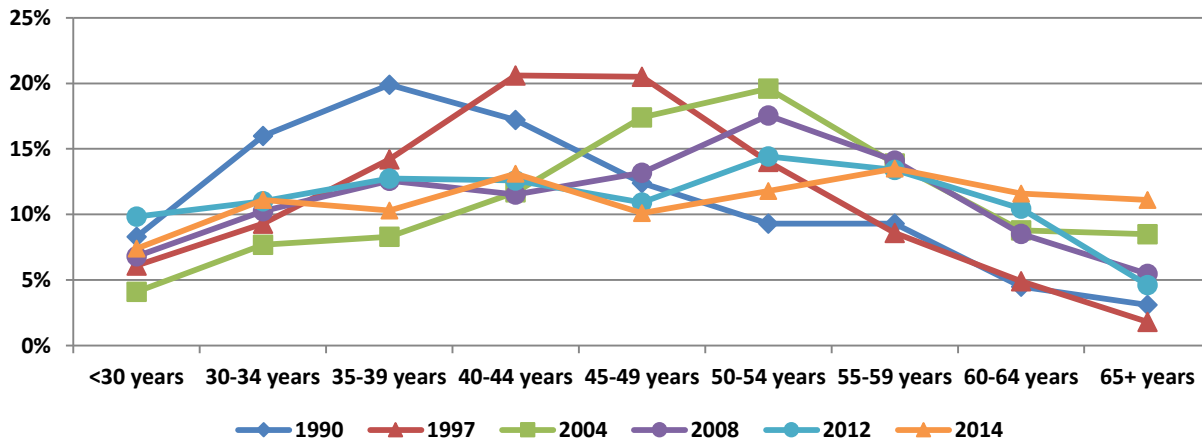
	All Active RNs					California Residents				
	2006	2008	2010	2012	2014	2006	2008	2010	2012	2014
Under 30 years	6.7%	6.1%	9.1%	10.0%	7.4%	7.5%	6.1%	9.3%	9.3%	7.4%
30-34 years	10.9%	10.0%	10.0%	10.3%	11.4%	10.3%	9.3%	9.4%	10.6%	11.1%
35-39 years	10.4%	11.9%	11.5%	11.9%	10.4%	10.6%	11.5%	11.2%	12.0%	10.3%
40-44 years	12.3%	11.1%	11.9%	11.8%	13.0%	12.3%	11.2%	12.1%	11.6%	13.1%
45-49 years	14.3%	12.0%	11.2%	10.5%	10.1%	13.9%	12.3%	11.2%	10.2%	10.1%
50-54 years	18.4%	17.1%	15.7%	13.4%	11.7%	19.1%	17.0%	15.6%	13.5%	11.8%
55-59 years	12.9%	13.8%	13.1%	13.2%	13.4%	12.6%	14.1%	13.2%	13.3%	13.5%
60-64 years	7.4%	9.8%	10.0%	10.9%	11.7%	7.7%	9.8%	10.2%	11.2%	11.6%
65 years and older	6.6%	8.3%	7.5%	7.9%	10.8%	6.1%	8.8%	7.9%	8.3%	11.1%
Number of cases	*	5,440	6,224	5,529	5,573	*	4,890	5,551	4,967	5,047

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 distributions of nurses employed in nursing and residing in California for each survey year. The mean age of RNs increased from 1990 through 2004 and has remained relatively stable since then. However, there have been important changes in the relative sizes of age groups. In 1990, the largest share of nurses was 35 to 39 years, and the largest age group became steadily older until 2004, when it reached 50 to 54 years. This age group remained the largest through 2012, but in 2014 it was surpassed by the 40 to 44 age group. Since 2004 there has been growth in the shares of nurses in all age groups under 45 years old. Growth in the share of younger nurses is probably the result of expansions in the number of new RN graduates in California since 2000.

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



Note: 2014 number of cases=5,047. Data (2006-2014) are weighted to represent all RNs with active licenses.

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

Age Groups	1990	1993	1997	2004	2006	2008	2010	2012	2014
Under 30	8.3%	6.3%	6.1%	4.1%	7.6%	6.8%	9.7%	9.9%	8.0%
30-34	16.0%	12.8%	9.3%	7.7%	10.2%	10.3%	10.0%	11.0%	12.3%
35-39	19.9%	18.2%	14.2%	8.3%	9.9%	12.6%	12.1%	12.8%	11.1%
40-44	17.2%	20.8%	20.6%	11.7%	13.0%	11.5%	12.8%	12.6%	14.0%
45-49	12.4%	13.9%	20.5%	17.4%	14.0%	13.2%	11.9%	10.9%	11.3%
50-54	9.3%	12.5%	14.0%	19.6%	19.0%	17.5%	16.4%	14.4%	12.8%
55-59	9.3%	8.0%	8.6%	13.9%	12.6%	14.1%	13.2%	13.4%	13.4%
60-64	4.5%	4.7%	4.9%	8.8%	7.7%	8.5%	9.5%	10.4%	10.8%
65 or older	3.1%	2.8%	1.8%	8.5%	6.1%	5.5%	4.5%	4.6%	6.4%
Mean age of RNs working in nursing	42.9	43.6	44.6	47.6	47.1	47.1	46.3	46.1	46.7
Number of cases	2,226	2,192	2,451	3,020	3,732	4,890	4,726	4,100	4,129

Note: Columns might not total 100% due to rounding. Data (2006-2012) 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. Historically and currently, the Northern Counties and Central Coast have a somewhat older population of nurses, on average, while nurses residing outside California and in the Central Valley, Inland Empire, and the Southern Border regions tend to be younger.

Table 2.6. Age distribution of RNs with active California licenses, by region, 2014

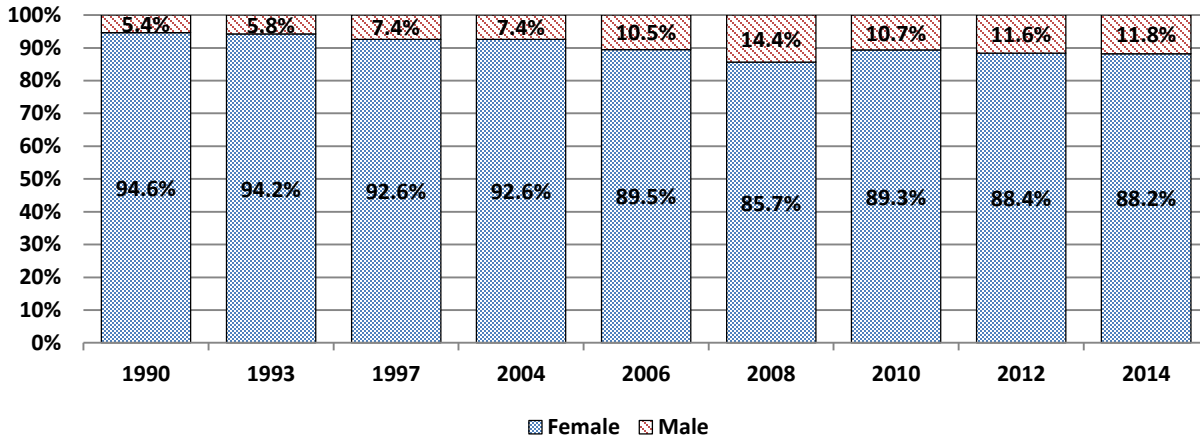
	Out of state	N. Counties	Sacramento	Bay Area	Central Valley/Sierra	Central Coast	Los Angeles	Inland Empire	Border Counties
Under 30 years	7.5%	4.2%	6.7%	7.4%	7.8%	4.1%	7.6%	7.6%	8.7%
30-34 years	13.3%	9.1%	8.6%	10.8%	11.2%	9.4%	11.6%	10.7%	13.4%
35-39 years	10.6%	7.6%	11.3%	11.1%	8.5%	7.3%	10.5%	10.3%	10.7%
40-44 years	12.5%	9.3%	13.2%	12.7%	15.7%	10.0%	12.8%	14.4%	12.7%
45-49 years	10.2%	9.2%	11.2%	9.3%	9.8%	10.6%	11.0%	10.3%	8.9%
50-54 years	11.3%	13.1%	12.3%	11.8%	13.0%	12.0%	11.2%	12.4%	10.9%
55-59 years	13.1%	16.8%	13.3%	12.3%	15.0%	16.1%	13.8%	13.2%	12.5%
60-64 years	12.2%	16.1%	12.8%	12.8%	9.8%	15.4%	10.3%	11.0%	11.8%
65 and over	9.3%	14.8%	10.6%	11.9%	9.1%	15.0%	11.2%	10.0%	10.4%
Number of cases	526	503	1,015	1,015	465	462	636	498	453

Note: Number of cases=5,573. 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 2014, 11.8 percent of working RNs were male, which is a small increase from 11.6 percent in 2012. 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 35 years old have the greatest share of men, who represent 16 percent of nurses in this age group. Less than 7 percent of RNs 55 years and older are male.

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



Note: 2012 number of cases=4,093. Data (2006-2014) are weighted to represent all RNs with active licenses.

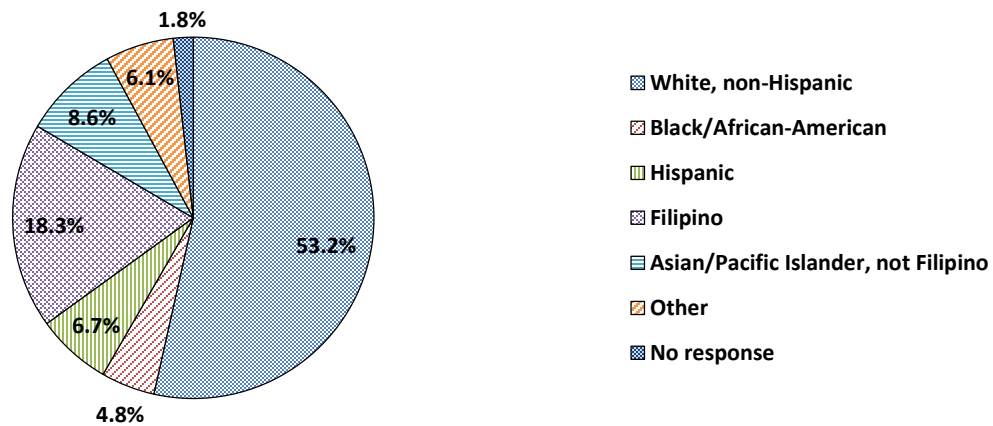
Table 2.7. Gender of active RNs who reside in California, by age group, 2014

	Female	Male	No response
All RNs	88.3%	11.0%	0.7%
Under 35 years	83.8%	16.0%	0.2%
35-44 years	86.2%	12.6%	1.2%
45-54 years	87.2%	12.4%	0.5%
55-64 years	92.6%	6.7%	0.8%
65 years and older	93.3%	6.1%	0.6%

Note: Number of cases=5,047. Data are weighted to represent all RNs with active licenses.

Figure 2.4 presents the racial and ethnic composition of RNs with active licenses who reside in California. Fifty-three percent of actively licensed RNs are non-Hispanic White, and Filipinos represent 18.3 percent of the RN workforce. Hispanic and Latino nurses account for 6.7 percent of the nursing workforce, and Asians who are not Filipino comprise 8.6 percent. Black/African-American nurses represent 4.8 percent of California’s active nurses.

Figure 2.4. Ethnic and racial composition of RNs with active California licenses residing in California, 2014



Note: Number of cases=5,047. 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 2014, only 51.6 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 20.3 percent in 2014. 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 8.5 percent in 2014. The share of nurses of Hispanic descent was 7.2 percent in 2014, which has increased from 3.7 percent in 1990. The shares of Black/African-American, Native American, and Pacific Islander nurses have remained comparatively stable from 1990 through 2014.

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

	1990	1993	1997	2004	2006	2008	2010	2012	2014
White, not Hispanic	77.2%	72.6%	64.5%	61.5%	62.0%	58.6%	53.8%	53.4%	51.6%
Hispanic	3.7%	4.5%	4.9%		5.7%	7.5%	8.5%	6.9%	7.2 %
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%	5.2%	5.0%
Asian, Southeast Asian/Pacific Islander	12.7%	*	*	*	*	*	*	*	*
Filipino	*	13.4%	15.9%	18.2%	17.7%	18.0%	20.8%	21.3%	20.3%
Asian Indian	*	0.4%	1.2%	1.0%	0.8%	1.4%	1.6%	1.5%	1.2%
Other Asian	*	4.4%	5.5%	5.9%	5.8%	7.1%	7.7%	8.1%	7.3%
Pacific Islander	*	0.3%	0.2%	0.2%	0.2%	0.1%	0.1%	0.4%	0.3%
Native American Indian/Eskimo	0.6%	0.5%	0.5%	0.3%	0.8%	0.4%	0.3%	0.2%	0.4%
Mixed	*	*	*	1.6%	2.3%	2.0%	2.6%	3.1%	6.6%
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	3,964	4,051

* Racial/ethnic group was not included in the choices in that survey year. In 2012/2014, Mixed and Other race/ethnicity were combined. Note: Columns might not total 100% due to rounding. Data (2006-2014) 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 less than half of RNs under 45 years of age. Filipino nurses represent more than a quarter of nurses between ages 35 to 44 years and nearly one-fifth of those under 35 years old. About 9 percent of nurses under 45 years old are Hispanic/Latino, and this percentage declines for older age groups. Non-Filipino Asians account for 14.2 percent of nurses under 35 years old, and 9.5 percent of nurses 35 to 44 years old.

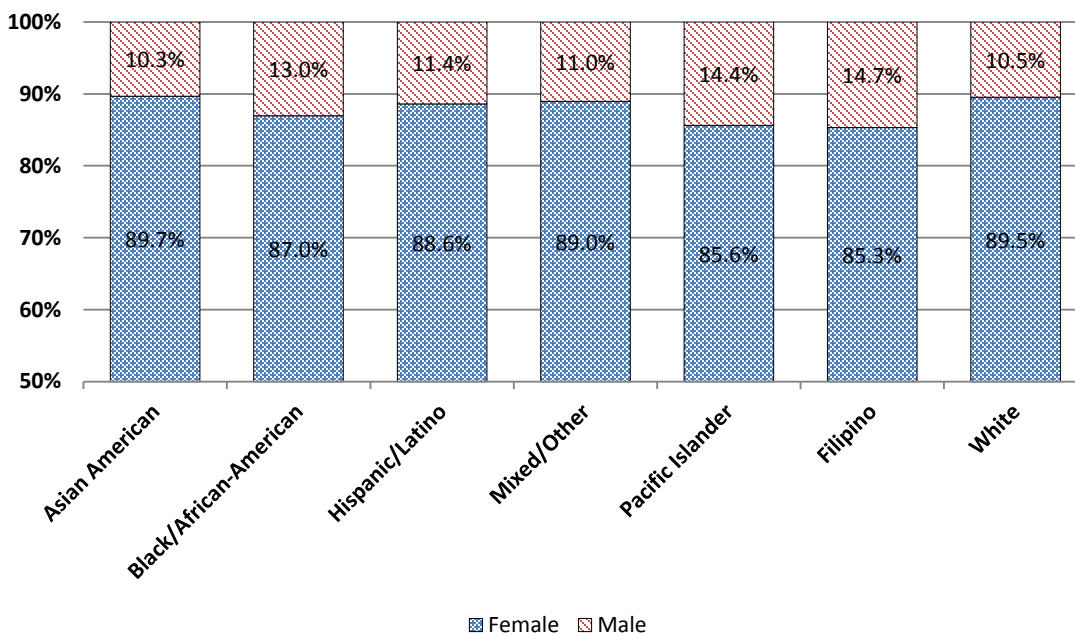
Table 2.9. Ethnic and racial composition of RNs with active California licenses residing in California, by age group, 2014

	Under 35 years	35-44 years	45-54 years	55-64 years	65 years and older
White, not Hispanic	44.7%	38.3%	52.6%	65.9%	71.3%
Black/African-American	3.1%	5.5%	5.1%	4.3%	6.6%
Hispanic/Latino	9.7%	9.1%	7.6%	3.8%	1.4%
Filipino	18.9%	27.9%	15.4%	15.2%	9.9%
Asian Indian	2.6%	1.4%	1.3%	0.2%	0.8%
Asian, not Filipino or Indian	11.6%	8.1%	7.4%	4.3%	5.5%
Native Hawaiian/Pacific Islander	0.2%	0.1%	0.0%	0.0%	0.0%
Native American/Alaskan	0.3%	0.3%	0.3%	0.9%	0.1%
Mixed/Other	7.8%	7.5%	8.3%	3.5%	2.9%
No response	1.2%	1.9%	2.1%	1.9%	1.6%

Note: Number of cases=4,051. Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

There are differences in the gender composition of the RN workforce, as seen in Figure 2.5. Men account for higher shares of Filipino (14.7%), Pacific Islander (14.4%), and Black/African-American (13.0%) RNs, and lower shares of Asian American (10.3%), White (10.5%) and Latino (11.4%) nurses. As seen in Table 2.10, male nurses are more racially and ethnically diverse than female nurses, with the majority of male RNs being non-White. More than one-quarter of male nurses are of Filipino heritage (25.5%).

Figure 2.5. Gender composition of RNs with employed California licenses, by race/ethnicity, 2014



Note: Number of cases=4,051. Data are weighted to represent all RNs with active licenses.

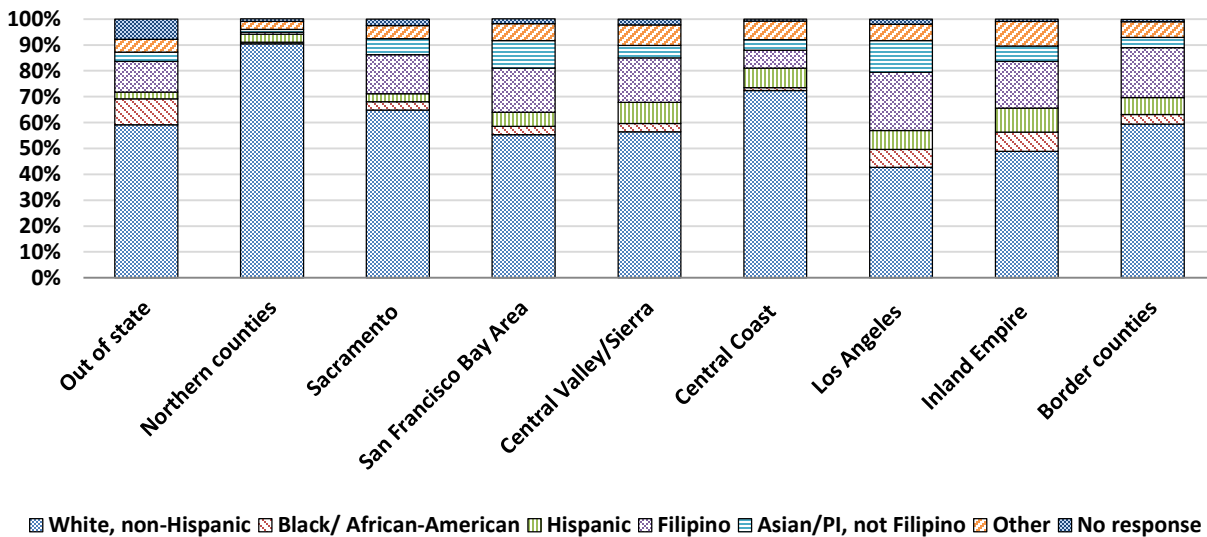
Table 2.10. Ethnic and racial composition of employed California RNs, by gender, 2014

	Female	Male
White, not Hispanic	51.5%	45.3%
Black/African-American	4.8%	5.4%
Hispanic/Latino	6.5%	6.3%
Filipino	19.4%	25.5%
Pacific Islander	1.6%	0.9%
Asian	7.4%	8.5%
Mixed/Other	8.8%	8.2%

Note: Number of cases=4,051. 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 2.6 and Table 2.11. Nurses in the Northern Counties and Central Coast are less diverse than those in other regions of California. The most diverse regions are Los Angeles and the Inland Empire. Filipino nurses comprise a greater share of the RN workforce in the Los Angeles, Border, and Inland Empire regions, and non-Filipino Asians are more predominant in the San Francisco and Los Angeles areas. There is a greater share of Hispanic/Latino RNs in the Inland Empire, Central Valley/Sierra, Central Coast, and Los Angeles regions. African-American/Black RNs represent higher shares of the RN workforce among those who live outside California, and in the Los Angeles and Inland Empire regions.

Figure 2.6. Ethnic and racial composition of RNs with active California licenses, by region, 2014



Note: Number of cases=4,051. Data are weighted to represent all RNs with active licenses. Data for Figure 2.5 can be found in Table 2.10

Table 2.11. Ethnic and racial composition of RNs with active California licenses, by region, 2014

	White, non-Hispanic	Black/African-American	Hispanic	Filipino	Asian/PI, not Filipino	Other	No response
Out of state	59.2%	10.0%	2.6%	11.8%	3.6%	5.0%	7.8%
Northern counties	90.4%	0.7%	3.1%	0.7%	1.1%	3.1%	1.0%
Sacramento	64.8%	3.2%	3.2%	15.0%	6.2%	5.1%	2.5%
San Francisco Bay Area	55.3%	3.2%	5.5%	17.1%	10.6%	6.5%	1.9%
Central Valley/Sierra	56.4%	3.2%	8.2%	17.2%	4.8%	7.9%	2.3%
Central Coast	72.4%	1.1%	7.6%	6.9%	4.0%	7.2%	0.8%
Los Angeles	42.7%	6.9%	7.3%	22.6%	12.2%	6.3%	2.0%
Inland Empire	48.9%	7.4%	9.3%	18.1%	5.9%	9.5%	0.9%
Border counties	59.4%	3.7%	6.6%	19.3%	3.9%	6.1%	0.9%

Note: Number of cases=4,051. 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. Among all nurses, 40.3 percent speak at least one other language. This number rises to 42.5 percent among RNs currently working. As seen in Table 2.12, Tagalog and other Filipino languages are spoken by more than 17 percent of all RNs living in California, and 19 percent of working RNs. Spanish is spoken by 12.1 percent of working RNs. Mandarin is spoken by 1.3 percent of working RNs, and Cantonese by another 0.9 percent. Smaller shares of RNs speak Korean, Vietnamese, and South Asian languages. 6.9 percent of working RNs reported that they speak some other language fluently; the most-often cited languages were Farsi and Japanese.

Table 2.12. Languages spoken by RNs with active licenses who live in California, by employment group, 2006-2014

	All RNs					Working RNs				
	2006	2008	2010	2012	2014	2006	2008	2010	2012	2014
Tagalog	13.6%	*	*	*	*	15.8%	*	*	*	*
Tagalog or other Filipino language	*	16.6%	17.3%	18.2%	17.6%	*	18.1%	18.9%	18.2%	19.0%
Spanish	10.3%	11.4%	10.7%	11.1%	11.4%	11.1%	12.1%	10.8%	11.3%	12.1%
Mandarin	1.2%	2.2%	1.8%	1.4%	1.4%	1.4%	2.3%	1.9%	1.5%	1.3%
Korean	1.1%	1.1%	1.6%	1.8%	1.5%	1.1%	1.3%	1.5%	1.8%	1.4%
Hindi	0.8%	*	*	*		0.7%	*	*	*	*
Hindi or other S. Asian language	*	1.3%	1.4%	1.5%	1.4%	*	1.5%	1.6%	1.4%	1.4%
Cantonese	0.8%	1.5%	1.0%	1.4%	1.0%	0.8%	1.6%	1.1%	1.5%	0.9%
Vietnamese	0.5%	0.6%	0.8%	0.8%	1.0%	0.6%	0.7%	0.8%	0.9%	1.2%
French	*	*	1.4%	0.9%	1.5%	*	*	1.3%	0.9%	1.6%
Other	8.0%	8.0%	5.8%	7.2%	6.6%	8.1%	8.0%	6.1%	7.4%	6.9%

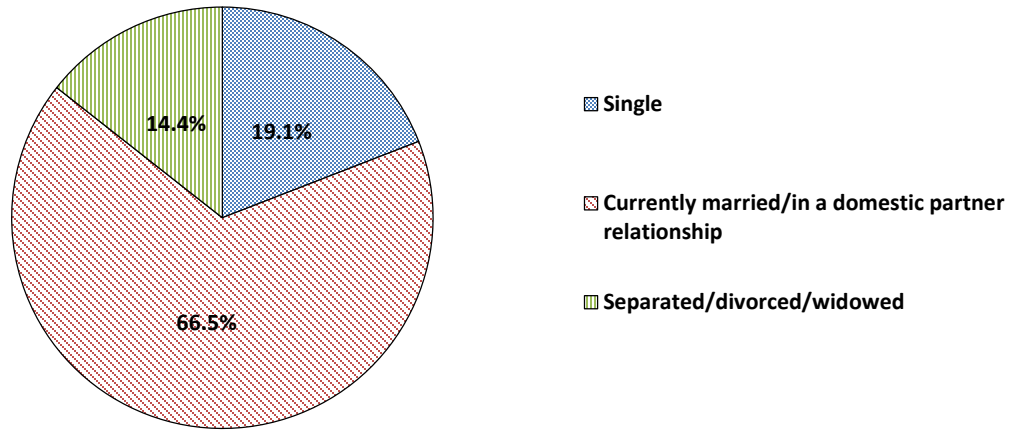
* Language was not listed in the survey in that year.

Note: The 2014 number of cases for all CA residing RNs = 5,047. The 2014 number of cases for working CA residing RNs = 4,129. Respondents could report fluency in multiple languages. Data are weighted to represent all RNs with active licenses.

Families of California’s RNs

About two-thirds of California’s working RNs are married or in a domestic partner relationship (66.5%), as seen in Figure 2.7. Over 19 percent have never married and 14.4 percent are widowed, separated or divorced. The share of working RNs that is married has been stable since 1990, as presented in Table 2.13. There has been an increase in the share of RNs that has never married, which is in alignment with the inflow of young RNs to the California workforce.

Figure 2.7. Marital status of working RNs with active California licenses who live in California, 2014



Note: Number of cases=4,079. Data are weighted to represent all RNs with active licenses.

Table 2.13. Marital status of working registered nurses residing in California, by survey year

	1993	1997	2004	2006	2008	2010	2012	2014
Never married	12.2%	13.5%	12.3%	12.6%	13.9%	15.3%	18.1%	19.1%
Married	66.4%	66.5%	68.2%	66.9%	67.6%	68.0%	67.4%	66.5%
Separated or divorced	18.4%	17.6%	17.0%	16.7%	15.5%	14.9%	14.5%	14.4%
Widowed	3.0%	2.4%	2.6%	3.8%	2.9%	1.8%		
Number of cases	2,197	2,463	2,946	3,719	4,046	4,630	4,033	4,079

Note: Columns might not total 100% due to rounding. Data (2006-2014) are weighted to represent all RNs with active licenses. The 2012/2014 survey combined the categories of widowed, separated, and divorced.

Many of California’s nurses have children living at home, as seen in Table 2.14. In 2014, more than half of working nurses had at least one child living at home. This represents a return to the share with children at home observed in 2008 and 2010; in 2012 the share had dropped to about 42 percent, which was the lowest share of RNs with children at home since the BRN surveys commenced in 1990. It is possible that the changes from 2010 to 2012, and then from 2012 to 2014, are artifacts of there being fewer respondents to the questions about presence of children in the home in 2012. This also may explain changes in the ages of children living at home (Table 2.15) between 2010 and 2012, and between 2012 and 2014. In 2014, less than one-fifth of working RNs had children 2 years and younger at home, and 37 percent had adult children living at home.

Table 2.14. 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	2012	2014
None	40.0%	38.1%	38.2%	45.7%	53.1%	49.2%	47.5%	57.8%	48.2%
One	25.2%	24.7%	22.9%	20.1%	18.4%	22.0%	22.3%	23.8%	20.7%
Two	23.3%	25.1%	26.3%	23.4%	20.0%	19.7%	21.4%	13.1%	19.6%
Three	9.0%	9.5%	9.7%	8.1%	6.4%	6.5%	6.6%	4.2%	8.7%
Four or more	2.5%	2.6%	2.9%	2.7%	2.1%	2.6%	2.2%	1.2%	2.8%
Number of cases	2,014	2,050	2,297	2,933	3,406	4,153	4,531	3,242	3,982

Note: Columns might not total 100% due to rounding. Data (2006-2014) are weighted to represent all RNs with active licenses.

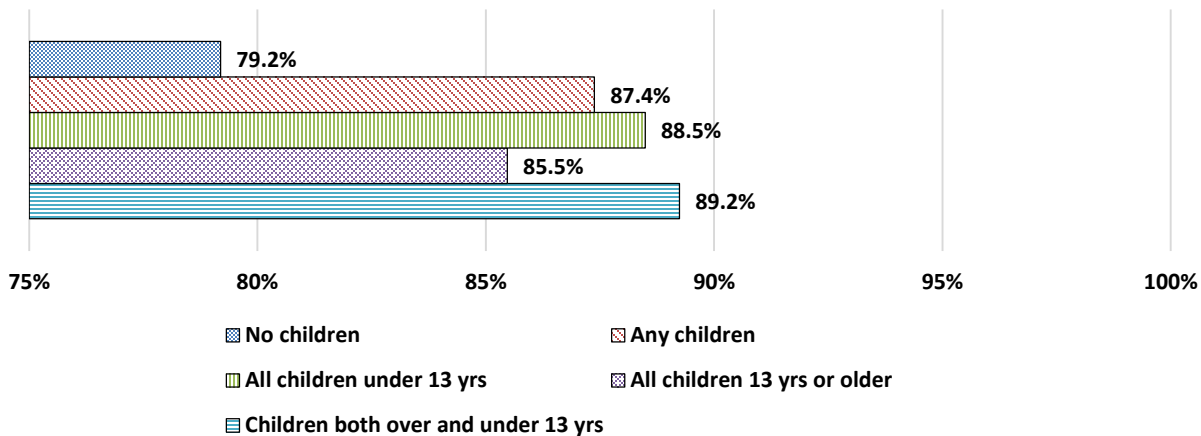
Table 2.15. Percent of nurses with children in specified age groups living at home, for currently working registered nurses residing in California who have children living at home, 2004-2014

Ages of children	2004	2006	2008	2010	2012	2014
Birth to 2 years	13.0%	16.9%	18.9%	16.9%	30.7%	18.6%
3-5 years	14.2%	16.8%	16.3%	16.3%	28.2%	18.1%
6-12 years	34.2%	32.8%	33.5%	36.8%	8.8%	32.1%
13-18 years	39.2%	33.1%	37.4%	32.2%	13.6%	28.4%
Over 18	33.9%	38.3%	34.7%	31.0%	50.9%	37.0%

Note: 2014 number of cases=2,050. Some nurses have children in more than one age group, so columns will not total 100%. Data (2006-2014) 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 2.8. More than 87 percent of RNs with children at home are employed in nursing, compared with only 79.2 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 thirteen years, the age at which paid childcare is normally not required. Nurses who had children under thirteen were more likely to work than other nurses.

Figure 2.8. Employment rates of RNs who live in California and have children at home, 2014



Note: Number of cases=5,047. Data are weighted to represent all RNs with active licenses.

Respondents were asked if they have responsibility for assisting or caring for an adult family member who needs help due to a condition related to aging or disability. This question was new in the 2014 survey. Nearly 22 percent of RNs have such responsibility, and the percentage who provide such care rises with age (Table 2.16). Among RNs under 35 years old, only 14.6 percent care for an adult family member, while 27 percent of those 55 to 64 years old do so. RNs who are not employed in nursing are somewhat more likely to have responsibility for such than are those employed in nursing (25.2% versus 20.9%).

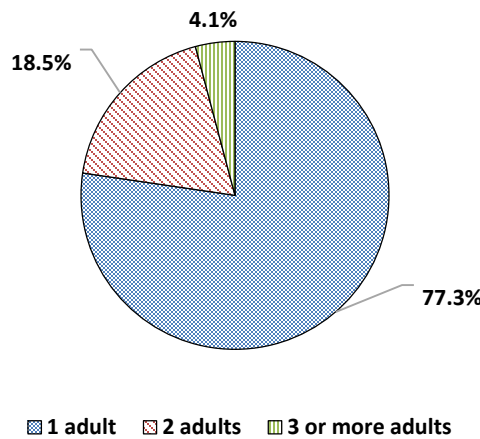
Table 2.16. Share of nurses with responsibility for assisting or caring for an adult family member who needs help because of a condition related to aging or disability, among registered nurses residing in California, 2014

	All RNs	RNs working in nursing	RNs not working in nursing
All RNs	21.7%	20.9%	25.2%
Under 35 years old	14.6%	14.1%	19.7%
35-44 years old	17.1%	17.6%	12.3%
45-54 years old	26.0%	24.9%	37.2%
55-64 years old	27.0%	25.6%	33.1%
65 years and older	22.4%	23.0%	21.8%

Note: Number of observations=1,036. Data are weighted to represent all RNs with active licenses.

More than three-quarters of California RNs who have responsibility for assisting or caring for adult family members care for only one such person, as presented in Figure 2.9. Another 18.5 percent care for 2 adults, and 4.1 percent have responsibility for 3 or more adults.

Figure 2.9. Number of adult family members RNs are responsible for, among RNs who have such responsibility and who live in California, 2014

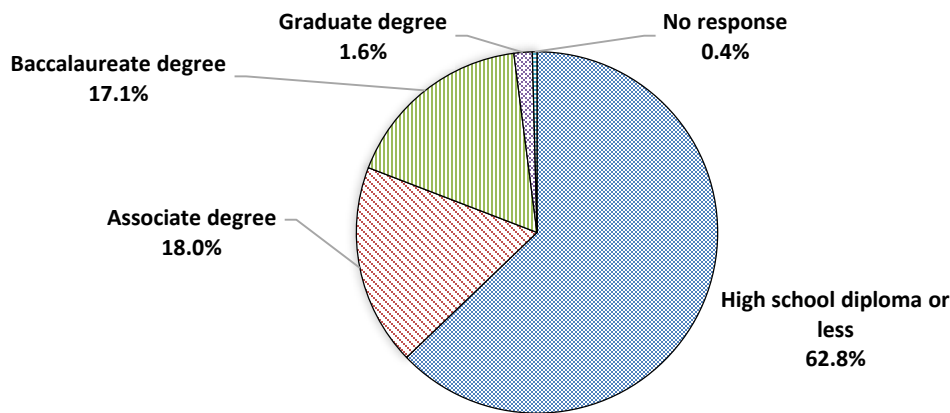


Note: Number of cases=1,024. Data are weighted to represent all RNs with active licenses.

Education and Licensure of California’s Nursing Workforce

More than one-third of California’s nurses with active licenses had a college degree before completing a pre-licensure nursing education program, as seen in Figure 2.10. Before attending nursing school, 18 percent of nurses had an associate degree, 17.1 percent had a baccalaureate degree, and 1.6 percent had a graduate degree.

Figure 2.10. Highest education obtained prior to basic nursing education for RNs with active California licenses who reside in California, 2014



Note: Number of cases=5,047. Data are weighted to represent all RNs with active licenses.

As seen in Table 2.17, the share of working RNs who had completed a college degree prior to enrolling in their basic nursing education increased from 1990 to 2008, and declined from 2008 to 2014. The proportion of working RNs who had a baccalaureate degree prior to basic nursing education increased from 11 percent in 1990 to 26.5 percent in 2008, and then declined to 17.6 percent in 2014. The decline in the share of RNs who had a postsecondary degree prior to entering their pre-licensure RN education program between 2008 and 2014 may reflect growing interest and opportunities for new high-school graduates to enter RN programs.

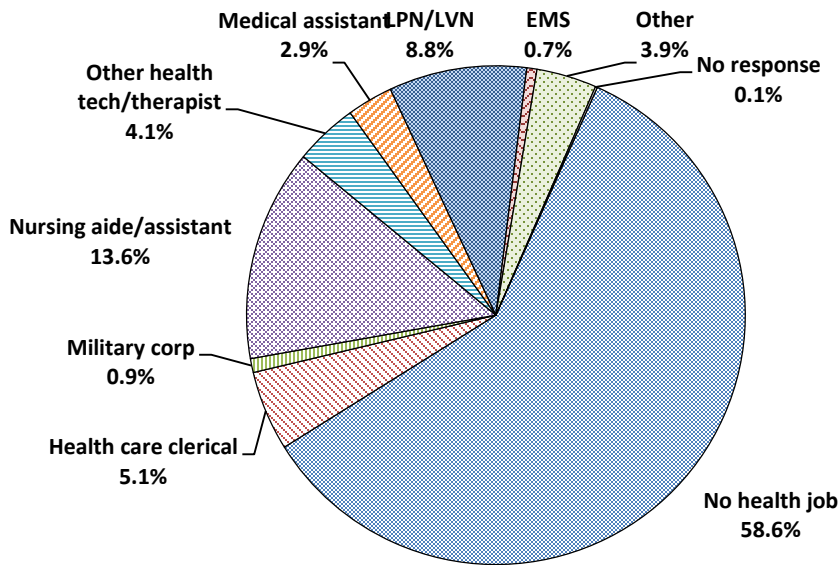
Table 2.17. Highest levels of education completed prior to basic nursing education by currently working registered nurses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010	2012	2014
Less than a High School Diploma	0.6%	0.5%	0.8%	0.3%	0.4%	0.3%	0.7%	0.6%	0.5%
High School Diploma	69.0%	62.9%	57.4%	56.4%	43.2%	40.4%	45.3%	48.9%	61.6%
Associate Degree	18.6%	22.7%	22.4%	24.5%	27.0%	29.1%	25.6%	24.3%	18.2%
Baccalaureate Degree	11.0%	13.2%	17.6%	16.6%	25.0%	26.5%	24.7%	22.3%	17.6%
Master's Degree	0.7%	0.6%	1.6%	2.1%	3.9%	3.0%	2.9%	2.5%	1.1%
Doctoral Degree	0.1%	0.0%	0.3%	0.2%	0.5%	0.8%	0.9%	1.0%	0.9%
Number of cases	2,237	2,197	2,455	2,939	3,692	4,114	4,691	4,100	4,115

Note: Columns might not total 100% due to rounding. Data (2006-2014) are weighted to represent all RNs with active licenses.

Nearly 40 percent of RNs who live in California worked in a health occupation before attending a nursing program, as seen in Figure 2.11. Approximately 14 percent of RNs worked as a nursing aide prior to completing basic RN education, and 8.8 percent were licensed practical/vocational nurses. Many RNs worked in other health-related fields before beginning RN education; 5.1 percent worked as clerks, 2.9 percent were medical assistants, and 4.1 percent were health care technicians such as radiology technicians or laboratory technicians. Less 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, being an emergency medical technician or paramedic, and working as a dental assistant or hygienist.

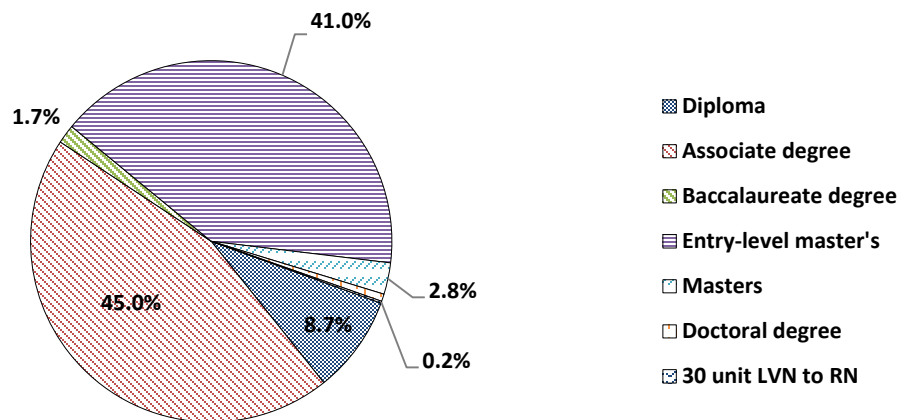
Figure 2.11. Employment in health occupations prior to basic nursing education for RNs with active California licenses who live in California, 2014



Note: Number of cases=5,047. Data are weighted to represent all RNs with active licenses.

Figure 2.12 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 (44.8%). Baccalaureate RN education served as basic education for 40.5 percent of RNs, and 10.3 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. Only 1.6 percent of RNs entered the profession after completing a 30-unit LVN-to-RN program, and 1.9 percent completed entry-level master’s degree programs.

Figure 2.12. Pre-licensure RN education completed by the statewide population of RNs with active California licenses, 2014



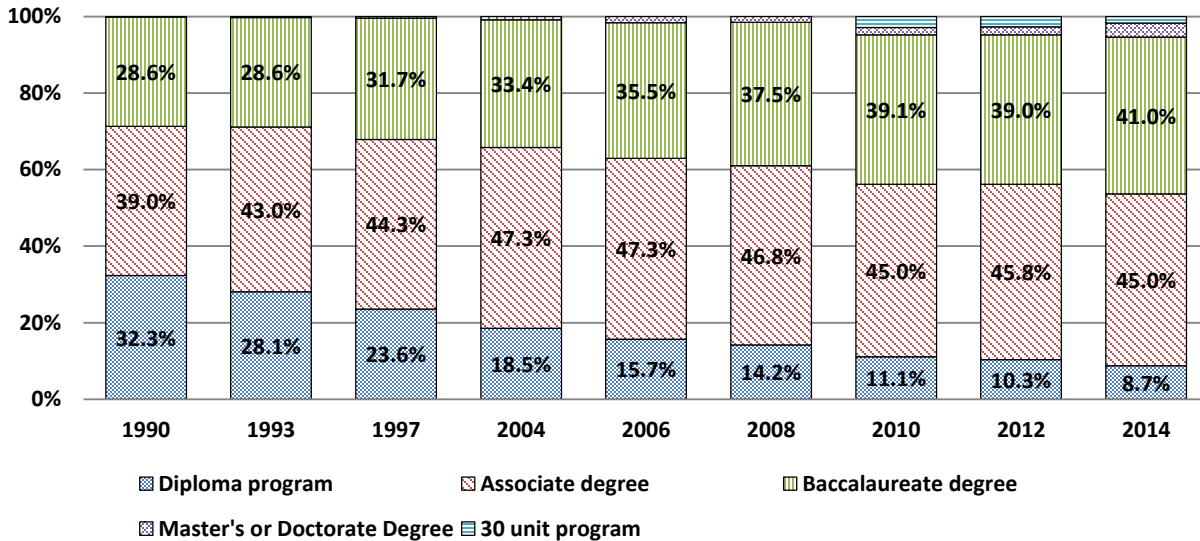
Note: Number of cases=5,032. Data are weighted to represent all RNs with active licenses.

As seen in Figure 2.13, 32.3 percent of working RNs had received their pre-licensure education in a diploma program in 1990; this share decreased to 8.7 percent in 2014. 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

whether their pre-licensure education was a 30-unit LVN-to RN-program. In 2014, 1.6 percent of employed RNs reported their pre-licensure education as this type of LVN-to-RN program.

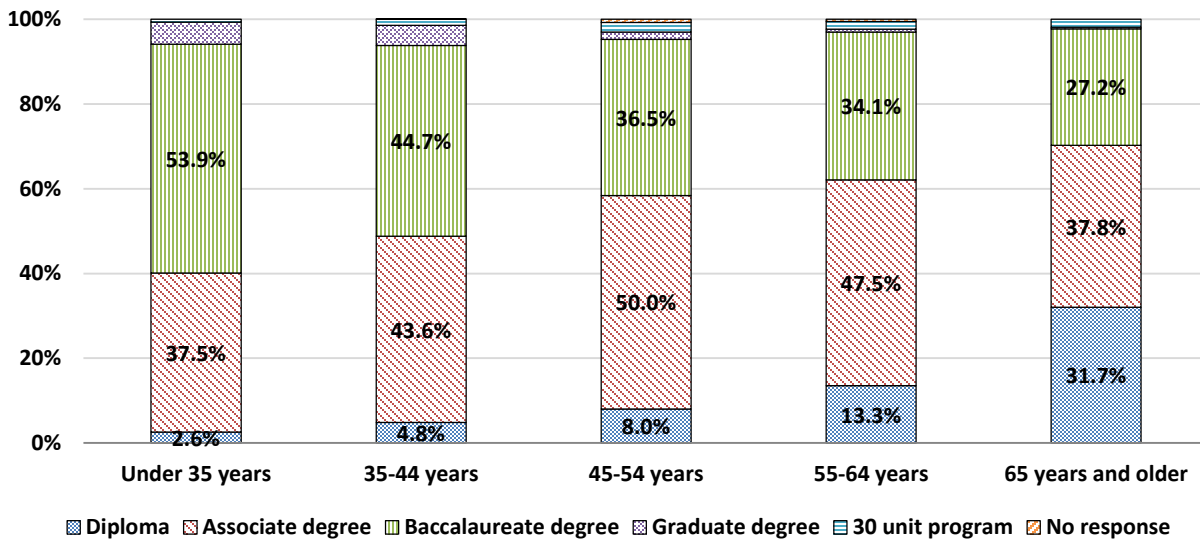
Figure 2.14 presents pre-licensure nursing education by age group, for all nurses with active licenses residing in California. Unsurprisingly, older nurses are more likely to have received their initial nursing education in a diploma program, while only 2.6 percent of California’s nurses under 35 years old received a diploma. More than half of nurses under 35 years old received a BSN for their pre-licensure education.

Figure 2.13. Basic pre-licensure education of currently working RNs residing in California, by survey year



Note: 2014 number of cases=4,115. Data (2006-2014) are weighted to represent all RNs with active licenses.

Figure 2.14. Basic pre-licensure RN education completed by the statewide population of RNs with active California licenses, by age group, 2014



Note: Number of cases=5,047. Data are weighted to represent all RNs with active licenses.

Table 2.18 presents the average age of nurses at the time they graduated from their pre-licensure RN education program from 1990 through 2014. The average age increased from 25.4 years in 1990 to 27.3 years in 2010, and has remained stable since then at 27.7 percent in 2014.

Table 2.18. 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	2012	2014
Mean	25.4	26.0	26.3	26.9	27.1	27.0	27.3	27.2	27.7
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	4,044	4,084

*A standard deviation computation was not feasible with the weighting scheme used with the 2006-2014 data.

Note: Data (2006-2014) are weighted to represent all RNs with active licenses.

The average age increased from 25.4 years in 1990 to 27.7 in 2014 (Table 2.19). The average age at the time of RN graduation has been between 27 and 28 years since 2006. 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 nearly 78 percent of RN graduates were under 25 years. By the 2010s, only 21 percent of pre-licensure graduates were under 25 years old, and 46 percent of pre-licensure graduates were 30 years or older.

Table 2.19. Age distribution at time of graduation from pre-licensure RN education, for RNs with active California licenses who reside in California, 2014

Age at graduation	All nurses	Decade of graduation						
		1950s	1960s	1970s	1980s	1990s	2000s	2010s
Under 25	44.9%	91.7%	91.4%	79.4%	55.4%	46.7%	29.4%	21.0%
25-29 years	24.6%	8.3%	4.7%	16.4%	24.8%	20.6%	28.6%	33.0%
30-34 years	14.4%	0.0%	3.9%	3.2%	14.2%	15.6%	15.7%	22.4%
35-39 years	7.3%	0.0%	0.0%	0.7%	3.1%	11.2%	9.8%	8.4%
40-44 years	5.3%	0.0%	0.0%	0.3%	2.1%	4.9%	9.6%	6.8%
45 and older	3.6%	0.0%	0.0%	0.0%	0.3%	1.1%	6.9%	8.4%

Note: Number of cases=4,082. RNs who did not report a year of graduation were excluded from the calculation. Columns may not add to 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Nearly 62 percent of California’s working RNs received their basic nursing education in California (61.8%), as seen in Table 2.20. About 17 percent were educated in other states and 20.9 percent are international graduates. There has been a substantial shift over time in the places where California’s RNs completed their initial RN education. Among RNs who graduated prior to the 1980s, more than half were educated internationally or in other states. However, 69 percent of working RNs who graduated in the first decade of the 2000s were educated in California, and only 15.1 percent were educated internationally.

Table 2.20. Locations where currently working registered nurses residing in California received basic nursing education, by decade of graduation

Location of education	All nurses	Decade of graduation						
		1950s	1960s	1970s	1980s	1990s	2000s	2010s
California	61.8%	61.8%	37.7%	43.0%	58.1%	52.0%	69.0%	88.7%
Other States	17.3%	38.2%	37.3%	27.3%	19.0%	14.0%	15.9%	10.6%
International	20.9%	0.0%	24.9%	29.8%	22.9%	34.1%	15.1%	0.7%

Note: Number of cases=4,048. RNs who did not report a year of graduation were excluded from the calculation. Columns may not add to 100% due to rounding. Data are weighted to represent all RNs with active licenses.

About two-thirds of RNs with active licenses who reside in California were born in the United States (Table 2.21). More than 19 percent of RNs indicated they were born in the Philippines. Nearly two percent were born in each of South Korea or Mexico, and slightly more than one percent was born in each of India and Canada.

Nurses were also asked where they received their initial RN education. Of RNs reporting they were born in the United States, 76 percent were educated in California, and 23.5 percent were educated in another US location. Of RNs reporting they were born in the Philippines, 20.2 percent were educated in California, 3.6 percent were educated in another state, and 76.1 percent were educated internationally. While most foreign-born RNs were educated outside of California, 96.1 percent of RNs born in Mexico and 35.1 percent born in Canada reported graduating from a California pre-licensure program and another 25.7 percent born in Canada were educated in another US location.

Table 2.21. Top five countries of birth and country of education for RNs residing in California, 2014

	Share born in the country	Location of education		
		Educated in California	Educated in other US location	Internationally educated
United States	63.4%	76.0%	23.5%	0.5%
Philippines	19.4%	20.2%	3.6%	76.1%
Mexico	1.7%	96.1%	0.1%	3.9%
Korea	1.5%	26.3%	9.2%	64.5%
Canada	1.1%	35.1%	25.7%	39.2%
India	1.1%	33.4%	4.8%	61.8%

Note: Number of educated country cases=4,047. 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 2.22 presents the share of working nurses who reside in California and have a nursing license in at least one other state. In 2014, 8.7 percent, the lowest reported in all survey years, had at least one other license; this share has fluctuated substantially over the years, with a notable drop between 2006 and 2008. 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 2.22. 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	2012	2014
No	86.6%	82.8%	85.3%	87.0%	80.6%	88.1%	90.0%	89.1%	91.3%
Yes	13.4%	17.2%	14.7%	13.0%	19.4%	11.9%	10.0%	10.9%	8.7%
Number of cases	2,251	2,194	2,468	2,906	3,699	4,052	4,726	4,100	4,129

Note: Columns might not total 100% due to rounding. Data (2006-2014) are weighted to represent all RNs with active licenses.

Many nurses pursue additional education after their pre-licensure education, as seen in Table 2.23. About 39 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); 17.5 percent of RNs received this after obtaining their RN license. About 11 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. In general, older RNs are more likely to have completed additional degrees. This is not surprising because older nurses have had more time to pursue additional education.

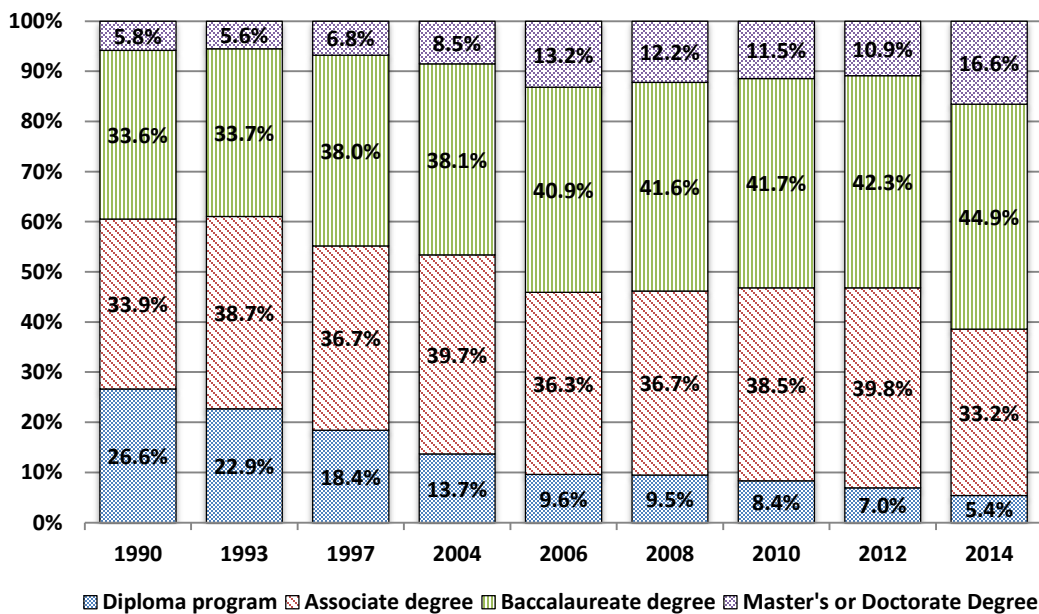
Table 2.23. Additional degrees completed after pre-licensure education by RNs with active California licenses who reside in California, 2014

	All	Under 35 years	35-44 years	45-54 years	55-64 years	65 years and older
No additional degrees	61.4%	69.7%	62.0%	60.0%	58.0%	45.4%
AD – Nursing	4.7%	4.3%	5.4%	4.3%	3.9%	6.6%
BSN	17.5%	12.1%	17.5%	18.8%	18.5%	21.6%
MSN	10.9%	6.0%	11.9%	11.8%	11.7%	13.2%
Doctorate in nursing	*	*	*	*	*	*
Practice-based Doctorate in nursing (DNP)	0.3%	0.0%	0.4%	0.1%	0.5%	0.2%
Research-or education-focused Doctorate in Nursing (PhD, DNSc, etc.)	0.4%	0.0%	0.2%	0.5%	0.5%	1.1%
AD – Non-nursing	2.0%	1.4%	1.9%	2.3%	2.1%	1.9%
BS/BA – Non-nursing	3.9%	1.9%	2.1%	2.6%	5.5%	10.1%
MS/MA – Non-nursing	4.3%	1.1%	2.0%	3.2%	7.1%	10.7%
Doctorate – Non-nursing	0.9%	0.0%	0.6%	1.3%	1.1%	1.9%

Note: Number of cases=5,047. 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 2.15 presents the highest level of nursing education received by working nurses, from 1990 through 2014. The share of RNs with a graduate degree in nursing has risen from 5.8 percent in 1990 to 16.6 percent in 2014. Less than 40 percent of California’s nurses reported that their highest nursing education was an associate degree or diploma in 2014.

Figure 2.15. Highest nursing degree earned by currently working registered nurses residing in California, by survey year



Note: 2012 number of cases=4,118. Data (2006-2014) are weighted to represent all RNs with active licenses.

Table 2.24 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 2014, many more diploma graduates had obtained additional nursing education; only 61.6 percent had not. The share of nurses whose initial education was an associate degree in nursing who obtained additional degrees also has risen, from 13 percent in 1990 to 29.8 percent in 2014.

Table 2.24. 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 (Number of 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%
1997 Survey (Number of 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 (Number of 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%
2008 Survey (Number of 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 (Number of 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%
2012 Survey (Number of cases)	637	2,494	2,078
Diploma program	75.7%	-----	-----
Associate degree	2.6%	80.5%	-----
Baccalaureate degree	14.0%	12.6%	88.1%
Master's or Doctorate Degree	7.7%	6.9%	12.0%
No Response	0.0%	0.0%	0.0%
2014 Survey (Number of cases)	381	1,974	1,774
Diploma program	61.6%	-----	-----
Associate degree	4.6%	70.2%	-----
Baccalaureate degree	18.8%	20.0%	75.5%
Master's or Doctorate Degree	15.0%	9.8%	23.8%
No Response	0.0%	0.0%	0.1%

Note: Data (2006-2014) are weighted to represent all RNs with active licenses.

RNs were asked to indicate the year in which they graduated from their post-licensure degree programs. Table 2.25 shows the average number of years since initial RN education and the completion of an additional degree program. The average number of years for an RN holding an associate degree to achieve a baccalaureate in nursing is 9.1 years, and those who continued to a master's degree in nursing required a total of 13.2 years after

the initial associate degree. Nurses who entered the RN field with a baccalaureate degree and later completed a master's degree took an average of 9.9 years to do so.

Table 2.25. Average years between initial nursing education and additional nursing education for all RNs, 2014

Initial RN Education	Additional Degrees			
	ADN	BSN	MSN	PhD
Diploma	5.1	12.5	20.1	32.5
Associate Degree, Nursing		9.1	13.2	22.1
Baccalaureate Degree, Nursing			9.9	12.9

Note: 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 2.26 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 2014, 24.7 percent had some sort of certification. The share of working RNs with a Nurse Practitioner certification has increased, from 3.5 percent in 1993 to 5.5 percent in 2014, although the share was higher in 2008 at 7.1 percent. There has also been growth in Public Health Nursing, rising from 11.1 percent in 1993 to 17.2 percent in 2014.

Table 2.26. 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	2012	2014
No additional certifications	83.6%	79.0%	75.6%	76.3%	77.9%	77.3%	75.9%	75.3%
Nurse Anesthetist	0.9%	0.5%	0.3%	0.6%	0.4%	0.4%	0.7%	1.2%
Nurse Midwife	1.2%	1.5%	0.2%	2.0%	0.6%	0.4%	0.4%	0.7%
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%	5.6%	5.5%
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%	16.2%	17.2%
Psychiatric/Mental Health Nurse	2.2%	2.2%	1.0%	3.4%	1.1%	1.2%	1.5%	1.0%
Clinical Nurse Specialist	*	*	3.4%	2.8%	2.7%	2.7%	2.6%	2.3%
Number of cases	2,212	2,489	2,698	3,282	3,532	4,368	3,842	4,129

* 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 (2006-2014) 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 2.27 provides information about these nurses. Overall, 10 percent of RNs report being enrolled in school, which is an increase from 2010 when 8.1 percent were enrolled. Enrollment rates are highest among nurses under 35 years old, and decline with age. Of those enrolled, most are working toward a baccalaureate degree (41.5%) or master's degree (38.2%). Nearly 8 percent are pursuing a doctoral degree; 5.1 percent are enrolled in doctorate of nursing practice (DNP) program, which have been expanding rapidly in the past few years.

Table 2.27. Current enrollment in nursing degree or specialty certification program among the statewide population of RNs with active California licenses, by age group, 2014

	All nurses	Under 35 years	35-44 years	45-54 years	55-64 years	65 years and older
Currently enrolled	10.0%	17.1%	13.6%	10.2%	4.7%	2.3%
Of those enrolled, objective is...						
Associate Degree	0.9%	0.0%	0.0%	2.0%	3.4%	0.0%
Baccalaureate Degree	41.5%	42.7%	49.3%	38.0%	32.3%	0.0%
Master's Degree	38.2%	49.5%	37.1%	39.4%	15.4%	6.7%
Doctoral Degree (research-focused)	2.7%	0.0%	3.5%	4.2%	5.6%	0.0%
Doctoral Degree (DNP)	5.1%	5.0%	8.8%	1.2%	3.8%	0.0%
Non-degree specialty certification	7.7%	1.8%	8.4%	6.4%	17.1%	40.9%

Note: Number of enrolled cases = 432. Data are weighted to represent all RNs with active licenses.

Many nurses currently enrolled in education programs to obtain a degree or specialty certification are completing coursework online. As seen in Table 2.28, the average percentage of coursework offering online or through distance learning modalities ranges from 52.8 percent for research-focused doctoral programs to 86.5 percent for bachelor's degree programs.

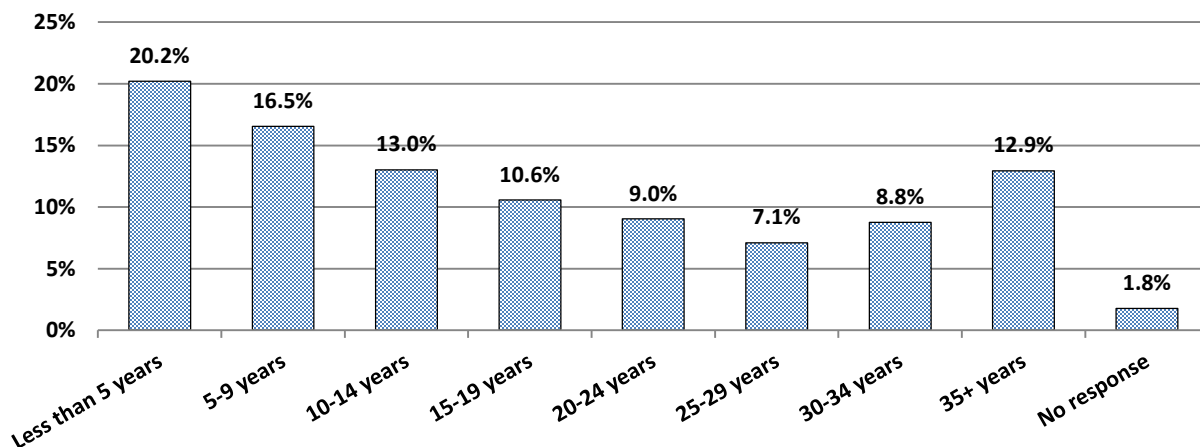
Table 2.28. Coursework setting for enrolled RNs with active California licenses, by program, 2014

	Associate Degree	Bachelor's Degree	Master's Degree	Doctoral Degree (research-focused)	Doctoral Degree (DNP)	Non-degree specialty certification
% of Coursework From Online or Distance Learning	56.6%	86.5%	68.4%	52.8%	65.6%	59.9%

Note: Number of enrolled cases = 432. Data are weighted to represent all RNs with active licenses.

Nursing competency is achieved through both education and experience. Figure 2.16 presents reported years of experience, excluding years during which nurses did not work in nursing. Nearly 37 percent of California's active nurses have fewer than 10 years of experience, while 37.8 percent have at least 20 years of experience.

Figure 2.16. Years of experience in nursing among RNs with active California licenses who reside in California, 2014



Note: Number of cases=5,047. Data are weighted to represent all RNs with active licenses.

Regional and Inter-State Mobility of California RNs

Some nurses relocated between the date the sample frame was provided by the Board of Registered Nursing (February 26, 2014) and when they returned their survey. Table 2.29 estimates the numbers and percentages of people who changed regions within California and who moved out of California between February and when they responded. In total, an estimated 15,328 RNs changed regions (4.6% of state-resident RNs), and 9,853 left the state (3.0%). Nurses who lived in the Central Coast, Northern counties, San Francisco Bay Area, and Los Angeles were most likely to have changed regions. Those residing in Los Angeles and the San Francisco Bay Area were more likely to have moved out of California than those in other regions.

Table 2.29. Residence changes between February 2014, and time of response (April-September, 2014)

BRN Region	Estimated number changing regions	% changing regions	Estimated number leaving California	% leaving California
Northern counties	511	5.1%	277	2.7%
Sacramento	1,107	4.7%	569	2.4%
San Francisco Bay Area	3,797	5.0%	2,368	3.1%
Central Valley/Sierra	1,282	4.0%	565	1.8%
Central Coast	516	5.6%	268	2.9%
Los Angeles	5,309	4.9%	4,141	3.8%
Inland Empire	1,373	3.8%	784	2.1%
Border counties	1,433	4.5%	882	2.8%

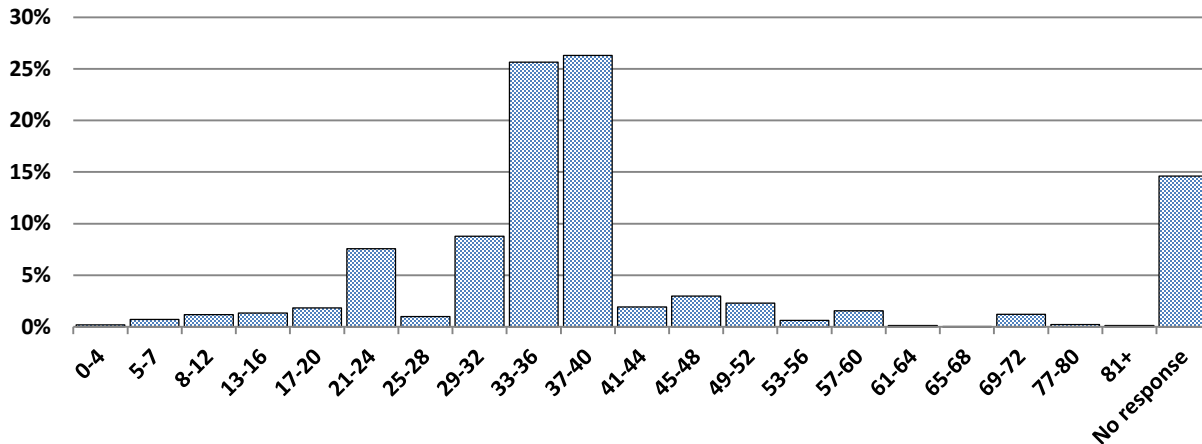
Note: Number of movers = 387. Data are weighted to represent all RNs with active licenses. The file from which nurses were sampled was dated February 26, 2014. Surveys were mailed on April 4, 2014, and data collection closed on September 4, 2014.

Chapter 3. Employment, Wages, and Satisfaction of Registered Nurses

How Much Do RNs Work?

As discussed in Chapter 2, most RNs work in the nursing field. The number of hours of work provided by these nurses is also 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 half of these nurses work 33 hours per week or more. The average number of hours worked per week has changed very little over time, as seen in Table 3.1. In 1990, the average number of hours worked per week was 36.1; in 2014, it was 36.5.

Figure 3.1. Distribution of hours per week worked by nurses, for California residents, 2014



Note: Number of cases=4,129. 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	2012	2014
Mean number of hours	36.1	36.3	36.3	35.6	35.2	36.5	36.0	36.0	36.5
Standard deviation	12.9	12.3	11.0	11.9	*	*	*	*	*
Number of cases	2,251	2,212	2,470	3,064	3,510	3,984	4,605	3,953	3,542

*A standard deviation computation was not feasible with the weighting scheme used with the 2006-2014 data.

Note: Data (2006-2014) 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 has changed very little between 2004 and 2014, ranging between 58.8 and 60.4 percent. Over the same period, the average number of hours worked per week by full-time nurses dropped slightly from 41.8 hours in 2004 to 40.9 hours in 2014. Average hours for part-time nurses rose from 22.8 hours in 2004 to 24.7 hours in 2014.

Table 3.2. Number of hours per week usually worked by registered nurses residing in California, 2004-2014

	2004	2006	2008	2010	2012	2014
Working full-time (more than 32 hours per week)	58.8%	61.9%	60.3%	60.9%	60.3%	60.4%
Mean hours per week	41.8	40.9	41.1	40.6	40.3	40.9
Working part-time (32 hours or less per week)	28.7%	24.8%	23.3%	24.1%	21.8%	20.5%
Mean hours per week	22.8	22.4	24.4	24.7	24.4	24.7
Working, unknown hours	*	*	3.4%	2.4%	3.0%	2.3%
Not working	12.5%	13.3%	13.1%	12.6%	14.9%	16.6%

* Data not available.

Note: 2014 number of cases=5,047. Data (2006-2014) 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. Approximately 40 percent of working RNs residing in California normally work 12-hour shifts, and 43.4 percent work 8-hour shifts. The share of RNs working 12 hour shifts increased between 1997 and 2008, and has remained relatively stable since then.

Table 3.3. Number of hours per day usually worked by registered nurses residing in California, 1997-2014

	1997	2006	2008	2010	2012	2014
Under 5 hours	2.5%	1.7%	0.7%	1.1%	0.6%	0.7%
5-7.5 hours	6.8%	4.0%	3.9%	3.8%	2.5%	2.8%
8 hours	45.0%	42.8%	39.5%	41.7%	44.4%	43.4%
8.5-11.5 hours	18.6%	15.3%	13.5%	11.6%	11.1%	11.9%
12 hours	24.4%	34.7%	40.8%	40.1%	40.3%	39.6%
More than 12 hours	2.6%	1.6%	1.5%	1.8%	1.2%	1.7%
Number of cases	2,433	3,109	3,559	3,986	3,313	3,338

Note: This question was not asked in 1990 or 1993. Columns might not total 100% due to rounding. Data (2006-2012) 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;” and from 2006 on, 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 2006 and 2014, from 49.1 percent to 35.3 percent. This change is the result of decreases in the shares of RNs working all levels of overtime. The share working more than 8 hours of overtime per week dropped from 13.4 to 9.2 percent between 2006 and 2014, while the share working one to 2.5 hours per week declined from 14.6 to 12.3 percent in this same period.

Table 3.4. Number of overtime hours per week worked by registered nurses residing in California, 1997-2014

	1997 overtime without advance notice	2006: any overtime	2008: any overtime	2010: any overtime	2012: any overtime	2014: any overtime
None or less than one hour	36.6%	50.9%	57.0%	65.5%	68.5%	64.7%
1-2.5 hours	31.3%	14.6%	14.3%	11.8%	10.7%	12.3%
3-4 hours	15.1%	10.6%	7.6%	6.6%	6.1%	6.7%
5-6 hours	6.7%	6.4%	4.3%	3.4%	3.8%	2.9%
7-8 hours	4.0%	4.1%	4.6%	4.0%	3.4%	4.3%
More than 8 hours	6.4%	13.4%	12.2%	8.7%	7.5%	9.2%
Number of cases	2,309	3,313	3,952	4,605	3,953	3,728

Note: Columns might not total 100% due to rounding. Data (2006-2014) 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, 87.4 percent of RNs were not normally on-call in 2014. Among those who did normally have some on-call, the number of hours per week on-call varies widely. About 5 percent of RNs are on call up to 10 hours per week, while 2 percent are on call 30 or more hours per week.

Table 3.5. Number of unworked on-call hours per week by registered nurses residing in California, 2008-2014

	2008	2010	2012	2014
No on-call hours	86.2%	86.6%	89.3%	87.4%
0.5-9 hours	5.7%	6.0%	4.1%	4.7%
10-19 hours	4.3%	3.7%	3.9%	4.6%
20-29 hours	1.0%	1.4%	1.4%	1.4%
30 or more hours	2.9%	2.3%	1.4%	2.0%
Number of cases	3,951	4,615	3,960	4,129

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 - 2014, 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 0.9 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, 2006-2014

	2006	2008	2010	2012	2014
46-52 weeks per year (11-12 months)	86.3%	85.3%	98.0%	98.2%	98.4%
36-45 weeks per year (9-10 months)	7.7%	10.6%	0.8%	0.7%	0.7%
Less than 36 weeks per year	4.6%	4.1%	1.1%	1.1%	0.9%

Note: 2014 number of cases=4,020. 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. Table 3.7 presents the type of employment arrangement for nurses' principal nursing positions, by residence. More than 96 percent of working RNs residing in California are regular employees in their principal positions. Only one percent are employed through temporary agencies, 1.4 percent are self-employed, and less than one percent reported working as a travel nurse. In contrast, 9.6 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, 2014

	California residents	Non-California residents
Regular employee	96.1%	82.6%
Employed through a temporary service agency	1.0%	2.4%
Self-employed	1.4%	2.7%
Travel nurse or employed through a traveling nurse agency	0.7%	9.6%
No response	0.8%	2.7%

Note: Number of cases for both residents (4,129) and non-residents (401) =4,530. 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. The mix of job titles among California's working RNs have been remarkably consistent over time. Most RNs report that they are staff nurses or direct patient care providers; the share has ranged between 56 and 63 percent in every survey year except 2004 and 2014. 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 shares of "other" titles. In 2014, a new category was added to the survey "Direct care and Charge nurse" because a growing number of respondents were indicating that they had both roles in their principal position. It is common for a direct patient care RN to take on charge nurse duties once or twice a week while continuing direct patient care duties. This category accounted for 16.6 percent of RNs in 2014, while 50.8 percent indicated they worked only as a staff nurse. The share of RNs in management positions was 11.4 percent in 2014. The share of nurses reporting their title as patient care coordinator, case manager, or discharge planner was 5 percent in 2014, which is an increase in comparison with previous years. No other job title accounts for more than 4 percent of the RN population.

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

Job Title	1993	1997	2004	2006	2008	2010	2012	2014
Staff Nurse/Direct patient care provider	59.5%	62.1%	53.3%	61.2%	58.5%	59.8%	56.1%	50.8%
Charge Nurse	*	*	*	*	7.6%	8.4%	10.8%	1.6%
Staff Nurse and Charge Nurse (both)	*	*	*	*	0.8%	*	*	16.6%
Senior management, any setting	*	*	*	1.0%	1.9%	1.5%	1.9%	1.5%
Senior management, service setting	3.5%	4.6%	1.7%	*	*	*	*	*
Middle management, any setting	*	*	*	7.7%	5.8%	6.0%	5.8%	5.0%
Middle management, service setting	14.5%	11.4%	6.3%	*	*	*	*	*
Front-line management	*	*	11.1%	5.9%	3.0%	2.9%	3.1%	4.9%
Management/Administration, academic setting	0.2%	0.3%	0.1%	*	*	*	*	*
Clinical Nurse Specialist	3.2%	3.1%	2.3%	1.6%	1.1%	0.8%	0.9%	0.5%
Certified Registered Nurse Anesthetist	0.5%	0.3%	0.4%	0.4%	0.4%	0.4%	0.6%	0.3%
Certified Nurse Midwife	0.2%	0.1%	0.2%	0.2%	0.3%	0.2%	0.2%	0.4%
Nurse Practitioner	1.8%	3.2%	3.6%	4.7%	4.1%	3.4%	3.5%	3.6%
Educator, service setting/clinical nurse educator	2.0%	0.9%	2.0%	1.7%	1.6%	1.3%	1.1%	1.7%
Educator, academic setting	1.3%	1.0%	1.0%	2.5%	1.5%	1.4%	1.4%	1.3%
School Nurse	1.2%	2.0%	1.9%	1.8%	1.8%	1.5%	1.1%	1.4%
Public Health Nurse	2.2%	1.5%	1.7%	1.9%	1.3%	1.5%	1.2%	1.5%
Patient care coordinator/case manager/discharge planner	*	*	*	3.9%	4.2%	4.0%	3.9%	5.0%
Discharge Planner	*	*	0.1%	*	*	*	*	*
Case Manager	4.5%	5.6%	3.9%	*	*	*	*	*
QI/Utilization Review Nurse	*	*	0.7%	1.7%	1.9%	1.3%	2.0%	2.1%
Occupational Health Nurse	*	*	*	0.3%	0.2%	0.2%	0.2%	0.1%
Telenursing	*	*	*	0.7%	1.3%	1.1%	1.0%	0.8%
Nurse Coordinator	*	*	*	*	0.2%	1.0%	1.1%	*
Consultant	0.9%	1.1%	0.7%	*	0.3%	*	*	*
Researcher	0.8%	0.4%	0.6%	*	0.2%	0.2%	0.3%	0.4%
Infection Control Nurse	*	*	*	*	*	*	3.1%	0.3%
Clinical Nurse Leader	*	*	*	*	*	*	0.3%	0.2%
Other	3.3%	2.6%	8.3%	2.9%	2.0%	2.7%	2.5%	2.4%
Number of cases	2,190	2,375	2,925	3,675	4,108	4,689	4,046	4,097

* Question was not asked in the survey year.

Note: Columns might not total 100% due to rounding. Data (2006-2014) are weighted to represent all RNs with active licenses.

Hospitals are the dominant employers of RNs, as seen in Table 3.9. In 2014, 66.8 percent of RNs reported that they worked in some department of a hospital; this share has increased by 4 percent from 2006, after having declined from 1990 to 1997. Hospital-based ambulatory care departments have seen the largest increase of RNs in a hospital setting, going from 4.8 percent in 2006 to 10.1 percent in 2014. The percent of RNs who work in extended care, skilled nursing facilities, or rehabilitation facilities has gradually risen to 8.5 percent after a low of 2.3 percent in 2006. Furthermore, the percentage of RNs working in public health has dropped from 3.4 percent in 1990 to 1.5 percent in 2014. Other common workplaces of RNs residing in California include ambulatory care settings, such as clinics and outpatient surgery centers (5.4%), case management (2.1%), home health agencies (3.7%), and mental health/drug and alcohol treatment (2.1%).

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	2012	2014
Acute hospital	67.9%	64.3%	60.2%	60.9%	62.7%	64.4%	64.3%	63.6%	66.8%
Hospital, acute care department	*	*	*	*	55.6%	56.3%	53.4%	53.6%	50.5%
Hospital, nursing home unit	*	*	*	*	0.5%	0.5%	0.4%	0.7%	1.1%
Hospital-based ambulatory care department	*	*	*	*	4.8%	5.5%	7.8%	7.9%	10.1%
Hospital-based ancillary department	*	*	*	*	1.8%	1.4%	2.3%	1.4%	0.7%
Hospital, other department	*	*	*	*	*	0.7%	0.4%	*	4.4%
Skilled nursing/extended care/rehabilitation	5.6%	5.1%	7.1%	4.4%	2.3%	3.0%	4.4%	6.1%	8.5%
University or college	*	*	*	*	3.3%	*	*	*	*
Academic nursing program	1.3%	1.5%	0.8%	0.9%	*	1.4%	1.6%	1.3%	1.6%
Public health dept/community health agency	3.4%	2.5%	2.7%	2.1%	2.5%	2.6%	1.7%	1.7%	1.5%
Home health nursing agency or service	3.8%	5.9%	6.8%	3.3%	3.0%	2.5%	3.3%	2.4%	3.7%
Hospice	*	*	*	1.3%	1.7%	1.4%	1.4%	1.6%	0.2%
Ambulatory care setting (office, surgery center)	11.8%	10.9%	9.0%	10.8%	6.3%	9.3%	8.1%	7.5%	5.4%
Dialysis	*	*	*	*	1.5%	1.2%	1.6%	1.4%	0.9%
Telenursing organization/call center	*	*	*	0.6%	*	1.1%	0.7%	0.8%	0.6%
Occupational health/employee health	1.5%	0.8%	0.7%	0.3%	0.5%	0.3%	0.3%	0.6%	0.1%
School health (K-12 or college)	2.1%	1.6%	1.5%	2.0%	1.8%	2.1%	1.7%	1.4%	1.5%
Mental health/drug and alcohol treatment	*	2.9%	1.8%	2.0%*	3.8%	0.8%	1.9%	2.3%	2.1%
Forensic setting (correctional facility, prison, jail)	*	*	*	1.1%	2.0%	1.2%	1.9%	1.6%	1.5%
Government agency (local, state, federal)	*	*	*	2.7%	1.4%	1.0%	1.7%	1.2%	1.4%
Case management/disease management	*	*	*	*	*	2.3%	2.2%	2.5%	2.1%
Self employed	1.1%	0.7%	0.5%	0.8%	0.5%	0.7%	0.7%	0.5%	0.3%
Other	1.5%	3.8%	8.9%	6.9%	6.9%	4.7%	2.6%	3.0%	3.4%
Number of cases	2,212	2,164	2,444	2,971	3,661	4,080	4,671	4,049	4,092

* Question was not asked in the survey year.

Note: Columns might not total 100% due to rounding. Data (2006-2014) are weighted to represent all RNs with active licenses. Some organizations listed in the survey were combined with others to produce this table; in 2008-2014, urgent care was included as part of ambulatory care. Nurses who reported that their setting was an inpatient mental health facility (1.7%) were combined with those who reported outpatient mental health (0.4%). Nurses who reported working in long-term acute care settings were grouped with “other” in 2008, but in 2010, 2012, and 2014 were grouped with skilled nursing/extended care/rehabilitation.

Nearly 14 percent of RNs reported that they do not provide direct patient care at their primary place of employment (13.6%). 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 11.6 percent working in this area. Other common areas include critical care (8.9%), ambulatory care (8.2%), perioperative care (9.3%), obstetrics/gynecology (5.5%), emergency (7.4%), telemetry (4.2%), neonatal (3.3%), geriatrics (4.1%), and psychiatric/mental health/substance abuse (3.3%). There has been a trend since 1990 toward a smaller share of RNs working in medical-surgical, critical care, public health, and geriatrics, although the percentage working in geriatrics has increased from 2.5 percent in 2008 to 4.1 percent in 2014.

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	2012	2014
Medical/surgical	34.0%	31.0%	26.3%	16.0%	17.1%	13.1%	11.7%	11.2%	11.6%
Ambulatory care	*	*	*	*	*	11.6%	9.3%	9.4%	8.2%
Cardiology	*	*	*	*	*	2.2%	2.6%	3.0%	2.3%
Corrections/forensic setting	*	*	*	*	1.4%	0.9%	1.6%	1.0%	1.2%
Critical care/ICU	15.9%	16.3%	17.1%	13.1%	11.8%	11.4%	10.7%	8.4%	8.9%
Dialysis	*	*	*	*	1.7%	1.4%	1.9%	1.9%	1.5%
Emergency/trauma/urgent care	5.4%	6.1%	5.8%	5.4%	6.4%	6.6%	6.8%	7.2%	7.4%
Geriatrics	5.6%	6.5%	10.3%	4.2%	2.5%	2.5%	2.7%	3.5%	4.1%
Home Health	*	*	*	3.2%	2.8%	2.7%	2.9%	2.8%	2.7%
Hospice	*	*	*	1.4%	1.7%	1.6%	1.4%	2.0%	1.6%
Mother-baby/newborn nursery	*	*	*	*	*	3.1%	2.8%	3.2%	3.1%
Neonatal/newborn	*	*	*	4.3%	4.1%	3.8%	3.3%	3.6%	3.3%
Obstetrics/labor & delivery/reproductive health	9.4%	10.1%	9.7%	8.2%	6.9%	4.6%	5.5%	6.3%	5.5%
Oncology	*	*	*	*	*	2.4%	2.2%	2.6%	2.1%
Pediatrics	5.6%	4.5%	6.3%	4.9%	4.5%	3.3%	3.2%	3.0%	4.6%
Perioperative/post-anesthesia/anesthesia	6.3%	7.2%	8.4%	7.8%	9.1%	6.8%	7.8%	7.9%	9.3%
Public health/community health	7.7%	7.9%	3.7%	1.9%	1.8%	1.5%	1.3%	1.5%	1.5%
Psychiatric/mental health/substance abuse	5.8%	4.7%	3.9%	3.8%	6.0%	3.1%	3.6%	3.4%	3.3%
Rehabilitation	*	*	*	1.8%	2.1%	1.6%	1.6%	2.1%	1.6%
School health (K-12 or postsecondary)	*	*	*	1.7%	2.3%	2.2%	1.8%	1.3%	1.3%
Step-down or transitional bed unit	*	*	*	*	2.4%	1.9%	1.6%	1.9%	1.7%
Telemetry	*	*	*	*	*	5.1%	4.8%	3.6%	4.2%
Work in multiple areas, do not specialize	*	*	*	*	1.5%	2.3%	2.3%	1.4%	0.9%
Other	4.2%	5.8%	8.5%	21.9%	13.9%	4.3%	6.6%	8.0%	6.6%
Number of cases	2,233	2,186	2,347	2,841	3,248	3,546	4,044	3,498	3,486

* Question was not asked in the survey year.

Note: Columns might not total 100% due to rounding. Data (2006-2014) 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. Starting 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. Approximately two-thirds of nurses working in hospital acute care departments are staff nurses (67.7%), while 26.1 percent are in some type of management role. In ambulatory departments of hospitals, 58 percent of RNs residing in California are staff nurses, while 24 percent are involved in management. There is a greater share of advanced practice nurses (7.1%) in hospital-based ambulatory departments than in hospital acute-care departments (1.9%).

In skilled nursing and extended care facilities, 67.3 percent of RNs are in management positions, 10.5 percent are case managers/UR/QI, and 9.2 percent work as staff nurses. Ambulatory care has the largest share of nurses working as case managers and related job titles (23.1%), while 39.7 percent report that they are staff nurses. Almost twenty percent of nurses in home health agencies are in management roles, and the largest share of advanced practice nurses report working in home health (37.5%).

Table 3.11. Job title that best describes the principal nursing position of working registered nurses residing in California, by work setting, 2014

	Staff nurse	Management (any level)	Advanced practice nurse	Case manager, UR, QI	Other	No Response	Number of cases
Hospital, acute care department	67.7%	26.1%	1.9%	1.4%	1.9%	1.1%	1,958
Hospital-based ambulatory	58.0%	24.0%	7.1%	4.6%	5.3%	1.0%	422
Skilled nursing/extended care	9.2%	67.3%	0.3%	10.5%	9.5%	3.2%	123
Home health agency	31.8%	18.9%	37.5%	1.2%	10.4%	0.2%	168
Ambulatory care setting	39.7%	24.3%	1.7%	23.1%	9.1%	2.2%	170

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 40.6 percent of diploma RNs and 35.4 percent of nurses with an MSN work in hospital acute-care departments. The second most common setting for RNs with a nursing diploma was hospital ambulatory care departments (11.8%). Nearly 6 percent of master’s-educated RNs work in universities and colleges, most likely as educators, another 6 percent in public health clinics, and 8.2 percent and 6.8 percent are in ambulatory care settings (hospital-based and non-hospital, respectively). 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 hospital-based ambulatory care settings (11.5% versus 9.3%).

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, 2014

	Diploma	ADN	BSN	MSN
Hospital, acute care department	40.6%	52.9%	56.4%	35.4%
Hospital, nursing home unit	2.1%	1.7%	0.7%	0.3%
Hospital-based ambulatory care department	11.8%	11.5%	9.3%	8.2%
Hospital-based ancillary department	1.4%	0.9%	0.6%	0.2%
Skilled nursing/extended care facility	5.0%	4.4%	4.4%	1.6%
Mental health/substance abuse	1.7%	2.9%	1.5%	2.5%
Forensic setting (correctional facility, prison, jail)	2.8%	1.3%	1.4%	1.1%
Ambulatory care setting	2.8%	3.5%	2.8%	6.8%
Public health clinic	0.4%	1.5%	1.5%	5.9%
School nursing (K-12)	0.0%	0.5%	1.5%	5.0%
Urgent care	1.6%	0.4%	0.2%	0.0%
Ambulatory surgery center	0.5%	1.8%	1.6%	1.5%
Occupational health	0.1%	0.1%	0.1%	0.2%
Public health, not clinic	1.5%	1.0%	1.8%	1.8%
Government agency (local, state, federal)	2.6%	0.7%	1.3%	2.5%
Outpatient dialysis center	1.5%	1.2%	0.8%	0.3%
University or college	0.1%	0.4%	0.6%	5.5%
Home health agency	9.1%	3.9%	3.2%	3.1%
Case management	4.5%	1.7%	1.9%	2.7%
Telenursing	2.1%	0.6%	0.4%	0.4%
Self-employed	0.1%	0.4%	0.2%	0.5%
Other	3.0%	3.1%	2.7%	6.2%
Number of cases	206	1,430	1,771	612

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 presents analogous information for nurses with specific certifications. Large shares of respondents with public health certifications reported working in acute-care departments in hospitals (39.6%), hospital-based ambulatory care departments (8.8%), public health departments (6.1%), ambulatory care settings (5.5%), and school nursing (5.7%). Nurse practitioners tend to work in ambulatory care settings (20.2%), acute care departments of hospitals (23.2%), hospital-based ambulatory care departments (10.6%), public clinics (13.7%), universities and colleges (9.0%), school nursing (3.3%), and outpatient and inpatient mental health (2.8%). Clinical nurse specialists are most often employed in acute care departments of hospitals (43.2%), hospital-based ambulatory care departments (10.6%), other hospital settings (9.8%), home health nursing agencies (5.4%), nursing home/extended care (5.2%), and ambulatory care settings (4.6%).

Table 3.13. Types of organizations in which registered nurses residing in California work the most hours each month, by specialty certification, 2014

	Public health nurse (certified)	Nurse Practitioner	Clinical nurse specialist
Hospital, acute care	39.6%	23.2%	43.2%
Hospital, ancillary unit	0.4%	0.0%	0.3%
Hospital, ambulatory care	8.8%	10.6%	10.6%
Nursing home/extended care	2.4%	0.4%	5.2%
Hospital, other	6.2%	3.6%	9.8%
Mental health	1.8%	2.8%	0.7%
Correctional facility	1.3%	1.1%	1.1%
Inpatient hospice	0.4%	0.9%	0.0%
Ambulatory care setting	5.5%	20.2%	4.6%
Public clinic	3.7%	13.7%	0.0%
School nursing (K-12)	5.7%	3.3%	1.9%
Occupational health	0.1%	0.3%	0.0%
Public health, not clinic	6.1%	0.1%	0.0%
Government agency	3.0%	2.6%	5.1%
University/college	4.3%	9.0%	7.1%
Home health agency	3.0%	2.0%	5.4%
Case management	1.4%	0.0%	0.0%
Call center	0.7%	0.1%	0.0%
Self-employed	0.2%	1.3%	0.0%
Other	4.1%	4.8%	4.0%
Number of cases	741	246	87

Note: Columns might not total 100% due to rounding. 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 (38.3%). However, the mean number of years nurses have worked with their current employer has increased somewhat over time, from 7 years in 1990 to 9.4 years in 2014.

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	2012	2014
Less than 5 years	49.4%	50.4%	40.8%	47.1%	46.3%	46.1%	45.2%	43.4%	38.3%
5-9 years	22.1%	24.1%	24.8%	20.4%	21.4%	19.4%	22.7%	24.1%	24.9%
10-14 years	14.4%	14.1%	13.9%	13.2%	8.7%	8.2%	11.9%	12.8%	15.7%
More than 14 years	14.1%	11.3%	20.5%	19.3%	23.6%	26.3%	20.2%	19.7%	21.2%
Mean Number of Years	7.0	6.5	8.2	8.1	8.7	8.7	8.7	8.9	9.4
Number of cases	2,222	2,168	2,424	3,016	3,598	4,020	4,617	3,842	4,128

Note: Columns might not total 100% due to rounding. Data (2006-2014) 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 34.0 percent of RNs in this setting reporting such a

long tenure. Other ambulatory care settings also have a relatively high share of RNs with a long tenure of 15 or more years (28.4%). Skilled nursing facilities exhibit the lowest employer tenures, with 68.2 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, 2014

	Less than 5 years	5-9 years	10-14 years	More than 14 years
Hospital, acute care department	36.8%	27.3%	15.9%	20.0%
Hospital-based ambulatory	28.9%	18.0%	19.0%	34.0%
Skilled nursing/extended care	68.2%	20.9%	2.8%	8.1%
Public/community health agency	52.6%	26.8%	7.1%	13.4%
Home health agency	53.7%	24.6%	11.4%	10.4%
Ambulatory care setting	39.3%	16.7%	15.6%	28.4%
Number of cases	1,472	1,017	648	991

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. More than 43 percent of direct patient care nurses and over a third of nurse practitioners and patient care coordinators/case managers/discharge planners have been with their current employer for less than five years, as have almost 30.6 percent of school nurses. Nurses in senior management, front-line management and school nursing tend to have the longest tenures with their current employers. However, roughly a third of nurses in these positions report being with their current employer for 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, 2014

	Less than 5 years	5-9 years	10-14 years	15 or more years
Direct patient care provider/staff nurse	43.7%	26.4%	13.6%	16.3%
Senior management	33.6%	21.2%	8.7%	36.5%
Front-line management	29.5%	24.3%	20.8%	25.4%
Nurse Practitioner	38.1%	20.4%	16.4%	25.1%
School Nurse	30.6%	30.7%	12.8%	26.0%
Public Health Nurse	28.4%	19.4%	29.1%	23.1%
Patient care coordinator / case manager / discharge planner	38.1%	25.0%	13.3%	23.8%
Number of cases	1,472	1,017	648	991

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

Beginning in 2008, 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. The data reported in 2014 was very similar as that in 2012. Ninety-four percent of California residents work a full-year job, and 3.9 percent work in positions that are less than a full year. The share of non-California residents that work part-year jobs is slightly higher at 7.2 percent. Note that the jobs of non-California residents are likely to be outside California; non-California residents are discussed in more detail below.

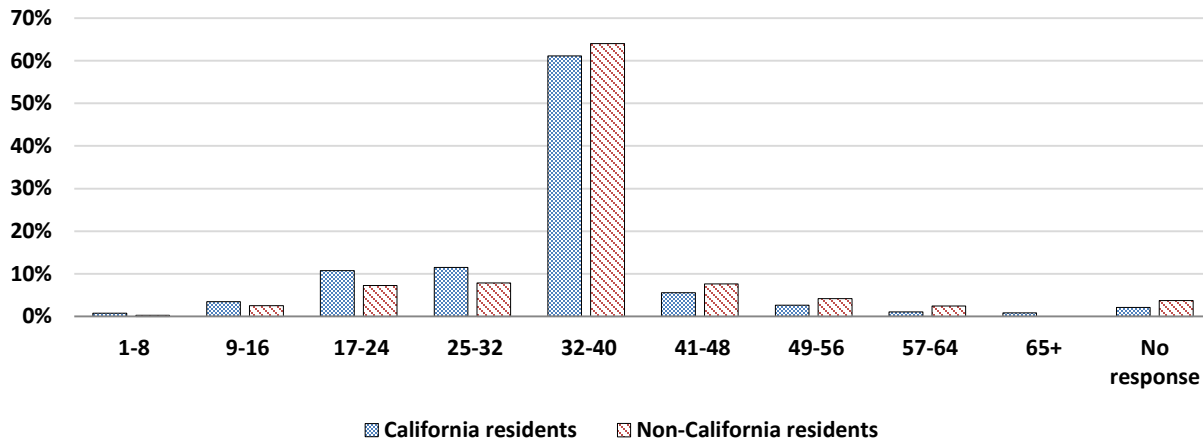
Table 3.17. Number of weeks per year registered nurses work in their primary nursing position, California residents and non-residents, 2014

	California residents	Non-California residents
46-52 weeks per year	93.8%	87.2%
36-45 weeks per year	2.8%	5.2%
Less than 36 weeks per year	1.1%	2.0%
No Response	2.3%	5.7%

Note: Number of total cases for both residents (4,129) and non-residents (401)=4,530. 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. About 76 percent of nurses who live in California work more than 32 hours per week; this is a notable increase compared with the 2012 survey, when more than 71 percent worked 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 78.4 percent.

Figure 3.2. Distribution of hours per week in principal nursing position, for California residents and non-residents, 2014



Note: Number of cases for both residents (4,129) and non-residents (401)=4,530. 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 10.4 hours per day and 35.4 hours per week. Staff nurses averaged 2.4 hours of overtime per week. In contrast, school nurses average 7.0 hours per day, and 31.1 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 8.8 hours per day and 45.3 hours per week. Front-line managers average 40.7 hours of work per week. Public health nurses work the fewest overtime hours on average, but school nurses 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, 2014

	Hours per day	Hours per week	Overtime per week
Direct patient care provider/staff nurse	10.4	35.4	2.4
Senior management, any setting	8.8	45.3	1.9
Front-line management	8.9	40.7	2.2
Charge Nurse	9.36	38.6	2.2
Nurse Practitioner	8.8	36.5	2.2
School Nurse	7.0	31.1	0.9
Public Health Nurse	8.4	39.1	0.4
Patient care coordinator/case manager/discharge planner	8.4	37.2	1.5

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 11.0 hours per day, which is the longest average workday of all the settings. The shortest workdays are found in school nursing positions. The longest average workweeks are in correctional facilities at 40.4 hours per week, public health/community health agencies (39.0 hours), university/college (38.5 hours), and skilled nursing facilities (38.2 hours). Correctional facilities, inpatient mental health, hospital-based acute care settings, and skilled nursing facilities have the highest average number of overtime hours per week (4.0, 3.6, 2.5 and 2.3 hours, respectively).

Table 3.19. Average hours normally worked per day and per week for registered nurses residing in California, by work setting, 2014

	Hours per day	Hours per week	Overtime per week
Hospital, acute care department	11.0	36.4	2.5
Hospital, ambulatory care department	9.2	35.9	2.2
Skilled nursing/extended care facility	8.4	38.2	2.3
University or college	8.3	38.5	1.9
Public health department/community health agency	8.8	39.0	1.7
Home health nursing agency	8.4	36.5	2.4
Hospice	8.6	37.4	3.3
Private medical practice	8.2	33.8	1.5
Urgent care	8.9	36.4	1.8
Ambulatory surgery center	8.3	33.2	2.0
School nursing (K-12)	7.1	32.5	0.7
Outpatient Mental health	8.0	35.3	1.0
Inpatient Mental health	8.9	37.5	3.6
Forensic setting (correctional facility, prison, jail)	8.4	40.4	4.0

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 percentage 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. Percentage of time spent on specific job functions during a typical workweek for nurses residing in California, 2014

	0%	1-20%	21-40%	41-60%	61-80%	81-100%
Direct patient care & charting	13.0%	10.2%	10.5%	18.5%	28.6%	14.5%
Patient education	19.3%	60.3%	12.9%	2.1%	0.6%	0.1%
Indirect patient care	38.1%	46.4%	5.9%	2.4%	1.1%	1.4%
Teaching	47.6%	43.3%	2.6%	0.6%	0.5%	0.7%
Supervision	61.6%	22.0%	4.3%	3.2%	2.4%	1.9%
Administration	74.6%	15.5%	2.3%	1.2%	0.7%	0.9%
Non-nursing tasks	60.8%	34.0%	0.4%	0.1%	4.8%	0.0%
Research	80.8%	13.6%	0.3%	0.2%	0.1%	0.2%
Other	87.0%	4.9%	0.7%	0.6%	0.7%	1.4%

Note: Number of cases=4,129. 4.8 % 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 (69.3%), such as the Los Angeles region. Another 20.9 percent worked in large metropolitan counties with over 400,000 residents, such as Monterey or Fresno. Just under ten 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	2012	2014
Consolidated metropolitan area (over 1 million pop)	*	*	*	*	84.1%	84.0%	69.0%	68.5%	69.3%
Large metropolitan county (400,000 to 1 million)	*	*	*	*	7.6%	8.1%	18.7%	18.6%	20.9%
Small metropolitan county (50,000 to 400,000)	*	*	*	*	4.4%	5.1%	11.6%	12.6%	9.3%
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%	0.4%	0.5%
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	3,558	4,129

* 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 (2006-2014) 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 -2014, the estimated census population was used to perform the analysis.

Over 62 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 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	2012	2014
Less than 5 miles	21.5%	21.6%	16.4%	16.9%	16.5%	17.7%	17.7%	15.7%	16.7%
5-9 miles	24.0%	22.2%	20.5%	21.9%	23.0%	21.4%	20.7%	23.0%	21.2%
10-19 miles	31.8%	30.1%	31.7%	31.5%	30.7%	30.7%	31.8%	30.3%	30.7%
20-39 miles	18.4%	20.2%	24.2%	23.0%	22.7%	23.9%	22.7%	23.6%	24.4%
40 or more miles	4.3%	5.9%	7.2%	6.6%	7.2%	6.4%	7.1%	7.4%	7.0%
Mean in Miles	13.1	14.4	15.9	15.9	15.8	15.8	15.6	16.0	16.6

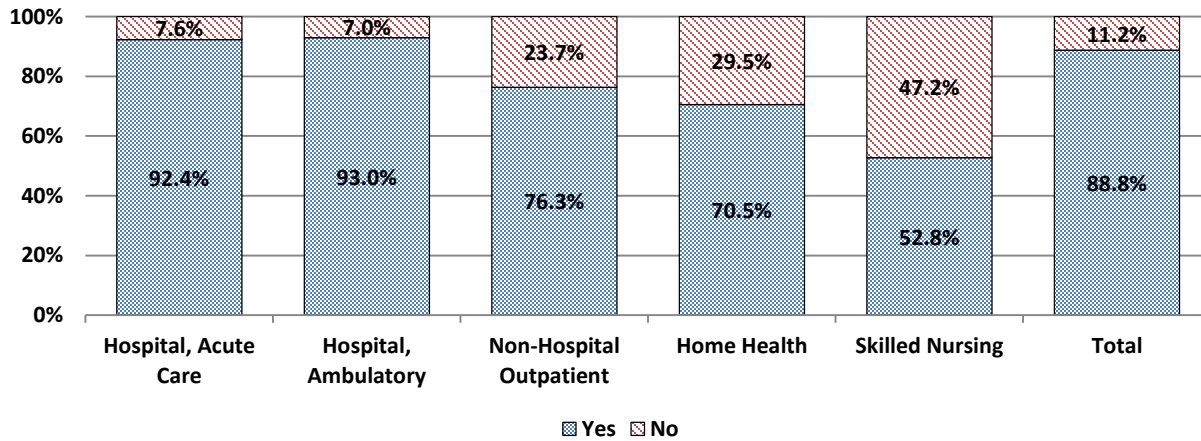
Note: Persons listing commutes greater than 150 miles were not considered to be making daily commutes in these surveys.

Note: 2014 number of cases=4,008. Columns might not total 100% due to rounding. Data (2006-2014) are weighted to represent all RNs with active licenses.

Use of Health Information Technologies

Nurses were asked whether they use an electronic health record (EHR) or electronic medical record (EMR) in their principal nursing position, and about their experience with these systems. As seen in Figure 3.3, 89 percent of RNs used an electronic health or medical record in their principal nursing position. More than 90 percent of RNs employed in hospital acute care departments used an EHR/EMR (92.4%), and 93 percent of those in ambulatory care departments of hospitals used these systems. About 76 percent of RNs in non-hospital outpatient care settings used EHRs/EMRs, as did 70.5 percent of those in home health. Only 52.8 percent of RNs in skilled nursing facilities used these systems.

Figure 3.3. Use of computerized health information systems in a principal nursing position, by setting, 2014



Note: Number of cases=2,899. Data are weighted to represent all RNs with active licenses.

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 2014. There was a slight decrease in the share of RNs that reported that systems work well or are at least generally helpful, from 79.9 percent in 2010 to 77.4 percent in 2014. In 2014, 4.8 percent of RNs thought electronic systems interfered with their delivery of patient care, which is higher than the 3.7 percent of RNs in 2010 who thought these systems interfered with delivery of care, but still an improvement as compared with 2008 (6.5%).

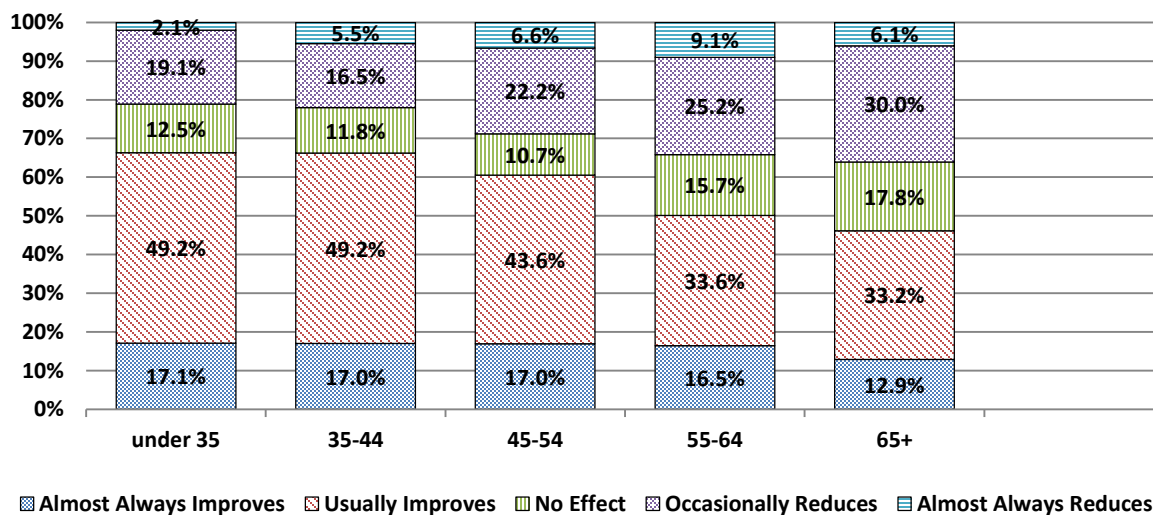
Table 3.23. Perceived usefulness of computerized health information systems, among working nurses who use them, California residents, 2006-2014

	2006	2008	2010	2012	2014
All systems work well	15.7%	12.3%	16.4%	16.3%	18.1%
Systems are generally helpful, but have some flaws	57.9%	61.0%	63.5%	60.2%	59.3%
Systems have problems that affect my work	19.1%	20.1%	16.4%	18.6%	17.7%
Systems interfere with my delivery of care	7.4%	6.5%	3.7%	4.9%	4.8%

Note: 2014 number of cases=3,294. Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

The 2014 questionnaire included a new questionnaire about perceptions of whether health information systems improve quality of care, for RNs who use EHRs or EMRs in their principal nursing positions. As presented in Figure 3.4, 60 percent of RNs think that health information technology almost always improves or usually improves quality of care. However, 21.2 percent think that technology occasionally reduces quality, and 5.9 percent believe it almost always reduces quality of care. There are notable differences across age groups. At least 60 percent of nurses under 55 years old think that health information technology usually or always improves quality of care, while less than half of RNs 55 years and older think this.

Figure 3.4. Perceived impact of computerized health information systems on patient care, among working nurses who use them, California residents, 2014

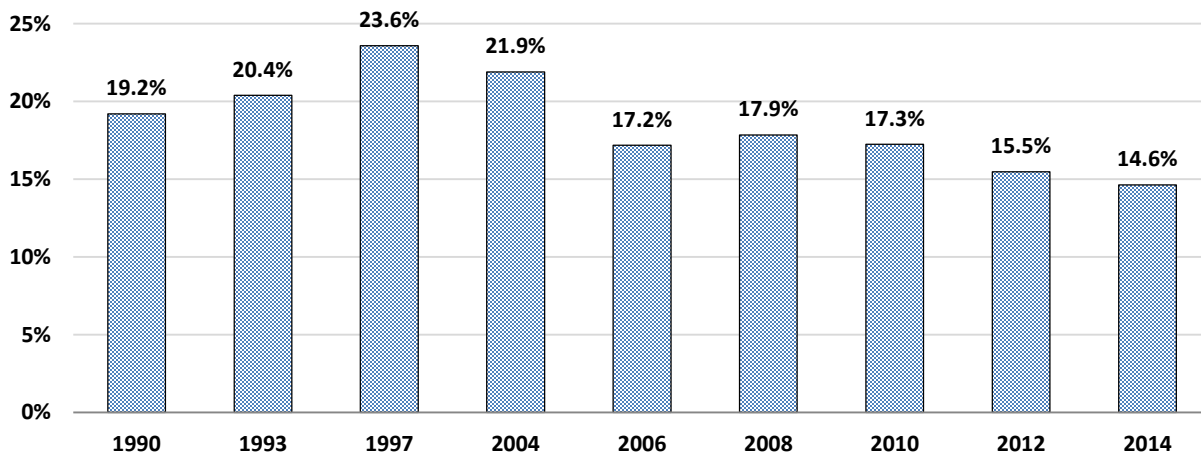


Note: 2014 number of cases=3,262. Data are weighted to represent all RNs with active licenses.

Additional Jobs Held by RNs

In 2014, just under 15 percent of RNs who worked and resided in California reported they held more than one nursing position (Figure 3.5). This rate of holding multiple positions is lower than that reported from 1990 through 2012. Among RNs who hold additional positions, 74.9 percent hold one more job, while 22 percent have two or more additional positions (Table 3.24).

Figure 3.5. Percentage of working registered nurses residing in California that holds more than one nursing position, by survey year



Note: 2014 number of cases=4,129. Data (2006-2014) 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	2012	2014
One	83.7%	88.4%	83.4%	84.8%	76.7%	80.3%	75.6%	76.2%	74.9%
Two	13.9%	10.3%	14.7%	12.3%	20.9%	18.7%	21.3%	21.3%	22.0%
Three or more	2.4%	1.3%	1.9%	2.9%	2.4%	1.0%	2.2%	1.5%	3.2%
Number of cases	424	447	518	784	627	652	696	548	529

Note: Columns might not total 100% due to rounding. Data (2006-2014) are weighted to represent all RNs with active licenses.

Nurses were asked to report the types of employment relationships they have in 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 sixteen percent of California residents were employed through a temporary agency for at least one of their additional positions, and 12.3 percent were self-employed. Among RNs residing outside California, 19.4 percent were employed through a temporary agency, and 12.7 percent reported that they were self-employed. A larger fraction of nurses outside of California reported being travel nurses at 5.1 percent compared to 1.9 percent of California nurses.

Table 3.25. Type of employment relationships for non-primary nursing positions, for California residents and non-residents, 2006-2014

	California residents					Non-California residents				
	2006	2008	2010	2012	2014	2006	2008	2010	2012	2014
Regular employee	72.0%	73.7%	77.1%	74.9%	72.4 %	55.7%	60.8%	50.3%	60.6%	64.4%
Employed through a temporary service agency	17.4%	15.3%	13.3%	10.0%	16.3 %	41.4%	30.7%	33.8%	24.1%	19.4%
Self-employed	17.1%	14.1%	11.4%	14.0%	12.3 %	11.0%	11.1%	11.9%	10.4%	12.7%
Employed through traveling agency	*	*	2.5%	2.2%	1.9%	*	*	12.7%	10.6%	5.1%

Note: The 2014 number of in-state cases=533. The number of out of state cases=64. 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. Nearly 39 percent of California residents and 30.8 percent of non-California residents report that at least one of their secondary nursing positions is in a hospital (72.4% and 64.4%, respectively). Twelve percent of California's resident nurses are engaged in teaching nursing or students in other health professions in a secondary position, while only 4.1 percent of non-residents teach. Fourteen percent of residents work in ambulatory care, and 9.6 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, 2006-2014

	California Residents					Non-California residents				
	2006	2008	2010	2012	2014	2006	2008	2010	2012	2014
Hospital staff	43.7%	44.0%	40.4%	40.6%	38.5%	58.5%	53.5%	53.2%	46.5%	30.8%
Public health/community health	2.0%	1.1%	1.4%	2.8%	2.1%	3.8%	4.3%	0.8%	4.9%	1.4%
Mental health/substance abuse	3.0%	3.1%	3.2%	2.4%	3.9%	3.4%	2.9%	4.6%	2.2%	1.4%
Nursing home/skilled nursing facility staff	4.6%	8.7%	6.5%	6.0%	6.0%	13.8%	9.8%	7.0%	9.9%	13.0%
Home health or hospice	8.5%	7.5%	7.6%	8.8%	9.6%	3.0%	0.0%	5.7%	6.4%	3.0%
Teaching health professions / nursing students	11.3%	9.4%	11.4%	11.4%	12.0%	7.8%	3.6%	5.2%	7.2%	4.1%
Ambulatory care, school health, occupational health	8.2%	8.9%	15.5%	12.0%	14.0%	7.8%	6.3%	9.6%	13.5%	9.3%
Long term acute	*	*	2.5%	3.6%	0.8%	*	*	1.9%	3.8%	5.1%
School health	*	*	1.4%	1.6%	1.4%	*	*	0.0%	0.0%	1.4%
Telehealth	*	*	2.0%	2.3%	1.7%	*	*	4.9%	4.2%	3.3%
Self-employed	*	*	3.8%	2.9%	2.6%	*	*	4.1%	3.2%	4.8%
Other	32.3%	26.8%	17.2%	15.7%	17.7%	23.6%	25.9%	15.0%	12.9%	13.8%

Note: The 2014 number of in-state cases=533, and the number of out of state cases=64. 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.

*No Data Available

Volunteering in Nursing

A small share of RNs who are employed in nursing positions also volunteer as nurses. As seen in Table 3.27, nearly 9 percent of RNs volunteered as RNs in 2014. Nurses with graduate degrees were more likely to be volunteering than other RNs; 13.2 percent of RNs with master's degrees and 19.3 percent of RNs with doctoral degrees volunteer as RNs or advanced practice nurses.

Table 3.27. Rate of volunteering by highest educational attainment for all employed RNs, 2014

	Diploma	Associate's Degree	Bachelor's Degree	Master's Degree	Doctoral Degree	Overall
2012	5.7%	7.6%	8.5%	15.3%	24.6%	8.8%
2014	8.7%	7.1%	8.5%	13.2%	19.3%	9.0%

Note: 2014 number of cases = 4,005. Data are weighted to represent all RNs with active licenses.

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 3.28 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 through 2014, respondents could indicate both a temporary and a traveling agency, and thus totals do not add to 100 percent in those years. Only 2.5 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 6.5 percent work for temporary agencies or registries.

Table 3.28. Shares of nurses that work with a temporary agency, traveling agency, or registry for any job, 2006-2014

	California residents					Non-California residents				
	2006	2008	2010	2012	2014	2006	2008	2010	2012	2014
Temporary agency or registry	3.4%	2.9%	3.3%	2.2%	2.5%	9.5%	6.6%	7.8%	5.4%	6.5%
Traveling agency	1.2%	1.2%	0.6%	0.6%	0.5%	19.8%	15.0%	8.7%	10.8%	8.7%
Neither temporary nor traveling agency	95.4%	95.9%	96.3%	97.4%	97.0%	70.7%	78.5%	84.8%	84.1%	84.8%

Note: 2014 Total number of cases for both residents (4,129) and non-residents (401)=4,530. Data are weighted to represent all RNs with active licenses. In 2010, 2012, and 2014, 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 3.29. For nurses residing in California in 2014, control of their schedule was the dominant reason (40.2%), followed by supplemental income (35%). Other common reasons for temporary and traveling work were wage (27.8%), to maintain skills or get experience (25%), and to have control of work location (19.7%). Over 14 percent said they were doing agency/registry work while waiting for a desirable permanent position, and another 17.5 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 3.29. 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	2012	2014
Wages	75.0%	68.5%	59.4%	58.4%	59.5%	58.6%	28.0%	38.7%	27.8%
Benefits	4.3%	2.1%	4.4%	3.1%	5.7%	7.9%	1.1%	0.0%	0.2%
Control of schedule	85.3%	68.5%	56.9%	60.1%	57.2%	56.9%	52.6%	49.2%	40.2%
Control of work location	58.6%	32.2%	30.6%	42.3%	54.1%	39.8%	31.1%	30.4%	19.7%
Supplemental income	*	*	*	48.2%	36.6%	42.6%	46.2%	40.9%	35.0%
Control of work conditions	*	*	*	26.3%	26.1%	24.2%	9.3%	15.2%	6.6%
Maintain skills/get experience	*	*	*	25.6%	27.3%	22.5%	25.9%	36.6%	25.0%
Waiting for a desirable permanent position	6.0%	14.4%	19.4%	15.0%	12.8%	16.1%	16.5%	25.5%	14.3%
Travel/see other parts of the country	*	*	*	*	15.4%	15.8%	6.7%	8.1%	10.1%
Unable to find permanent RN job/insufficient primary hours	*	*	*	*	*	*	13.8%	23.3%	17.5%
Other	24.1%	17.8%	21.9%	10.8%	16.1%	12.9%	5.3%	3.8%	12.8%
Number of cases	116	146	160	198	114	125	121	78	104

Note: Columns will not total 100% because respondents could select multiple items. Data (2006-2014) 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, 2010, 2012 and 2014 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 3.30 presents the total annual income received from all nursing positions by currently working RNs residing in California, for each survey year, and Figure 3.6 depicts the 2014 data. As seen in this table, there was modest growth in nurse earnings between 1993 and 1997, rapid growth between 1997 and 2008, modest growth between 2008 and 2010, and then small increases each year between 2010 and 2014. The slower growth from 2008 to 2014 is not surprising because reports of nursing shortage abated during this period. Thirty-five percent of RNs reported that they earned \$100,000 or more in 2014 (compared to 31.3 percent in 2012). Just over 49 percent of nurses reported earning between \$60,000 and \$100,000 in both 2012 and 2014 (49.7% and 49.2%, respectively). The number of nurses reporting earning \$125,000 or more has almost doubled since 2010 (from 7.5% to 14.7%). Meanwhile, the proportion of nurses reporting earnings of less than \$60,000 per year fell from 19.2 in 2012 to 15.5 in 2014.

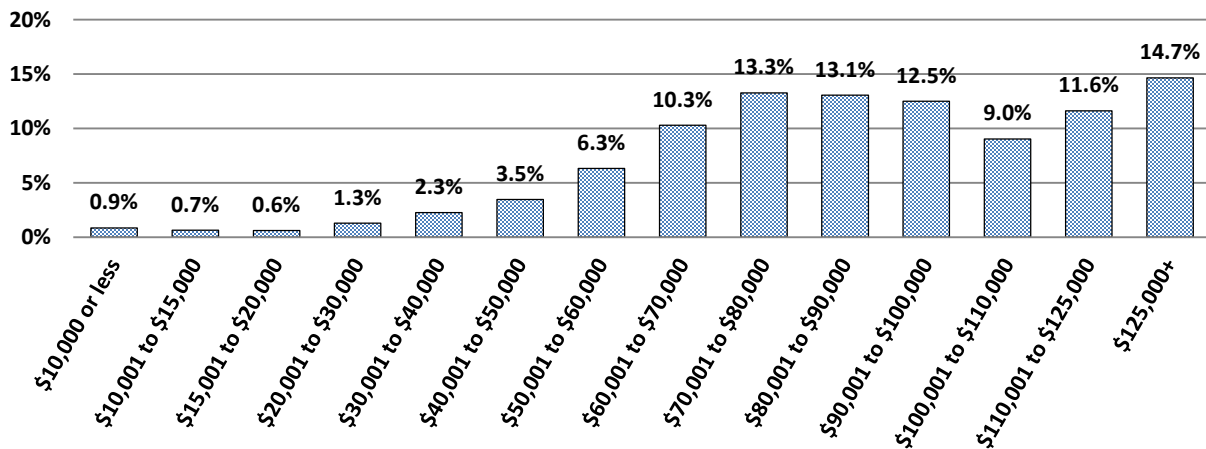
Table 3.30. Total annual income received from all nursing positions by currently working registered nurses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010	2012	2014
\$20,000 or less	18.0%	10.2%	10.0%	4.9%	4.6%	2.4%	3.1%	2.6%	2.1%
\$20,001 to \$30,000	27.6%	11.1%	9.0%	3.5%	2.1%	1.8%	1.8%	2.0%	1.3%
\$30,001 to \$40,000	33.2%	24.3%	20.0%	8.6%	5.5%	3.5%	3.1%	2.6%	2.3%
\$40,001 to \$55,000	18.3%	35.9%	34.5%	*	*	*	*	*	*
\$40,001 to \$50,000	*	*	*	14.2%	7.8%	6.0%	5.7%	3.8%	3.5%
\$50,001 to \$60,000	*	*	*	20.2%	12.5%	10.0%	9.6%	8.1%	6.3%
\$55,001 to \$75,000	2.3%	15.3%	22.6%	*	*	*	*	*	*
\$60,001 to \$70,000	*	*	*	16.4%	17.8%	13.8%	12.3%	9.6%	10.3%
\$70,001 to \$80,000	*	*	*	12.2%	15.6%	17.0%	16.8%	14.2%	13.3%
More than \$75,000	0.5%	3.3%	4.5%	*	*	*	*	*	
\$80,001 to \$90,000	*	*	*	8.5%	12.8%	14.1%	14.2%	12.4%	13.1%
\$90,001 to \$100,000	*	*	*	4.5%	8.0%	11.6%	11.1%	13.5%	12.5%
\$100,001 to \$110,000	*	*	*	2.2%	5.6%	6.6%	8.2%	9.8%	9.0%
\$110,001 to \$125,000	*	*	*	1.4%	3.5%	6.6%	6.6%	9.3%	11.6%
More than \$125,000	*	*	*	1.1%	4.1%	6.6%	7.5%	12.2%	14.7%
Mean Annual Income	\$31,504	\$42,163	\$45,073	\$59,937	\$73,542	\$81,428	\$82,134	\$89,940	\$93,911
Number of cases	2,186	2,141	2,420	2,885	3,447	3,728	3,738	3,692	3,823

* 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 (2006-2014) are weighted to represent all RNs with active licenses.

Figure 3.6. Total annual income received from all nursing positions by currently working registered nurses residing in California, 2014



Note: Number of cases=3,823. Data are weighted to represent all RNs with active licenses.

Annual nursing incomes vary by region of California, as seen in Table 3.31. Total nursing incomes are highest in the San Francisco Bay Area (\$106,180), and lowest in the counties north of Sacramento (\$84,461). Annual earnings increased for nurses in all regions between 2012 and 2014, with the smallest growth for those in the Los Angeles region (\$88,414 in 2012 to \$90,022 in 2014) and the largest in areas outside of California (\$72,072 in 2012 to \$89,787) and in Northern California counties (\$75,725 in 2012 to \$84,461 in 2014).

Table 3.31. Annual income received from nursing by currently working registered nurses, by region, 2006-2014

	Primary nursing position					All nursing positions				
	2006	2008	2010	2012	2014	2006	2008	2010	2012	2014
Northern counties	\$60,160	\$66,291	\$70,763	\$74,387	\$82,318	\$61,868	\$69,142	\$70,546	\$75,725	\$84,461
Sacramento	\$72,594	\$79,453	\$82,498	\$92,732	\$99,289	\$75,508	\$82,122	\$82,232	\$94,863	\$102,129
San Francisco Bay Area	\$78,319	\$89,984	\$93,406	\$98,075	\$102,539	\$82,514	\$93,564	\$93,547	\$101,568	\$106,180
Central Valley & Sierra	\$65,689	\$77,730	\$81,973	\$82,908	\$89,111	\$70,252	\$79,995	\$81,553	\$85,077	\$90,881
Central Coast	\$65,715	\$74,801	\$76,563	\$83,096	\$90,601	\$69,208	\$76,809	\$76,536	\$84,933	\$93,928
Los Angeles	\$67,207	\$74,188	\$79,381	\$85,577	\$86,261	\$71,822	\$77,167	\$79,288	\$88,414	\$90,022
Inland Empire	\$66,938	\$77,904	\$77,913	\$81,805	\$84,071	\$70,602	\$81,176	\$77,786	\$83,655	\$86,578
Border Counties	\$67,188	\$71,226	\$76,008	\$79,842	\$84,056	\$70,046	\$72,850	\$75,895	\$82,399	\$86,516
Outside California	\$59,696	\$64,198	\$67,847	\$69,597	\$86,773	\$62,467	\$67,026	\$68,158	\$72,072	\$89,787

Note: Data are weighted to represent all RNs with active licenses. Number of cases (2014) = 3,823.

Nursing incomes for California residents vary with age, as seen in Table 3.32. Average incomes are highest for the group of nurses between 55-64 years old. Annual earnings are lowest for nurses under 35 years, which is most likely due to entry-level salaries and a lack of experience in nursing among this age group.

Table 3.32. Total annual income received from all nursing positions by currently working registered nurses residing in California, by age group, 2006-2014

	2006	2008	2010	2012	2014
Under 35 years	\$68,307	\$74,632	\$74,982	\$76,341	\$81,198
35-44 years	\$75,113	\$81,318	\$80,008	\$89,286	\$94,186
45-54 years	\$78,530	\$84,711	\$85,718	\$96,171	\$99,759
55-64 years	\$74,411	\$85,696	\$88,169	\$97,894	\$102,273
65 years and older	\$52,888	\$65,790	\$71,636	\$79,295	\$78,875

Note: Data are weighted to represent all RNs with active licenses. Number of cases (2014) = 3,823.

There is some variation in average annual nursing income by education. As seen in Table 3.33, nurses with bachelor's degrees enjoy higher annual nursing income than RNs with associate degrees, averaging \$93,744 versus \$88,316. Diploma-educated RNs have higher annual income from their nursing positions than associate degree nurses, likely because they typically have more work experience than other nurses. As expected, Master degree nurses have the highest annual income, averaging \$104,358. This is associated with the income reported by nurse practitioners (\$105,644) and clinical nurse specialists (\$102,120).

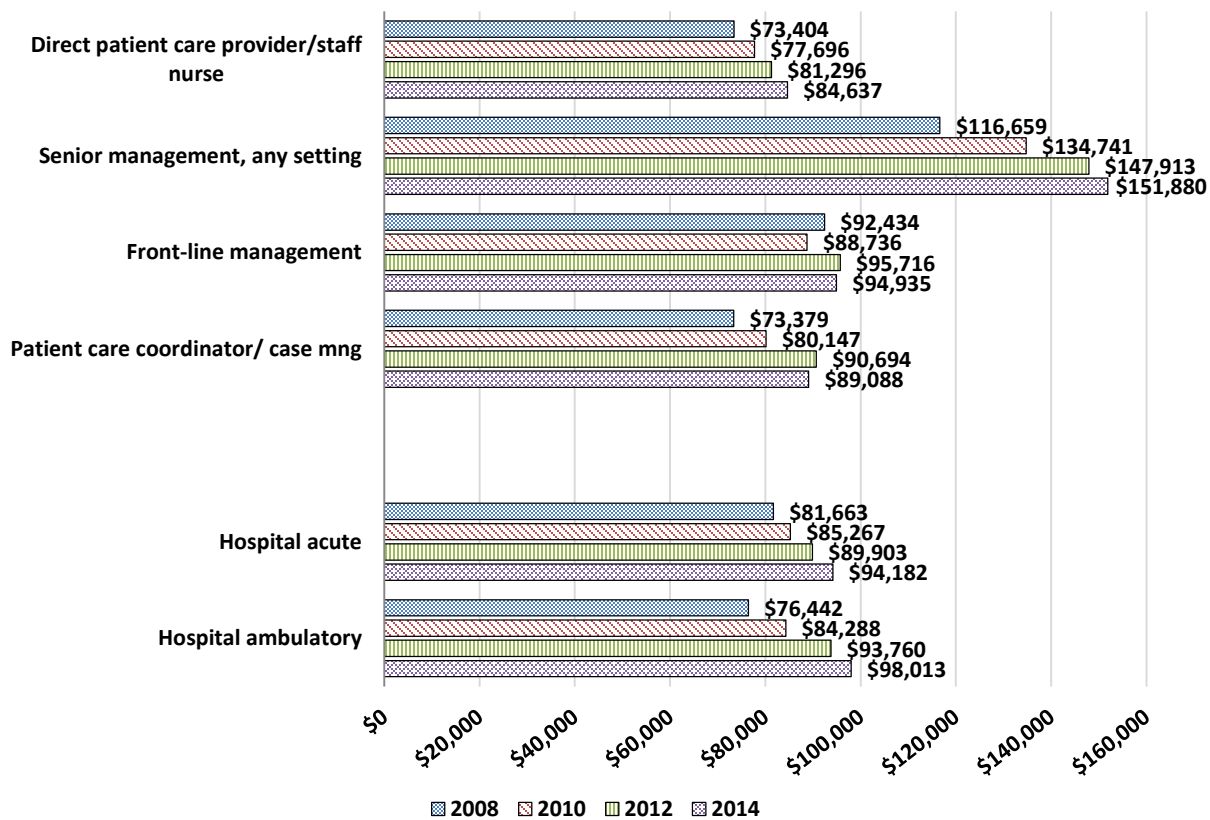
Table 3.33. Total annual income received from all nursing positions by currently working registered nurses residing in California, by highest level of nursing education and specialty certification, 2006-2014

	2006	2008	2010	2012	2014
Diploma	\$70,840	\$79,824	\$83,209	\$89,726	\$91,474
Associate Degree	\$70,804	\$76,995	\$78,228	\$84,839	\$88,316
Baccalaureate Degree	\$75,017	\$82,362	\$83,441	\$92,326	\$93,744
Master's Degree	\$82,638	\$93,378	\$91,225	\$99,042	\$104,358
Public Health Nurse	\$72,285	\$81,413	\$83,746	\$90,715	\$93,103
Nurse Practitioner	\$73,138	\$88,135	\$88,087	\$93,493	\$105,644
Clinical Nurse Specialist	\$82,323	\$88,077	\$89,953	\$100,482	\$102,120

Note: Data are weighted to represent all RNs with active licenses. Number of cases (2014) = 3,823.

Job title and work setting are associated with differences in annual nursing income, as seen in Figure 3.7. For nurses residing in California, nurses in senior management have incomes from their principal nursing position averaging over \$150,000. Direct patient care nurses (also called staff nurses) reported annual earnings of \$84,637. RNs employed in acute care departments of hospitals report an average income of \$94,182, while nurses in hospital ambulatory settings report earning \$98,013.

Figure 3.7. Income received from principal nursing position by currently working registered nurses residing in California, by job title and work setting, 2008-2014



Note: Number of cases=2,723. 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 3.34. The income categories were revised in 2006. The household incomes of nurses have risen since 1990, and by 2014, over 35 percent of working RNs who lived in California had household incomes over \$150,000 and 54 percent had household incomes between \$75,000 and 150,000.

Table 3.34. Total household incomes of working registered nurses residing in California, by survey year

	1990	1993	1997	2004	2006	2008	2010	2012	2014
Less than \$30,000	13.3%	5.1%	5.5%	2.1%	1.0%	0.3%	0.7%	1.4%	0.4%
\$30,001 to \$40,000	19.1%	10.3%	7.5%	2.8%	*	*	*	*	*
\$30,000 to \$44,999	*	*	*	*	3.9%	1.6%	1.4%	1.9%	1.2%
\$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%	2.4%	2.1%
\$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%	8.5%	6.6%
\$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%	17.3%	17.8%
\$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%	21.3%	20.9%
\$110,001 to \$125,000	*	*	*	8.8%	*	*	*	*	*
More than \$125,000	*	*	*	19.7%	*	*	*	*	*
\$125,000 to \$149,999	*	*	*	*	13.5%	13.9%	14.4%	15.8%	15.4%
\$150,000 to \$174,999	*	*	*	*	8.6%	11.5%	11.1%	11.3%	12.0%
\$175,000 to \$199,999	*	*	*	*	4.3%	6.1%	6.9%	7.6%	7.9%
\$200,000 or more	*	*	*	*	6.0%	10.0%	12.2%	12.5%	15.6%
Number of cases	2,182	2,128	2,415	2,864	3,608	3,838	4,323	3,846	3,912

* Income categories changed in 2004 and 2006.

Note: Columns might not total 100% due to rounding. Data (2006-2014) are weighted to represent all RNs with active licenses.

Nurses' earnings are increasingly important to their households (Table 3.35). In 1990, 36.1 percent of RNs reported that their nursing income accounted for more than 75 percent of their household's income. In 2014, 48.7 percent of nurses said their nursing income comprised at least 80 percent of household income.

Table 3.35. 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	2012	2014
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%	3.7%	3.6%
20 to 39 percent	*	*	*	*	9.7%	9.3%	7.7%	6.7%	7.1%
40 to 59 percent	*	*	*	*	23.9%	21.5%	20.0%	18.8%	20.3%
60 to 79 percent	*	*	*	*	17.7%	19.5%	20.4%	20.1%	20.4%
80 to 99 percent	*	*	*	*	14.6%	13.9%	13.8%	14.5%	15.3%
100 percent	27.3%	26.9%	27.6%	27.9%	30.1%	32.5%	34.3%	36.2%	33.4%
Number of cases	2,209	2,150	2,448	2,915	3,676	3,983	4,568	3,961	4,031

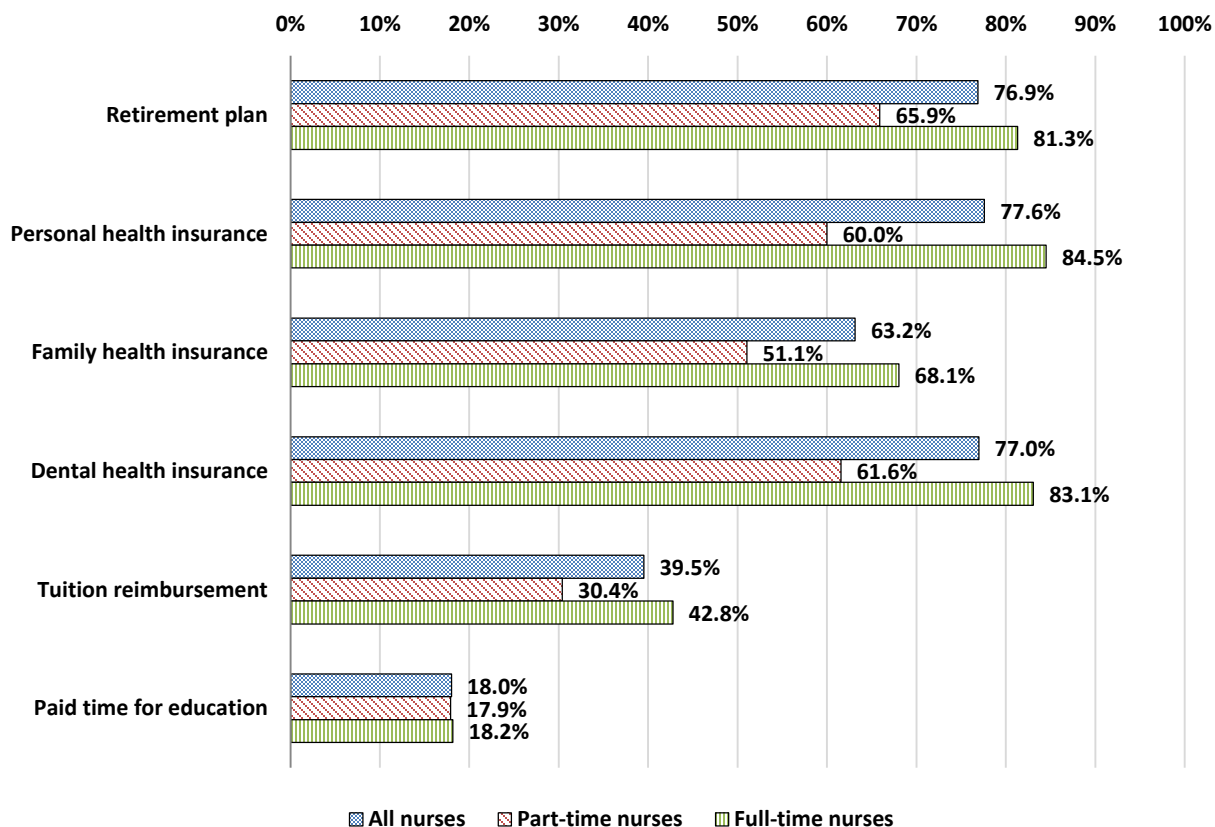
*No Data Available

Note: Percent of income from nursing was reported by category. The categories changed in 2006. Columns might not total 100% due to rounding. Data (2006-2014) are weighted to represent all RNs with active licenses.

Benefits Received by Registered Nurses

As presented in Figure 3.8, over 76 percent of all RNs working full time received personal health insurance, dental insurance, and/or a retirement plan from their employer in 2014. Over 63 percent received family health insurance from their employer. Nearly 40 percent of RNs receive tuition reimbursement from their employers, and 18.2 percent receive paid time off from work to pursue education. Nurses working part-time are much less likely to receive most benefits than are full-time RNs.

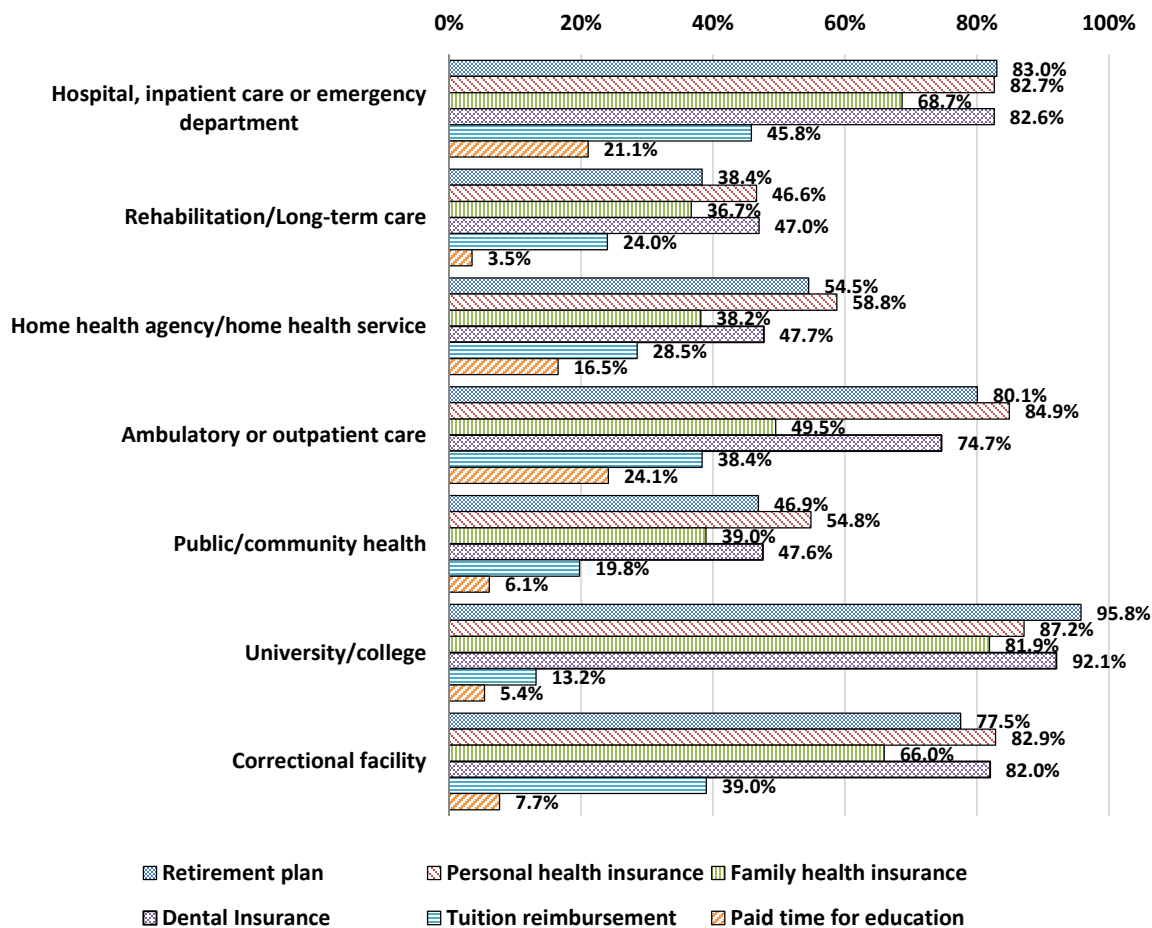
Figure 3.8. Benefits received from all nursing positions by currently working registered nurses residing in California, 2014



Note: Number of cases=4,129. Data are weighted to represent all RNs with active licenses.

Receipt of fringe benefits from employers varies by work setting, as seen in Figure 3.9. Nurses working in academic settings are most likely to receive most types of benefits, with 95.8 percent of all RNs having a retirement plan, 92.1 percent receiving dental insurance, and 87.2 percent being offered health insurance. Nurses working in inpatient hospital settings also have good benefits, with roughly 83 percent being offered a retirement plan, and dental and health insurance. Benefits were least likely to be offered in rehabilitation/long-term care and public health/community settings with only approximately half of the nurses reporting that they have a retirement plan or health/family insurance. Nurses working in ambulatory settings received paid time for education more often than nurses in other settings (24.1 percent).

Figure 3.9. Benefits received by currently working registered nurses residing in California, by setting of principal nursing position, 2014



Note: Number of cases=4,129. Data are weighted to represent all RNs with active licenses.

Nurses Who Live Outside California

Nearly 14 percent of RNs with active California licenses live in other states (53,407 RNs in 2014, Table 1.1). Table 3.36 presents information about the employment of nurses with California licenses who lived outside the state, from 2004 through 2014. In 2014, most out-of-state nurses (58.7%) did not work in California in the year prior to completing the survey. Fourteen percent had worked in California, but subsequently moved out of state and 14.4 percent of nurses worked in California as a traveling nurse. About 10 percent worked for an out-of-state telenursing employer with California clients; this share has increased from 4.4 percent in 2004. Almost 3 percent of non-California-resident RNs worked in telenursing for a California employer from their out-of-state residence. A small share commutes to California from a neighboring state such as Nevada (3.4%).

Table 3.36. Employment in California during the past twelve months of registered nurses with active California licenses who are currently employed and residing outside of California, 2004-2014

	2004	2006	2008	2010	2012	2014
Did not work as an RN in California	43.1%	58.0%	59.3%	64.4%	58.5%	58.7%
Worked as an RN in California, but subsequently moved out of the state	16.2%	15.7%	15.7%	11.4%	11.7%	14.0%
Worked as an RN in California for a temporary/traveling agency/registry	23.6%	19.9%	19.5%	16.3%	17.1%	14.4%
Worked as RN for out-of-state telenursing/telemedicine employer w/ Calif. clients	4.4%	5.9%	6.0%	7.4%	9.2%	10.2%
Worked as an RN for a California employer in a telenursing capacity	1.9%	2.2%	1.4%	2.7%	5.0%	2.7%
Lived in a border state and commuted to California to work as an RN	2.1%	3.2%	2.6%	2.0%	4.0%	3.4%
Other	9.4%	*	*	*	*	*

Note: 2014 number of cases=312. Columns may total more than 100% because respondents were allowed to select more than one category. Data (2006-2014) 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 3.7 months and 35.8 hours per week, as seen in Table 3.37. The number of months worked in California was lower from 2010 to 2014 than in 2006 or 2008.

Table 3.37. 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, 2006-2014

	2006	2008	2010	2012	2014
Months worked in California	7.6	5.1	2.1	4.0	3.7
Hours worked in usual week (average)	37.4	41.0	39.7	39.0	35.8
Number of cases	82	95	74	53	49

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

Among nurses who lived outside California and worked in California as a temporary or traveling nurse, 54.3 percent report wages as a reason for working in California on a temporary basis (Table 3.38). The share of RNs noting that wages influenced their choice of temporary work has been relatively stable around 50-59 percent, with a spike of 74.1 percent in 2008. Other reasons frequently noted included travel or seeing other parts of the country (66.6%), control of work location (47.8%), and control of work schedule (52.9%). Seven 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—a drop from 2010 when sixteen percent reported this as a reason. The fraction of RNs reporting they work for registries because they are waiting for a desirable permanent position has dropped for the first time since 2006 when it was 15.3 percent. In 2014, it was down to 20.5 percent from 26.9 percent in 2012.

Table 3.38. Reasons why registered nurses who reside outside California and worked in California the previous year chose to work for temporary/traveling agencies or registries, 2006-2014

	2006	2008	2010	2012	2014
Wages	58.8%	74.1%	58.8%	50.2%	54.3%
Benefits	16.0%	14.3%	12.0%	1.4%	1.4%
Control of schedule	42.7%	61.1%	57.6%	39.5%	52.9%
Control of work location	52.4%	64.3%	54.6%	43.8%	47.8%
Supplemental income	7.9%	25.1%	29.7%	24.3%	13.1%
Control of work conditions	21.3%	34.6%	31.4%	14.4%	27.9%
Maintain skills/get experience	22.0%	34.4%	41.8%	26.4%	29.4%
Waiting for a desirable permanent position	15.3%	17.7%	25.4%	26.9%	20.5%
Travel/see other parts of the country	65.7%	72.7%	49.0%	61.5%	66.6%
Unable to find RN position/not enough hours at primary job	*	*	16.0%	9.5%	6.7%
Other	15.1%	4.6%	6.4%	0.0%	13.5%
Number of cases	55	83	68	54	53

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 3.39. In 2014, 26.9 percent reported that they plan to travel to California to work as an RN intermittently; this percentage has stayed relatively stable between 25-33 percent, 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 7.3 percent in 2014. Twenty-two percent plan to relocate to California to work, an increase from 14.3 percent in 2004. The number that plan to renew their California license but have not planned to work in California has remained fairly stable at about 40 percent, except for 2010 when it dropped to 33.9 percent.

Table 3.39. Plans for the next five years for registered nurses with active California licenses who lived outside the state, 2004-2014

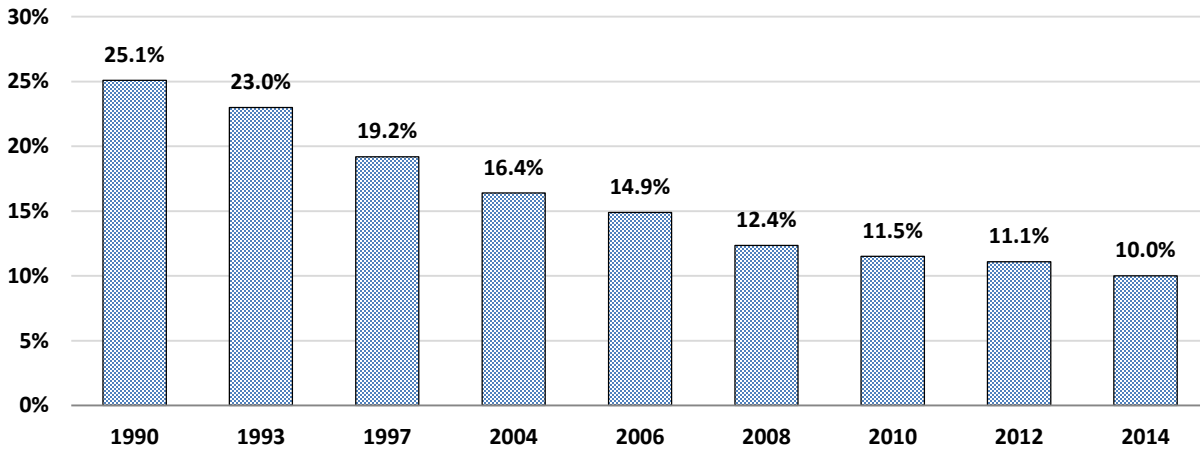
	2004	2006	2008	2010	2012	2014
Yes, I plan to travel to California to work as an RN intermittently	33.2%	30.6%	32.4%	30.5%	25.2%	26.9%
Yes, I plan to relocate to California and work as an RN	14.3%	14.3%	21.7%	25.9%	25.8%	22.0%
Yes, I plan to perform telenursing/telemedicine for a California employer	0.0%	6.1%	1.9%	3.2%	3.7%	1.4%
Yes, I plan to perform telenursing/telemedicine for an out-of-state employer with California clients	1.3%	0.6%	4.1%	6.4%	6.3%	7.3%
Yes, I plan to commute from a border state	1.3%	4.2%	2.2%	1.7%	3.2%	3.7%
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%	41.1%	40.0%
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%	4.4%	4.4%
Number of cases	385	407	413	457	371	301

Note: Columns will not total 100% because respondents could select multiple items. Data (2006-2014) 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 10 percent in 2014, as seen in Figure 3.10.

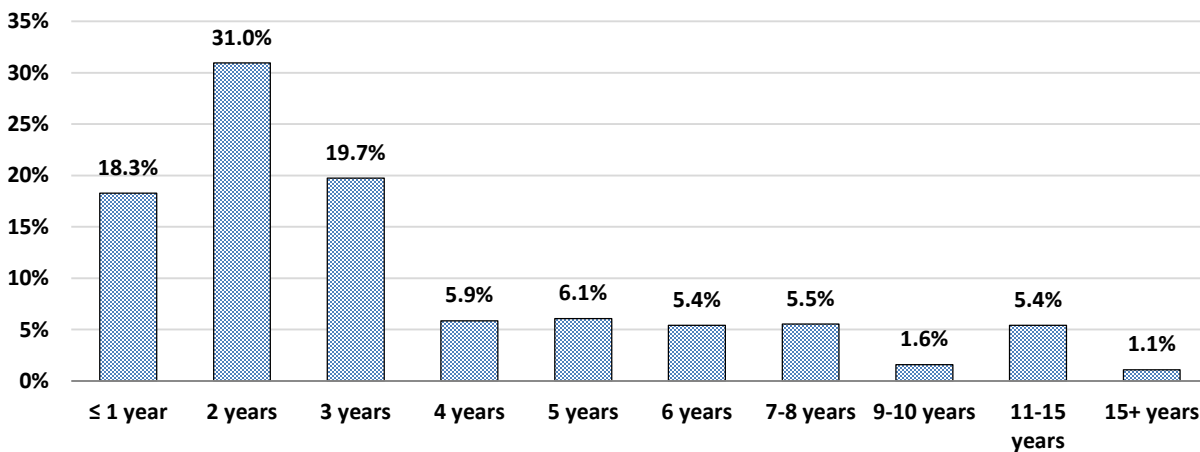
Figure 3.10. Percent of nurses who stopped working as a registered nurse for more than one year, but are currently working as RNs and reside in California, by survey year



Note: 2014 number of cases=4,082. Data (2006-2014) are weighted to represent all RNs with active licenses.

Figure 3.11 presents the length of time of nurses who live and now work in California were away from nursing. The largest share – 31 percent – was out of nursing for two years, and another 19.7 percent stopped working for three years. About a quarter of RNs with active California licenses stopped working for five years or more.

Figure 3.11. Number of years nurses temporarily stopped working in nursing, for currently working California residents, 2014



Note: Number of cases=473. 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, 2010, 2012, and 2014 nurses were asked to rate the degree of importance of each item. In Table 3.40, the survey responses are presented over time, with the data for 2006 through 2014 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. It should also be noted that since 2012, a new item was added to the survey after a large number of nurses indicated that being unable to find work as an RN was an important factor for leaving nursing.

In 2014, childcare responsibilities were cited by 59.1 percent of the nurses who left nursing for more than one year. While 2012 saw a spike to 87.4 percent, in 2014 the share of nurses reporting childcare responsibilities as a reason for not working returned to similar shares found between 2004-2010. A rising share of nurses have

noted other family responsibilities as being important to the decision to temporarily stop nursing, with 46.0 percent citing this reason in 2014. Other often-noted reasons include moving to a different area (34.1%), job stress (18.2%), and desire to try another occupation (15.6%).

Table 3.40. 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	2012	2014
Could not find work as an RN	*	*	*	*	*	*	*	12.6%	11.3%
Child care responsibilities	71.9%	68.7%	62.7%	59.8%	52.5%	56.8%	58.8%	87.4%	59.1%
Other family responsibilities	19.0%	14.0%	10.8%	15.0%	39.5%	42.8%	44.6%	47.3%	46.0%
Moving to a different area	30.2%	31.5%	29.1%	24.3%	26.7%	27.1%	27.7%	32.8%	34.1%
Stress on the job	*	9.0%	10.5%	11.4%	27.8%	24.4%	26.7%	21.2%	18.2%
Job-related injury or illness	*	*	*	5.9%	16.0%	13.2%	11.7%	11.2%	8.0%
Non-job-related injury or illness	*	*	*	5.1%	11.3%	14.2%	12.6%	10.2%	9.4%
Injury or illness	9.8%	11.6%	9.1%	*	*	*	*	*	*
Salary	*	1.8%	2.3%	5.5%	14.8%	18.7%	14.5%	13.3%	10.9%
Decreased benefits	*	*	*	0.8%	*	*	*	*	*
Dissatisfied with benefits	*	*	*	*	11.0%	11.8%	8.0%	8.6%	6.1%
Laid off	*	*	1.7%	2.8%	5.9%	8.2%	5.3%	8.6%	6.3%
Return to school	10.0%	12.2%	14.8%	12.0%	17.5%	17.6%	14.9%	13.2%	11.7%
Travel	5.0%	6.4%	6.3%	4.4%	11.7%	9.8%	11.0%	11.8%	9.4%
To try another occupation	12.9%	14.2%	15.2%	14.0%	20.9%	19.9%	18.7%	18.9%	15.6%
Other dissatisfactions with your job	*	*	7.0%	10.2%	19.2%	14.1%	17.2%	15.0%	14.3%
Dissatisfaction with the nursing profession	16.6%	12.4%	8.4%	12.5%	26.8%	17.7%	13.0%	12.0%	13.1%
Other	5.5%	2.8%	3.2%	13.1%	18.8%	7.3%	6.3%	9.7%	16.6%
Number of cases	559	501	474	527	569	572	606	513	473

* 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, 2010, 2012 and 2014, they were asked to rate the degree of importance. The 2006-2014 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 their principal nursing position on a five-point Likert-type scale ranging from “very dissatisfied” to “very satisfied.” Table 3.41 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: nurses were neither satisfied nor unsatisfied. Figure 3.12 presents the summary scores for all 30 items.

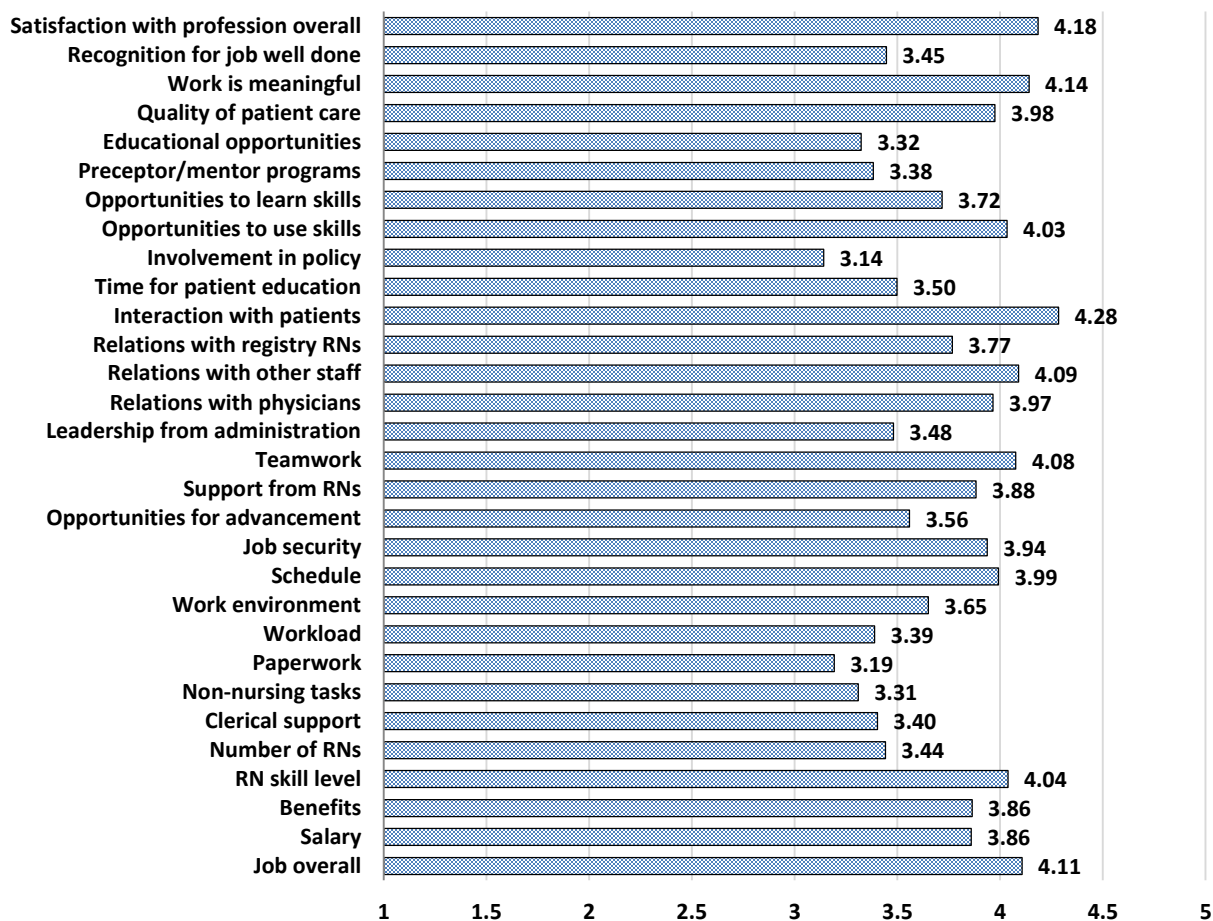
Three of the five aspects of nursing that received the highest average satisfaction ratings in 2014 were the same items receiving the highest ratings in 2012: Interactions with patients, feeling that work is meaningful, job overall. In 2012, the five items with greatest satisfaction also included teamwork between coworkers (ranked 6th in 2014), and support from other nurses (ranked 13th in 2014). The five top-rated aspects of nursing work in 2014 were:

- Interaction with patients (4.28)
- Nursing profession overall (4.18)
- Feeling that work is meaningful (4.14)
- Your job overall (4.11)
- Relations with non-nursing staff (4.09)

Four of the five aspects of nursing receiving the lowest average ratings in 2014 also received the lowest ratings in 2012: amount of paperwork required, non-nursing tasks required, involvement in policy and management decisions, and employer-supported educational/training programs. Satisfaction regarding amount of paperwork required increased between 2012 and 2014, but it remained among the lowest-ranked items. The five aspects of nursing receiving the lowest average ratings in 2014 were:

- Involvement in policy and management decisions (3.14)
- Amount of paperwork required (3.19)
- Non-nursing tasks required (3.31)
- Employer-supported educational/training programs (3.32)
- Quality of preceptor/mentor programs (3.38)

Figure 3.12. Overall satisfaction with principal nursing position, for RNs currently working and residing in California, 2014



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

Table 3.41. Satisfaction or dissatisfaction with principal nursing position, for RNs currently working and residing in California, 2014

	Very dissatisfied	Dissatisfied	Neither satisfied or unsatisfied	Satisfied	Very satisfied	No response
Your job overall	1.2%	5.0%	8.7%	51.0%	32.7%	1.5%
Your salary	2.4%	11.1%	11.4%	46.5%	27.1%	1.5%
Employee benefits	2.9%	8.4%	13.0%	40.9%	26.1%	8.7%
Adequacy of RN skill level where you work	0.8%	5.2%	10.6%	52.8%	27.1%	3.5%
Adequacy of the number of RNs where you work	4.6%	20.5%	15.2%	38.5%	16.6%	4.7%
Adequacy of clerical support services	5.0%	17.5%	19.4%	41.4%	12.2%	4.4%
Non-nursing tasks required	3.4%	15.2%	29.1%	36.1%	7.1%	9.2%
Amount of paperwork required	6.0%	21.6%	21.9%	39.2%	6.5%	4.9%
Your workload	4.6%	18.6%	19.4%	44.4%	10.7%	2.3%
Physical work environment	3.1%	11.8%	17.8%	49.1%	16.3%	2.0%
Work schedule	1.1%	6.2%	11.1%	53.0%	26.1%	2.5%
Job security	2.1%	7.1%	13.5%	48.1%	27.8%	1.5%
Opportunities for advancement	4.0%	12.3%	22.8%	38.9%	17.4%	4.6%
Support from other nurses you work with	2.5%	6.9%	15.2%	46.6%	25.3%	3.5%
Teamwork between coworkers and yourself	1.6%	4.9%	10.8%	47.9%	32.9%	2.0%
Leadership from your nursing administration	7.6%	15.4%	16.4%	37.1%	20.0%	3.5%
Involvement in patient care decisions	3.9%	7.9%	15.1%	48.3%	18.9%	5.9%
Relations with physicians	1.1%	4.9%	14.4%	51.2%	24.1%	4.3%
Relations with other non-nursing staff	0.6%	2.3%	10.4%	58.9%	25.5%	2.3%
Relations with agency/registry nurses	0.5%	2.1%	17.1%	35.7%	7.9%	36.7%
Interaction with patients	0.2%	1.3%	5.8%	51.0%	35.7%	6.1%
Time available for patient education	2.8%	16.9%	17.8%	40.4%	13.8%	8.4%
Involvement in policy/management decisions	7.3%	18.4%	28.3%	28.9%	8.6%	8.5%
Opportunities to use your skills	1.0%	5.3%	10.9%	53.2%	27.6%	2.1%
Opportunities to learn new skills	2.4%	11.1%	18.5%	44.6%	20.3%	3.2%
Quality of preceptor and mentor programs	4.5%	13.3%	22.7%	31.8%	11.4%	16.3%
Employer-supported educational opportunities	5.9%	17.8%	22.4%	34.6%	12.6%	6.7%
Quality of patient care where you work	1.2%	5.9%	12.0%	51.1%	25.0%	4.8%
Feeling that work is meaningful	1.3%	5.3%	9.3%	45.0%	37.5%	1.6%
Recognition for a job well done	7.0%	15.9%	19.8%	37.5%	18.0%	1.9%
Satisfaction with the nursing profession overall	3.6%	3.7%	5.8%	43.9%	42.1%	1.1%

Note: Number of cases=4,129. Rows may not add to 100% due to rounding. Data are weighted to represent all RNs with active licenses.

As discussed previously, nearly all the job satisfaction components increased at least slightly between 1990 and 2014, as seen in Table 3.42. Compared with 1990, nurses were more satisfied in 2014 in nearly all areas, including salary, benefits, opportunities to learn new skills, involvement in policy and management decisions, leadership from administration, time available for patient education, and even the amount of paperwork required. However, satisfaction with many factors dropped between 2010 and 2014, including adequacy of RN staffing, support from other nurses, employer-sponsored educational/training programs, and work schedule. There were

increases in satisfaction between 2010 and 2014 in some areas, with the largest improvements in the amount of paperwork required, leadership from nursing administration, and the nursing profession overall.

Table 3.42. Satisfaction with principal 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	2006	2008	2010	2012	2014
Your salary	*	*	*	*	3.58	3.74	3.88	3.88	3.86
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	3.64	3.74	3.87	3.84	3.86
Skill of RNs where you work	3.88	3.94	3.96	3.90	3.94	4.00	4.07	4.08	4.04
Adequacy of RN staffing where you work	2.97	3.29	3.13	3.14	3.40	3.58	3.65	3.60	3.44
Adequacy of clerical support services	2.99	3.20	3.15	3.14	3.35	3.39	3.48	3.49	3.40
Non-nursing tasks required	2.78	3.05	3.09	3.11	3.18	3.13	3.31	3.33	3.31
Amount of paperwork required	*	*	*	2.69	2.87	2.88	3.00	3.04	3.19
Workload	*	*	*	*	3.41	3.41	3.46	3.40	3.39
Physical work environment	3.37	3.58	3.60	3.45	3.57	3.59	3.71	3.67	3.65
Work schedule	*	*	3.97	4.00	4.09	4.10	4.11	4.04	3.99
Job security	*	3.42	3.31	3.98	4.06	4.10	3.97	3.93	3.94
Opportunities for advancement	2.95	3.15	3.15	3.37	3.48	3.56	3.55	3.48	3.56
Support from other nurses with whom you work	3.92	4.00	4.01	3.95	3.95	4.02	4.09	4.08	3.88
Support from nursing administration	2.96	3.00	3.06	3.08	*	*	*	*	*
Leadership from nursing administration	*	*	*	*	3.18	3.23	3.30	3.31	3.48
Relations with physicians	3.65	3.70	3.86	3.79	3.84	3.85	3.93	3.89	3.97
Relations with other non-nursing staff	3.86	3.94	4.03	3.95	3.99	4.03	4.09	4.07	4.09
Relations with temporary agency/traveling staff	*	*	*	3.56	3.75	3.69	3.74	3.71	3.77
Teamwork between coworkers and yourself	*	*	*	*	4.01	4.06	4.15	4.13	4.08
Interaction with patients	*	*	4.31	4.27	4.29	4.34	4.34	4.31	4.28
Time available for patient education	*	*	*	3.23	3.39	3.42	3.46	3.51	3.50
Involvement in policy and management decisions	2.90	3.08	3.06	3.00	3.02	3.15	3.18	3.20	3.14
Opportunities to use your skills	3.85	3.98	3.98	3.99	3.99	4.04	4.06	4.01	4.03
Opportunities to learn new skills	3.58	3.75	3.74	3.68	3.65	3.78	3.79	3.74	3.72
Employer-supported educational/training programs	3.28	3.44	3.42	3.50	3.35	3.46	3.49	3.36	3.32
Quality of preceptor and mentor programs	*	*	*	*	3.34	3.41	3.46	3.48	3.38
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	3.86	3.97	4.05	4.04	3.98
Feeling that work is meaningful	*	*	*	4.11	4.15	4.20	4.23	4.20	4.14
Recognition for a job well done	*	*	*	*	3.39	3.44	3.46	3.52	3.45
Your job overall	3.77	3.94	3.95	3.94	4.05	4.14	4.19	4.14	4.11
The nursing profession overall	*	*	*	*	3.83	3.96	4.10	4.12	4.18

* Question not asked in the survey year.

Note: Data (2006-2014) are weighted to represent all RNs with active licenses.

Figure 3.13 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 through 2014. In 1997, California was ending a period 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. This explains the improvements in satisfaction with salary and benefits between 2006 and 2010. 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 between 2008 and 2014 in satisfaction with job security and with salary may reflect the economic downturn in California. The recession also may have affected the work schedules available to RNs, accounting for the decline in satisfaction with this item between 2010 and 2014.

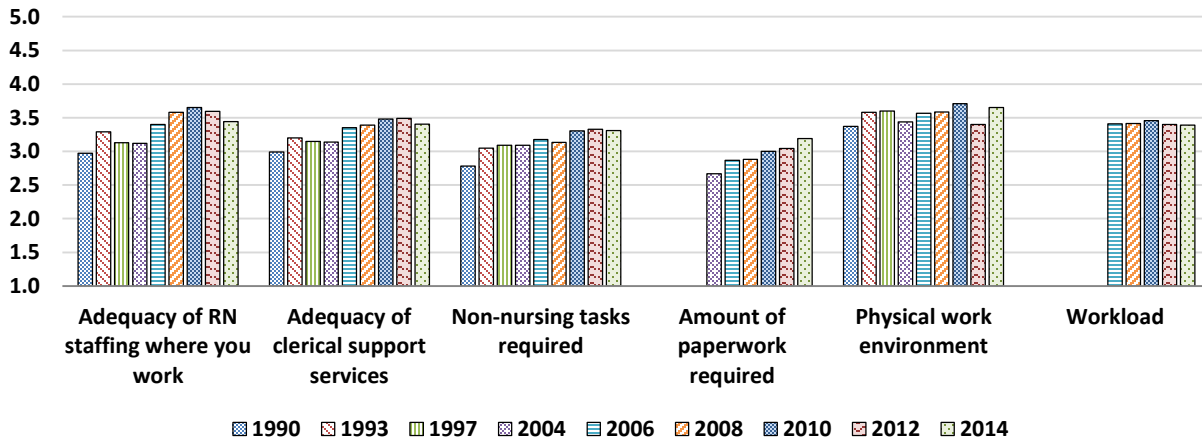
Figure 3.13. Satisfaction with salary, benefits, and job security for RNs currently working and residing in California, by survey year



Note: Data (2006-2014) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

Figure 3.14 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, but dropped to 3.44 by 2014. Satisfaction with workload remained stable between 2006 and 2014 while satisfaction of the physical environment varies during this same time period. There has been improvement in satisfaction with required non-nursing tasks and amount of paperwork between 2004 and 2014, with the improvement for paperwork being particularly notable. However, these two job aspects still report some of the lowest ratings.

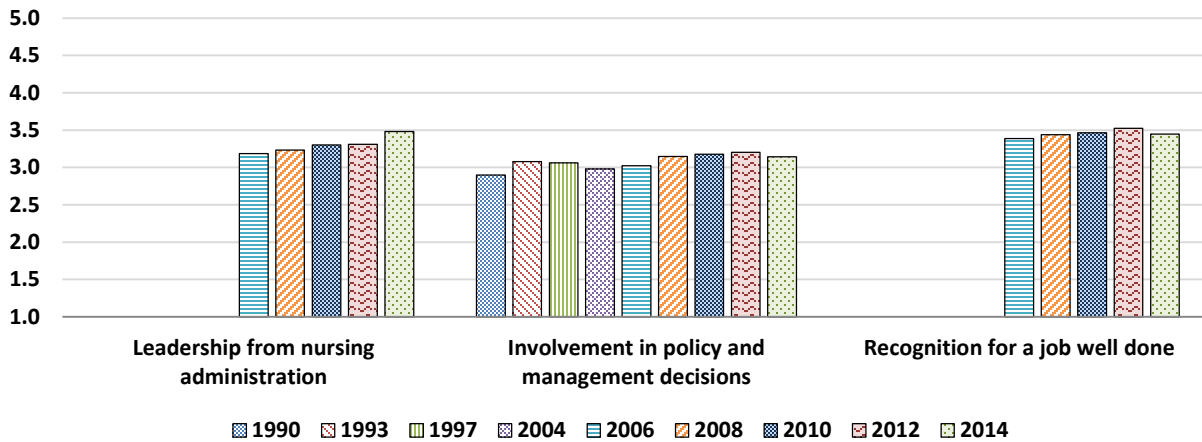
Figure 3.14. Satisfaction with workplace resources and support for RNs currently working and residing in California, by survey year



Note: Data (2006-2014) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

Figure 3.15 presents the average satisfaction of registered nurses with management at their current place of employment. This is an area of greater dissatisfaction among RNs in California, and there has been little change over time in satisfaction with recognition for a job well done or involvement in policy and management decisions. Satisfaction with leadership from nursing administration increased between 2006 and 2014 from 3.18 to 3.48.

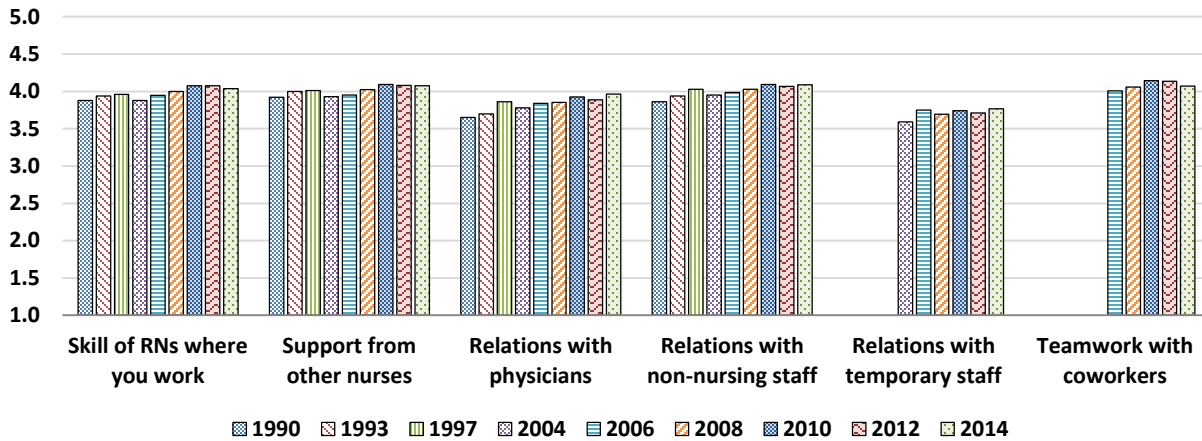
Figure 3.15. Satisfaction with management for RNs currently working and residing in California, by survey year



Note: Data (2006-2014) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

Figure 3.16 presents average satisfaction with collegial interactions in the workplace, by survey year. Nurses tend to be satisfied in this domain, and there has been a slight increase in average satisfaction over time in most specific areas. 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.

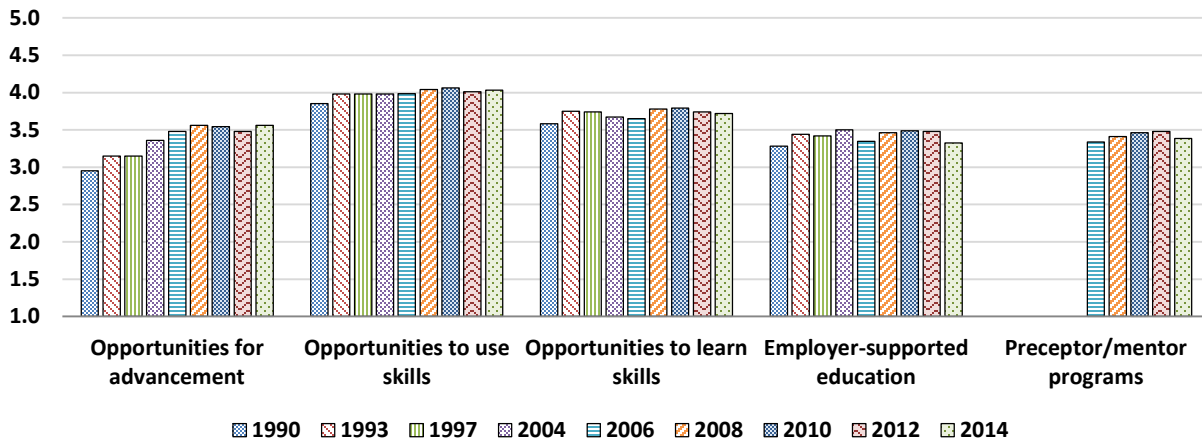
Figure 3.16. Satisfaction with colleagues for RNs currently working and residing in California, by survey year



Note: Data (2006-2014) 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 3.17. 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 has also been little change in average satisfaction with opportunities to learn new skills. However, since 2010, there has been a slight drop in satisfaction with employer-supported education. There was marked improvement between 1990 and 2008 in satisfaction with opportunities for advancement, but this item has stabilized since then.

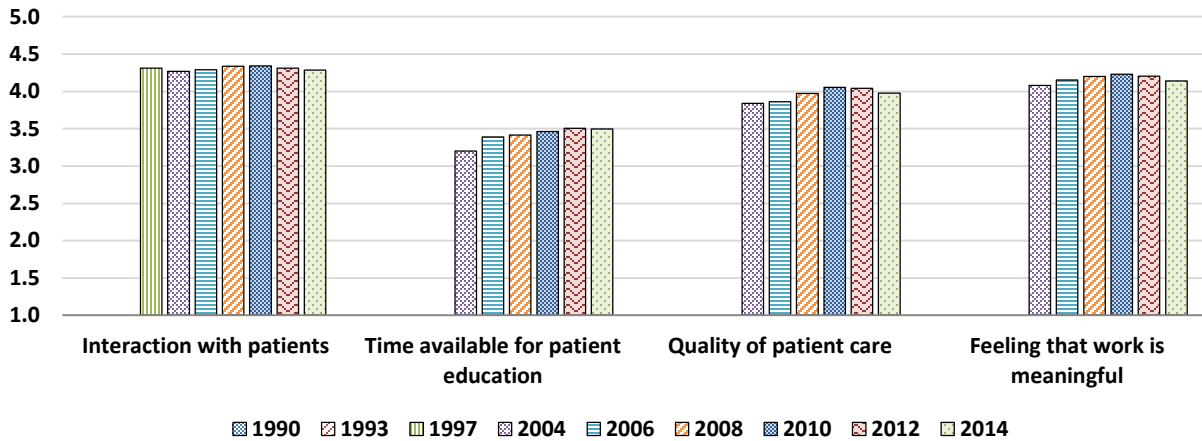
Figure 3.17. Satisfaction with opportunities for growth for RNs currently working and residing in California, by survey year



Note: Data (2006-2014) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

Figure 3.18 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 among the highest-rated job factors in 2014, having average ratings of 4.28 and 4.14, respectively. Nurses are less satisfied with the time they have available for patient education, with a score of 3.50 in 2014.

Figure 3.18. Satisfaction with patient interactions and care for RNs currently working and residing in California, by survey year



Note: Data (2006-2014) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

Figure 3.19 presents the overall satisfaction of currently working RNs residing in California. Average overall job satisfaction is quite high (4.11), and this has been one of the highest rated items on the survey since 1993. Satisfaction with the nursing profession averaged 4.18 in 2014, and has increased each year since 2006.

Figure 3.19. Overall satisfaction of RNs currently working and residing in California, by survey year



Note: Data (2006-2014) are weighted to represent all RNs with active licenses. Some items were not included in all surveys.

Job Satisfaction by Age

Table 3.43 presents mean job satisfaction scores for selected items by age group in 2014. 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 35 to 54 years old are somewhat less satisfied than older RNs, on average. Nurses 35 to 44 years old are notably less satisfied than other RNs with involvement in patient care decisions, time available for patient education and opportunities to learn new skills. Nurses 45 to 54 years old are markedly less satisfied with adequacy of the number of RNs in the workplace, adequacy of clerical support, physical work environment, leadership from nursing administration, opportunities to use skills, recognition for a job well done, and satisfaction with the nursing profession.

Job Satisfaction by Education

Table 3.44 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 an associate's degree, or bachelor's degree, and those with bachelor's degrees are more satisfied than are associate-degree RNs. Diploma nurses are more similar to nurses with baccalaureate degrees in terms of satisfaction, possibly because diploma nurses are likely to be older. Graduate-educated nurses are substantially more satisfied than other nurses with employee benefits, amount of paperwork, physical work environment, work schedule, job security, relations with physicians, time available for patient education. Baccalaureate-educated RNs are notably more satisfied than associate degree nurses with amount of paperwork required, quality of preceptor and mentor programs, and employer-sponsored educational opportunities. BSN-educated RNs are somewhat less satisfied than AD-educated nurses with regard to patient interactions.

Job Satisfaction by Job Title

Table 3.45 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. With few exceptions, nurses working in senior management have higher satisfaction ratings than other nurses, with few exceptions. They are less satisfied with the adequacy of RN skill level in their workplace, and with interaction with patients than are other nurses. Patient care coordinators are more satisfied than staff nurses with adequacy of clerical support, amount of paperwork, physical work environment, and time available for patient education. They are less satisfied than staff nurses with quality of preceptor/mentor programs, employer-supported educational opportunities, opportunities for advancement, and teamwork with coworkers. There are only small differences in the satisfaction of front-line managers as compared with staff nurses. Staff nurses on average were more satisfied with quality of preceptor and mentor programs than were nurses with other job titles.

Table 3.43. Satisfaction with principal nursing position for RNs currently working and residing in California, by age group, 2014

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	4.07	4.08	4.11	4.12	4.27
Your salary	3.83	3.84	3.84	3.92	3.90
Employee benefits	3.77	3.89	3.88	3.89	3.92
Adequacy of RN skill level where you work	4.02	4.02	4.02	4.06	4.19
Adequacy of the number of RNs where you work	3.45	3.43	3.37	3.45	3.70
Adequacy of clerical support services	3.44	3.44	3.30	3.35	3.72
Non-nursing tasks required	3.36	3.34	3.29	3.21	3.50
Amount of paperwork required	3.26	3.21	3.16	3.10	3.38
Your workload	3.44	3.38	3.38	3.31	3.66
Physical work environment	3.69	3.67	3.58	3.65	3.74
Work schedule	3.96	3.97	4.02	3.99	4.08
Job security	3.96	3.90	3.89	3.97	4.05
Opportunities for advancement	3.63	3.62	3.47	3.53	3.55
Support from other nurses you work with	3.89	3.86	3.82	3.93	4.03
Teamwork between coworkers and yourself	4.13	4.03	4.03	4.08	4.26
Leadership from your nursing administration	3.66	3.51	3.32	3.42	3.59
Involvement in patient care decisions	3.75	3.69	3.74	3.79	3.91
Relations with physicians	3.90	3.92	3.98	4.03	4.11
Relations with other non-nursing staff	4.06	4.09	4.06	4.12	4.22
Relations with agency/registry nurses	3.74	3.78	3.78	3.77	3.71
Interaction with patients	4.20	4.23	4.31	4.37	4.33
Time available for patient education	3.49	3.43	3.50	3.52	3.74
Involvement in policy/management decisions	3.14	3.11	3.10	3.19	3.26
Opportunities to use your skills	3.96	3.95	4.08	4.10	4.18
Opportunities to learn new skills	3.71	3.64	3.66	3.81	3.91
Quality of preceptor and mentor programs	3.50	3.37	3.35	3.32	3.44
Employer-supported educational opportunities	3.31	3.30	3.28	3.37	3.44
Quality of patient care where you work	3.91	3.90	4.00	4.05	4.13
Feeling that work is meaningful	4.07	4.09	4.13	4.21	4.39
Recognition for a job well done	3.47	3.41	3.36	3.48	3.73
Satisfaction with the profession overall	4.23	4.15	4.14	4.20	4.29

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

Table 3.44. Satisfaction with principal nursing position for RNs currently working and residing in California, by highest nursing education, 2014

1 through 5 scale; 1=very dissatisfied; 5=very satisfied	Diploma	Associate Degree	Baccalaureate Degree	Master's Degree
Your job overall	4.09	4.08	4.10	4.21
Your salary	3.97	3.85	3.85	3.90
Employee benefits	3.76	3.80	3.88	4.01
Adequacy of RN skill level where you work	4.09	4.01	4.06	4.03
Adequacy of the number of RNs where you work	3.64	3.38	3.42	3.60
Adequacy of clerical support services	3.52	3.35	3.41	3.52
Non-nursing tasks required	3.43	3.30	3.29	3.37
Amount of paperwork required	3.25	3.11	3.22	3.32
Your workload	3.39	3.38	3.37	3.51
Physical work environment	3.63	3.61	3.62	3.86
Work schedule	3.91	3.93	4.00	4.12
Job security	3.86	3.87	3.95	4.11
Opportunities for advancement	3.39	3.54	3.57	3.60
Support from other nurses you work with	4.05	3.85	3.88	3.93
Teamwork between coworkers and yourself	4.18	4.03	4.09	4.13
Leadership from your nursing administration	3.50	3.42	3.48	3.58
Involvement in patient care decisions	3.73	3.73	3.73	3.88
Relations with physicians	3.86	3.97	3.92	4.13
Relations with other non-nursing staff	4.14	4.08	4.06	4.20
Relations with agency/registry nurses	3.80	3.73	3.79	3.78
Interaction with patients	4.23	4.32	4.24	4.37
Time available for patient education	3.56	3.43	3.49	3.65
Involvement in policy/management decisions	3.21	3.04	3.14	3.31
Opportunities to use your skills	4.02	4.04	4.01	4.09
Opportunities to learn new skills	3.70	3.71	3.71	3.76
Quality of preceptor and mentor programs	3.46	3.29	3.45	3.34
Employer-supported educational opportunities	3.25	3.23	3.37	3.40
Quality of patient care where you work	4.00	3.93	3.99	4.04
Feeling that work is meaningful	4.21	4.10	4.10	4.33
Recognition for a job well done	3.53	3.37	3.44	3.55
Satisfaction with the profession overall	4.16	4.15	4.18	4.32

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

Table 3.45. Satisfaction with principal nursing position for RNs currently working and residing in California, by job title, 2014

1 through 5 scale; 1=very dissatisfied; 5=very satisfied	Staff nurse	Senior management	Front-line management	Patient care coordinator
Your job overall	4.07	4.51	4.08	4.07
Your salary	3.88	4.11	3.76	3.98
Employee benefits	3.84	3.99	3.73	3.94
Adequacy of RN skill level where you work	4.07	4.00	3.99	4.11
Adequacy of the number of RNs where you work	3.40	4.11	3.38	3.56
Adequacy of clerical support services	3.39	3.86	3.30	3.59
Non-nursing tasks required	3.29	3.50	3.26	3.47
Amount of paperwork required	3.16	3.16	3.07	3.39
Your workload	3.39	3.58	3.29	3.40
Physical work environment	3.58	4.12	3.54	3.79
Work schedule	3.93	4.25	4.00	4.08
Job security	3.89	4.38	3.91	4.01
Opportunities for advancement	3.54	4.11	3.51	3.39
Support from other nurses you work with	3.88	4.35	3.92	3.79
Teamwork between coworkers and yourself	4.08	4.25	4.14	3.95
Leadership from your nursing administration	3.41	4.17	3.42	3.44
Involvement in patient care decisions	3.67	4.42	3.74	3.78
Relations with physicians	3.91	4.34	3.97	4.08
Relations with other non-nursing staff	4.07	4.40	4.10	4.11
Relations with agency/registry nurses	3.77	4.09	3.76	3.83
Interaction with patients	4.27	4.24	4.25	4.33
Time available for patient education	3.44	3.63	3.40	3.84
Involvement in policy/management decisions	2.98	4.45	3.10	3.08
Opportunities to use your skills	4.02	4.48	4.04	3.92
Opportunities to learn new skills	3.71	4.13	3.69	3.62
Quality of preceptor and mentor programs	3.44	3.39	3.35	2.93
Employer-supported educational opportunities	3.32	3.90	3.26	3.19
Quality of patient care where you work	3.95	4.41	3.95	4.01
Feeling that work is meaningful	4.11	4.57	4.14	4.10
Recognition for a job well done	3.38	3.81	3.40	3.48
Satisfaction with the profession overall	4.14	4.19	4.21	4.13

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

Job Satisfaction by Work Setting

Table 3.46 presents nurse satisfaction with 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 in ambulatory care settings – either hospital-based or freestanding – were more satisfied than other RNs. RNs in hospital-based ambulatory care departments were less satisfied than those in acute care with teamwork, opportunities to use skills, opportunities to learn new skills, and quality of preceptor/mentor programs. RNs in other ambulatory settings were less satisfied than those in acute care settings with employee benefits, teamwork, and quality of preceptor/mentor programs. RNs working in skilled nursing facilities have lower average satisfaction levels, and are substantially less satisfied than acute care nurses with salary, benefits, job security, opportunities for advancement, teamwork, and opportunities to use their skills. They are more satisfied, however, with amount of paperwork, non-nursing tasks required, leadership from nursing administration, involvement in management/policy decisions, involvement in patient care decisions,

and time available for patient education. On average staff nurses were more satisfied with quality of preceptor/mentor programs than other RNs.

Table 3.46. Satisfaction with principal nursing position for RNs currently working and residing in California, by work setting, 2014

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	4.07	4.26	4.07	4.03	4.41
Your salary	3.94	4.12	3.39	3.56	3.94
Employee benefits	3.91	4.08	3.36	3.47	3.58
Adequacy of RN skill level where you work	4.06	4.17	3.92	4.11	4.16
Adequacy of the number of RNs where you work	3.44	3.58	3.52	3.44	3.77
Adequacy of clerical support services	3.34	3.47	3.38	3.61	3.85
Non-nursing tasks required	3.23	3.38	3.45	3.49	3.63
Amount of paperwork required	3.06	3.42	3.32	3.13	3.50
Your workload	3.34	3.56	3.12	3.43	3.82
Physical work environment	3.57	3.77	3.74	3.83	4.11
Work schedule	4.00	4.06	3.87	3.79	4.25
Job security	3.95	4.05	3.64	3.84	4.28
Opportunities for advancement	3.62	3.61	3.30	3.20	3.81
Support from other nurses you work with	3.94	3.94	3.80	3.73	4.02
Teamwork between coworkers and yourself	4.12	4.09	3.83	4.03	4.04
Leadership from your nursing administration	3.42	3.45	3.65	3.67	3.64
Involvement in patient care decisions	3.67	3.74	3.91	3.87	4.20
Relations with physicians	3.91	4.03	3.96	3.89	4.37
Relations with other non-nursing staff	4.08	4.17	3.98	4.10	4.33
Relations with agency/registry nurses	3.77	3.81	3.76	3.84	3.91
Interaction with patients	4.23	4.45	4.37	4.47	4.56
Time available for patient education	3.34	3.64	3.56	3.84	3.88
Involvement in policy/management decisions	3.03	3.14	3.55	3.16	3.53
Opportunities to use your skills	4.10	4.07	3.76	3.97	4.28
Opportunities to learn new skills	3.79	3.70	3.56	3.53	3.99
Quality of preceptor and mentor programs	3.48	3.35	3.25	3.01	3.41
Employer-supported educational opportunities	3.39	3.43	3.27	3.00	3.50
Quality of patient care where you work	3.92	4.16	4.02	4.06	4.37
Feeling that work is meaningful	4.11	4.30	4.01	4.29	4.41
Recognition for a job well done	3.38	3.58	3.42	3.65	3.88
Satisfaction with the profession overall	4.19	4.18	4.24	4.14	4.29

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 3.47 presents the responses regarding plans in the next five years 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, but dropped again to 53.1 percent in 2012 and 53.0 percent in 2014. Nearly 20 percent plan to reduce their hours of nursing work in 2014 and this share had been relatively stable since 1993, ranging from 32.7 percent in 1990 to 15.2 in 2010. Over eleven percent planned to increase their hours of nursing work. 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, but returned to about 3 percent in 2012 and 2014. In 2014, 13.2 percent of working nurses said they plan to retire within five years, which is higher than 9.5 percent in 2010 and 11.4 percent in 2012.

Table 3.47. 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	2012	2014
Plan to work approximately as much as now	46.1%	60.1%	57.1%	56.7%	53.1%	54.6%	60.2%	53.1%	53.0%
Plan to reduce hours of nursing work	32.7%	21.8%	24.7%	22.1%	21.6%	19.8%	15.2%	21.0%	19.9%
Plan to increase hours of nursing work	6.7%	8.4%	8.5%	7.2%	9.5%	10.1%	13.1%	11.5%	11.2%
Plan to leave nursing entirely, but not retire	14.6%	9.8%	9.7%	3.4%	3.0%	3.1%	2.0%	3.0%	2.8%
Plan to retire	*	*	*	10.6%	12.8%	12.4%	9.5%	11.4%	13.2%
Number of cases	2,219	2,160	2,422	3,717	3,694	4,037	4,660	3,142	3,906

Note: Columns might not total 100% due to rounding. Data (2006-2012) are weighted to represent all RNs with active licenses.

*Data not available

Since 2012 the survey asked RNs about their plans for the next two years; prior surveys did not ask about this time period. As seen in Table 3.48, the intentions for the next two years were similar in 2012 and 2014. In 2014, 19.0 percent of RNs under 35 years old intend to increase their hours of nursing work in the next two years, while 13.3 percent plans to reduce their hours. Fewer than 1 percent of RNs under 55 years old plans to retire in the next two years. In contrast, nearly 37 percent of RNs 65 years and older plan to retire in the next two years.

Table 3.48. Plans for next two years of RNs who resided in California and were employed in nursing, overall and by age group, 2012 and 2014

	All respondents, 2012	All respondents, 2014	2014				
			Under 35 years	35-44 years	45-54 years	55-64 years	65 years and older
Plan to work approximately as much as now	73.3%	71.9%	67.1%	76.3%	80.0%	70.4%	44.9%
Plan to reduce hours of nursing work	10.1%	10.5%	13.3%	9.2%	6.4%	12.5%	14.1%
Plan to increase hours of nursing work	12.2%	11.6%	19.0%	13.8%	11.9%	4.9%	3.3%
Plan to leave nursing entirely, but not retire	0.8%	1.0%	0.5%	0.7%	0.9%	1.8%	0.8%
Plan to retire	3.7%	5.0%	0.0%	0.0%	0.8%	10.5%	36.9%

Note: Number of observations=4,005. Columns might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Table 3.49 and Figure 3.20 examine responses about plans for the next five years 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. 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

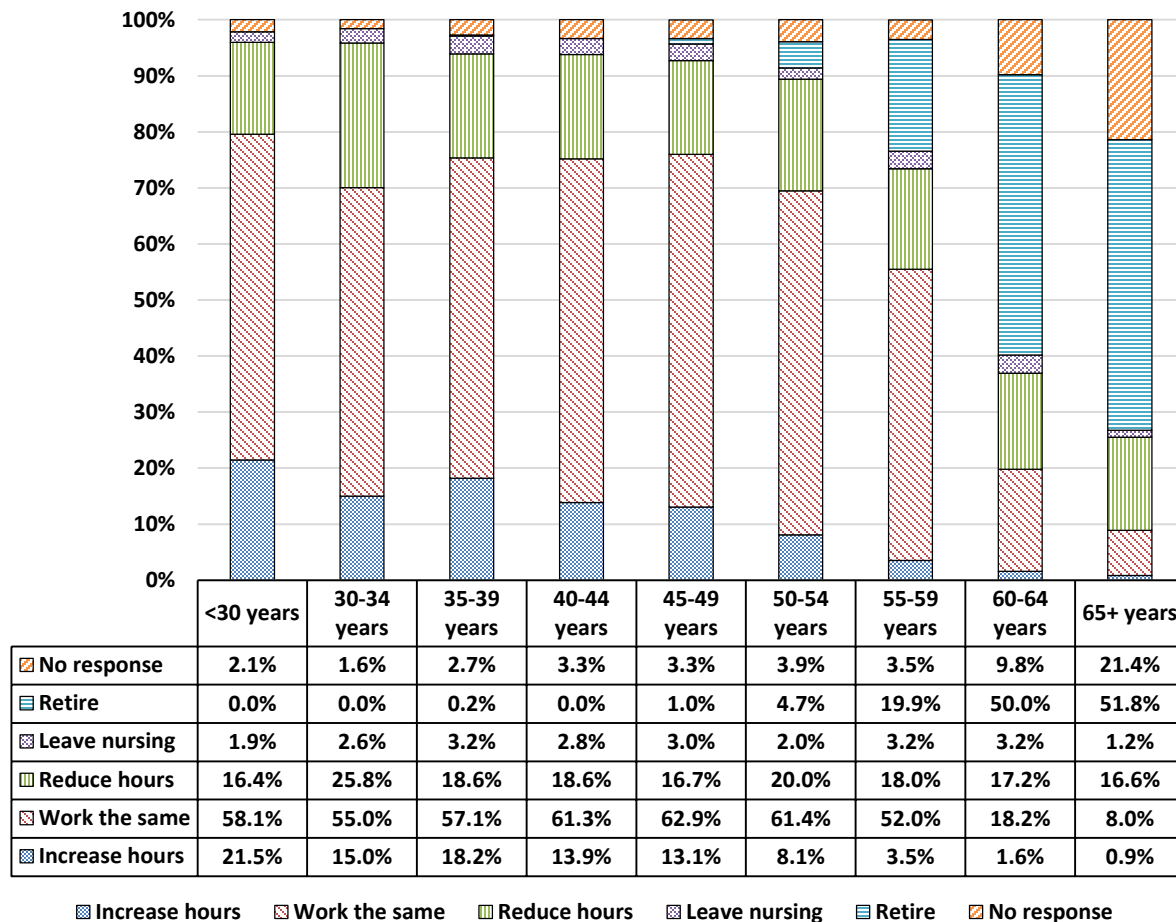
work less, with plans to increase their hours as their children get older. About two-thirds of RNs over 65 years old plan to retire within five years, and 35.7 percent of nurses between 55 and 64 years old plan to retire within five years. The share of RNs in older age groups who plan to retire within five years dropped notably between 2008 and 2010, but returned to 2008 levels in 2012.

Table 3.49. Future plans of RNs who resided in California and were employed in nursing at the times of the surveys, by age group, 2014

		Plan to increase hours of nursing work	Plan to work approximately as much as now	Plan to reduce hours of nursing work	Plan to leave nursing entirely, but not retire	Plan to retire
Under 35 years	2008	19.3%	54.8%	21.1%	4.7%	0.0%
	2010	25.5%	60.0%	12.6%	1.8%	0.0%
	2012	23.4%	50.0%	24.0%	2.5%	0.0%
	2014	17.8%	57.3%	22.5%	2.3%	0.0%
35-44 years	2008	15.6%	62.1%	19.5%	2.3%	0.5%
	2010	16.3%	68.5%	13.5%	1.5%	0.3%
	2012	13.6%	61.2%	21.1%	3.1%	1.0%
	2014	16.3%	61.3%	19.2%	3.1%	0.1%
45-54 years	2008	8.0%	65.4%	19.9%	2.8%	3.9%
	2010	10.9%	67.5%	15.5%	2.9%	3.2%
	2012	9.5%	61.7%	20.9%	3.6%	4.2%
	2014	10.8%	64.4%	19.2%	2.6%	3.1%
55-64 years	2008	2.3%	41.2%	20.8%	3.3%	32.5%
	2010	3.9%	49.3%	18.6%	1.2%	27.0%
	2012	2.7%	43.4%	18.9%	2.9%	32.1%
	2014	2.8%	39.3%	18.8%	3.4%	35.7%
65 years and older	2008	0.6%	14.9%	12.8%	2.1%	69.8%
	2010	1.3%	23.1%	18.0%	2.9%	54.7%
	2012	0.2%	16.9%	16.5%	1.7%	64.8%
	2014	1.1%	10.2%	21.2%	1.6%	66.0%

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

Figure 3.20. Future plans of RNs who resided in California and were employed in nursing at the times of the surveys, by age group, 2014

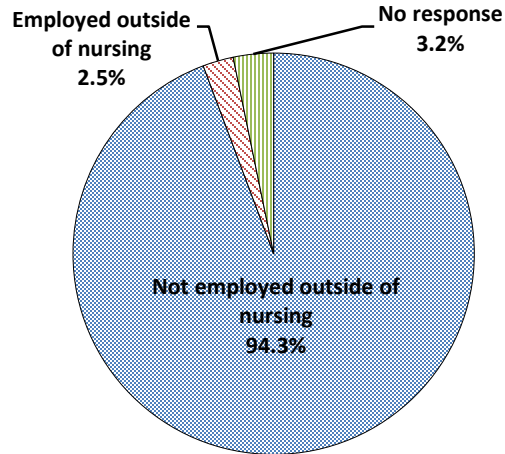


Note: Number of cases=4,129. Data are weighted to represent all RNs with active licenses.

Employment Outside of Nursing

RNs were asked in 2014 to report if they were employed outside nursing even if they were employed in nursing. Over 94 percent of working RNs residing in California reported they did not hold a non-nursing job (Figure 3.21). Of the 2.5 percent that did hold a non-nursing job, over 70 percent reported the additional job required their nursing knowledge (Table 3.50). Most non-nursing jobs were in health services (44.8%) and retail sales (22.2%) (Table 3.51). Twenty-three percent of working RNs with a non-nursing job indicated that their non-nursing job was in an “other” category.

Figure 3.21. Employment outside of nursing for working RNs residing in California, 2014



Note: Number of cases=4,129. Data are weighted to represent all RNs with active licenses.

Table 3.50. Employment outside of nursing requires nursing knowledge as reported by working RNs residing in California who have a position outside of nursing, 2012-2014

	2012	2014
Does not require nursing knowledge	26.6%	24.1%
Requires nursing knowledge	69.8%	70.1%
No response	3.6%	5.7%
Number of cases	118	220

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

Table 3.51. Field outside of nursing as reported by working RNs residing in California who have a position outside of nursing, 2012-14

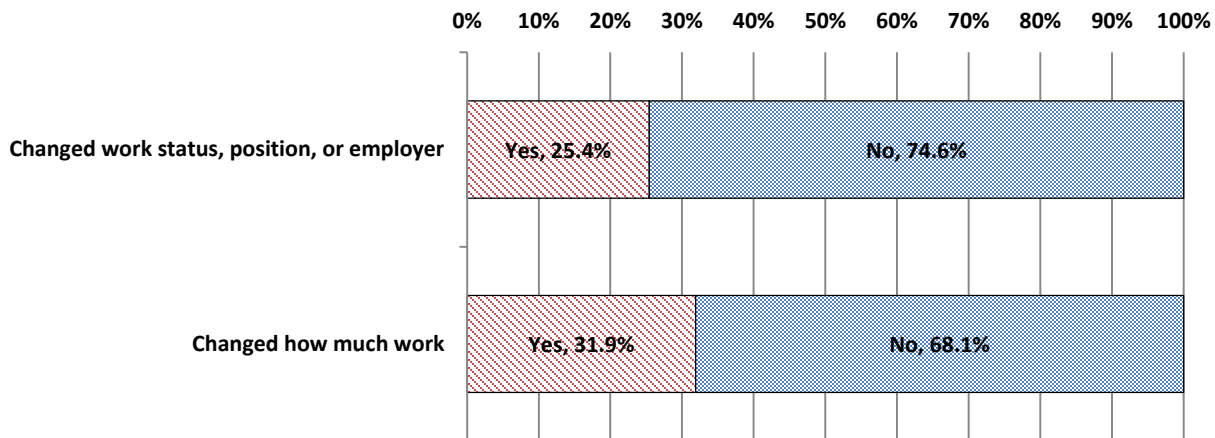
	2012	2014
Health Services	50.7%	44.8%
Retail sales	11.6%	22.2%
Education	10.1%	13.7%
Financial Services	4.4%	12.4%
Consulting	5.2%	4.6%
Other	29.3%	23.3%
Number of cases	121	108

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

Changes in Employment Status

In 2014, a quarter of RNs residing in California reported a change over the prior year in their employment status, position, or employer (Figure 3.22). Nearly a third indicated that they changed how much they work, for example, they increased or decreased their hours per week.

Figure 3.22. Change in employer or position as reported by all RNs and employed RNs residing in California, 2014



Note: Number of cases=4,129. Data are weighted to represent all RNs with active licenses.

Table 3.52 presents the types of work status, employer, and position changes reported by RNs. A new position with the same employer (27.4%), and a new position with a new employer (27.0) were the most common changes reported by RNs.

Table 3.52. Type of change for RNs who experienced a change in work status, employer or position, and reside in California, 2012-2014

	Percent of RNs who experienced a change, 2012	Percent of RNs who experienced a change, 2014
Added secondary nursing job	14.3%	18.1%
Added secondary non-nursing job	1.2%	2.0%
Stopped secondary nursing job	*	8.9%
Stopped secondary non-nursing job	*	2.0%
Not working as RN now, but was earlier this year	6.5%	4.4%
Working as an RN now, but was not working earlier this year	7.5%	7.4%
New Position, Same Employer	29.5%	27.4%
Same Position, New Employer	14.3%	11.8%
New Position, New Employer	20.6%	27.0%
Other	17.2%	6.8%
Number of cases	1,230	1,066

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

RNs were asked what factors may have played a role in their change in work status, employer, or position during the previous year (Table 3.53). The factors most often rated as very important were desire to use or learn a skill (35.1%), salary (35.1%), stress on the job (28.5%), benefits (27.4%), other family responsibilities (25.2%), wanting more convenient hours (24.3%), dissatisfaction with previous job (21.0%), promotion and career development (20.8%).

Table 3.53. Factors important to changes in employment status as reported by RNs residing in California who experienced a change in work status, employer, or position, 2014

	Not at all Important	Somewhat Important	Important	Very Important
Retired	84.9%	2.1%	4.8%	8.1%
Childcare responsibilities	73.5%	2.3%	5.7%	18.6%
Other family responsibilities	58.1%	3.6%	13.2%	25.2%
Salary	43.2%	6.4%	15.4%	35.1%
Benefits	52.7%	4.9%	15.0%	27.4%
Laid off	89.8%	0.5%	3.9%	5.9%
Employer reduced hours	83.9%	1.8%	5.7%	8.5%
Change spouse/partner work situation	81.3%	2.0%	6.7%	10.1%
Change in financial status	69.4%	2.6%	10.8%	17.2%
Relocation	80.2%	1.2%	6.7%	12.0%
Promotion/career advancement	67.4%	2.0%	9.8%	20.8%
Change in health Status	82.0%	2.6%	6.0%	9.4%
Wanted more convenient hours	60.6%	2.8%	12.4%	24.3%
Dissatisfied with previous job	61.0%	5.6%	12.4%	21.0%
Stress on the job	52.5%	6.0%	13.0%	28.5%
Desire to use current/learn new skills	47.7%	3.7%	13.6%	35.1%
Other	89.9%	0.1%	3.8%	6.3%

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

Nurses who reported that the hours they had worked over the previous year had changed provided information about the types of changes experienced (Table 3.54). The most common change (28.7%) was a decrease in the number of hours worked, which was the RN’s choice. An additional 12.6 percent reported that their employer imposed a decrease in work hours, which was a slight decline from 2012 (14.1%). The next most common change was an elective increase in work hours (28.1%), although 13.6 percent of respondents said they experienced an increase in work hours imposed by their employer.

Table 3.54. Types of change for RNs who experienced a change in hours worked and reside in California 2012-2014

	Percent of RNs who experienced a change, 2012	Percent of RNs who experienced a change, 2014
Did not work in past year	19.8%	17.3%
Increase in hours, imposed by employer	11.0%	13.6%
Increase in hours, by choice	28.9%	28.1%
Decrease in hours, imposed by employer	14.1%	12.6%
Decrease in hours, by choice	21.4%	28.7%
Other	11.1%	18.1%
Number of cases	1,870	1,821

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

RNs were asked what factors may have played a role in the change of their hours worked during the previous year (Table 3.55). Respondents were asked to rank each item on a four-point scale, with one point given for “not at all important” and four points for “very important.” The factors most often rated as very important among RNs who changed work hours were salary (30.1%), other family responsibilities (24.8%), desire to use or learn new skill (23.6%), benefits (23.6%), stress on the job (23.4%), and wanting more convenient hours (21.5%).

Table 3.55. Factors important to changes in hours worked as reported by RNs residing in California who experienced a change in work status, employer, or position, 2014

	Not at all Important	Somewhat Important	Important	Very Important
Retired	83.8%	2.4%	4.1%	9.6%
Childcare responsibilities	74.4%	1.9%	5.0%	18.7%
Other family responsibilities	60.2%	3.9%	11.1%	24.8%
Salary	51.2%	5.2%	13.6%	30.1%
Benefits	61.0%	4.3%	11.1%	23.6%
Laid off	92.4%	0.7%	2.4%	4.5%
Employer reduced hours	82.7%	2.2%	4.9%	10.2%
Change spouse/partner work situation	82.8%	1.6%	5.0%	10.6%
Change in financial status	69.8%	3.0%	9.9%	17.3%
Relocation	86.8%	1.3%	4.5%	7.4%
Promotion	78.1%	1.7%	6.8%	13.4%
Change in health status	81.3%	1.8%	5.7%	11.2%
Wanted more convenient hours	66.1%	3.1%	9.3%	21.5%
Dissatisfied with previous job	76.7%	3.7%	8.6%	11.0%
Stress on the job	59.2%	4.9%	12.6%	23.4%
Desire to use my skills/learn new skills	61.0%	2.7%	12.7%	23.6%
Other	89.2%	0.3%	4.1%	6.4%

Note: Number of cases=1,184. Data are weighted to represent all RNs with active licenses.

A mean score for each item can be obtained by computing the average score, with one point given for “not at all important” and four points for “very important.” Higher mean scores thus indicate greater importance of the factor for RNs. The mean scores for each factor affecting work status changes are summarized in Table 3.56, by type of change. Salary ranked highest among the group of nurses who increased their hours, but only ranked moderately high for nurses who decreased their hours. The number one reason for RNs who found new positions was due to reduced hours imposed by the employer. The desire to use or learn a new skill was important to the group of nurses who experienced an increase in hours as well as RNs with new positions. In contrast, all of the nurses favored more convenient hours with the exceptions of the nurses who stopped working as an RN (Table 3.56)..

Table 3.56. Factors important to changing employment status by type of change as reported by RNs residing in California who experienced a change in employment status, 2014

1 through 4 scale; 1=not at all important; 4=very important	Increased Hours	Decreased hours	New RN position	Stopped Working as RN
Retired	2.39	1.76	2.46	2.48
Childcare responsibilities	3.07	2.53	3.03	2.70
Other family responsibilities	3.29	3.29	3.11	3.50
Salary	3.65	3.24	3.16	2.54
Benefits	3.33	3.10	3.20	2.65
Laid off	2.39	2.94	2.92	2.43
Employer reduced hours	2.86	3.05	3.52	3.02
Change spouse/partner work situation	2.92	2.74	2.80	3.46
Change in financial status	3.31	2.66	3.19	2.81
Relocation	2.69	1.38	2.80	2.88
Promotion	3.13	3.01	3.34	2.92
Change in health status	3.03	1.54	2.94	2.96
Wanted more convenient hours	3.30	3.44	3.42	2.19
Dissatisfied with previous job	2.84	3.39	3.11	2.58
Stress on the job	3.09	3.46	3.33	2.44
Desire to use my skills/learn new skills	3.45	3.07	3.35	3.06
Other	3.66	3.88	3.94	3.00
Number of cases	728	761	336	236

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

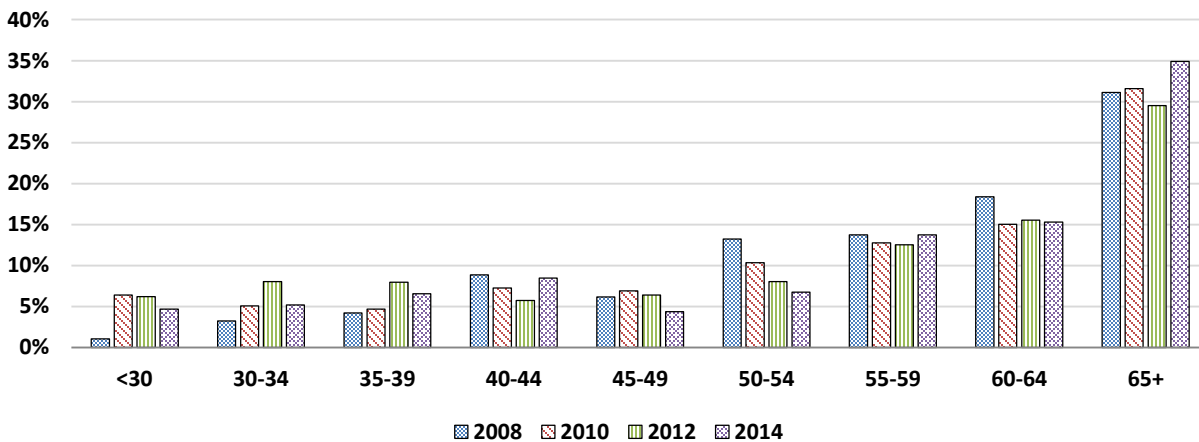
Chapter 4. Profile of Registered Nurses with Active Licenses Not Working in Nursing

Nearly 17 percent of nurses with active California licenses who lived in California were not working in nursing jobs in 2014 (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 education of RNs who do not work in nursing, and analyze their responses to a series of survey questions specifically directed to better understand 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 55.5 whereas the average age of working RNs is 46.7 years (Chapter 2, Table 2.5). The share of licensed RNs not working in nursing rises with age as shown in Figure 4.1 and Table 4.1. Almost 64 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 (34.9%). The share of nurses under 40 years old not working in nursing positions had risen from 2008 in 2010 and 2012, but has dropped in 2014. The number of nurses between 40 and 50 years old not working in nursing declined slightly from 2008 to 2012 (15.0% to 12.2%) and remained stable in 2014 (12.9%).

Figure 4.1. Age distribution of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2008-2014



Note: 2014 number of cases=918. Data might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

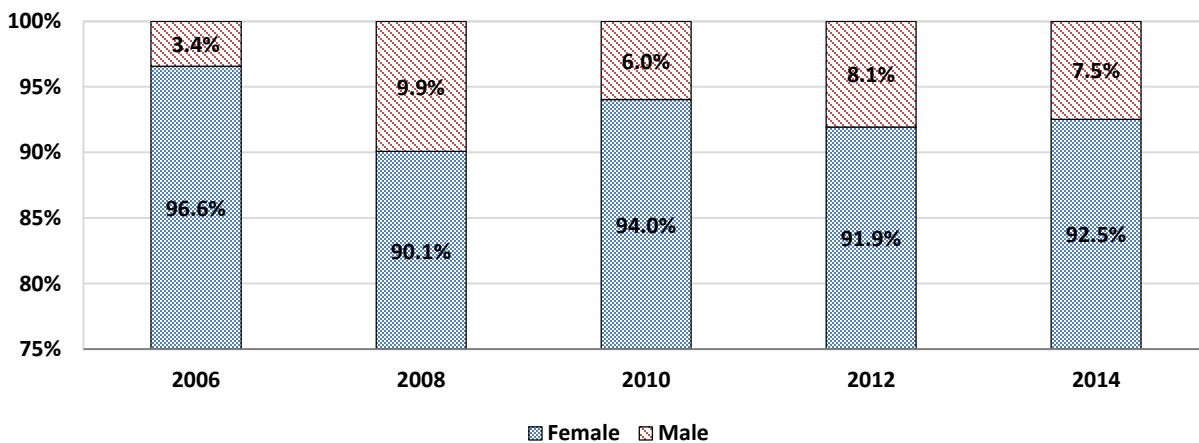
Table 4.1. Age distribution of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2008-2014

	2008	2010	2012	2014
< 30	1.1%	6.4%	6.2%	4.7%
30-34	3.2%	5.1%	8.0%	5.2%
35-39	4.2%	4.7%	8.0%	6.6%
40-44	8.8%	7.3%	5.8%	8.5%
45-49	6.2%	6.9%	6.4%	4.4%
50-54	13.2%	10.4%	8.0%	6.8%
55-59	13.8%	12.8%	12.5%	13.7%
60-64	18.4%	15.0%	15.5%	15.3%
65+	31.1%	31.6%	29.5%	34.9%

Note: 2014 number of cases=918. Data might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Nearly eight percent of RNs not working in nursing in 2014 were male, as seen in Figure 4.2. Statewide, 11.8 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, 2006-2014



Note: 2014 number of cases=907. 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 4.2 and Chapter 2, Figure 2.4). Nearly 67 percent of RNs who are not working in nursing positions are White, but only 53.2 percent of the statewide RN population is White. Eighteen percent of California’s RNs are Filipino, but Filipinos account for only 10.7 percent of RNs not working in nursing. However, the gap has narrowed over time: in 2008, 59 percent of RNs working in nursing were White versus 79 percent of RNs not working in nursing.

Table 4.2. Racial/ethnic backgrounds of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2014

	2006	2008	2010	2012	2014
White, not Hispanic	81.7%	78.6%	69.1%	63.5%	66.8%
Black/African-American	2.4%	3.8%	5.2%	4.2%	4.5%
Hispanic	1.7%	2.3%	5.0%	5.8%	3.7%
Filipino	6.5%	7.5%	8.8%	13.7%	10.7%
Other Asian	3.8%	5.4%	8.2%	8.8%	8.7%
Native Hawaiian or Other Pacific Islander	<0.1%	<0.1%	0.3%	0.8%	0.5%
Native American/American Eskimo	0.1%	0.4%	0.2%	0.7%	0.8%
Mixed	3.5%	1.5%	3.1%	2.6%	4.4%
Other	0.4%	0.4%	0.1%		
Number of cases	644	707	807	833	910

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.

RNs not working in nursing are less likely to speak other languages than the RN population as a whole (Table 4.3 and Chapter 2, Table 2.11). In 2014, among all nurses, 40.3 percent speak at least one other language. This number rises to 42.5 percent among RNs currently working.

Table 4.3. Language fluency of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2014

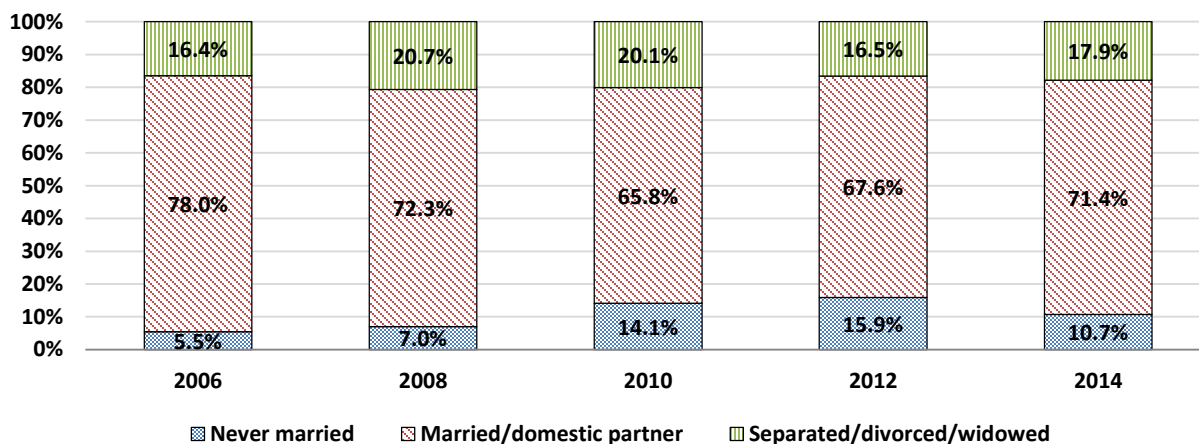
	Working RNs				Non-working RNs			
	2008	2010	2012	2014	2008	2010	2012	2014
Tagalog or other Filipino language	18.1%	18.9%	18.2%	19.0%	6.1%	6.9%	12.2%	10.9%
Spanish	12.1%	10.8%	11.3%	12.1%	7.1%	10.1%	9.9%	7.9%
Mandarin	2.3%	1.9%	1.5%	1.3%	1.5%	1.4%	1.0%	2.1%
Korean	1.3%	1.5%	1.8%	1.4%	0.1%	1.9%	1.9%	1.8%
Hindi or other South Asian language	1.5%	1.6%	1.4%	1.4%	0.1%	0.2%	1.8%	1.5%
Cantonese	1.6%	1.1%	1.5%	0.9%	0.8%	0.3%	0.5%	1.3%
Vietnamese	0.7%	0.8%	0.9%	1.2%	0.0%	0.6%	0.5%	0.1%
French	*	1.3%	0.9%	1.6%	*	1.7%	0.9%	1.5%
German	*	0.7%	0.6%	*	*	0.6%	0.8%	*
Other	8.0%	6.1%	1.2%	6.9%	7.9%	3.9%	0.6%	5.3%

* 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 71.4 percent (Figure 4.3), which is higher than the share in the overall RN population (66.5%, 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, 2006-2014



Note: 2014 number of cases=904. 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 4.4, nurses who are not working in nursing are less likely than the statewide active RN population to have children living at home (Chapter 2, Table 2.13). Among the statewide working RN population, about 52 percent have some children living at home, but only 37 percent of non-working RNs have children at home.

Table 4.4. 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, 2006-2014

	Working RNs					Non-working RNs				
	2006	2008	2010	2012	2014	2006	2008	2010	2012	2014
None	53.1%	49.2%	47.5%	57.8%	48.2%	47.3%	68.7%	67.3%	72.7%	63.1%
One	18.4%	22.0%	22.3%	23.8%	20.7%	17.5%	12.2%	15.9%	16.2%	16.4%
Two	20.0%	19.7%	21.4%	13.1%	19.6%	25.0%	12.2%	13.2%	6.0%	12.8%
Three	6.4%	6.5%	6.6%	4.2%	8.7%	7.4%	3.9%	2.4%	3.7%	6.1%
Four or more	2.1%	2.6%	2.2%	1.2%	2.8%	2.8%	3.0%	1.2%	1.5%	1.7%
Number of cases	3,406	4,153	4,531	3,242	3,928	579	737	793	750	897

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 4.5 and Chapter 2, Table 2.14). This is consistent with non-working RNs being older themselves. The percentage of RNs not working in nursing with children living in the home that were over the age of 18 increased from 34 percent in 2010 to 53.5 percent in 2014.

Table 4.5. 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, 2006-2014

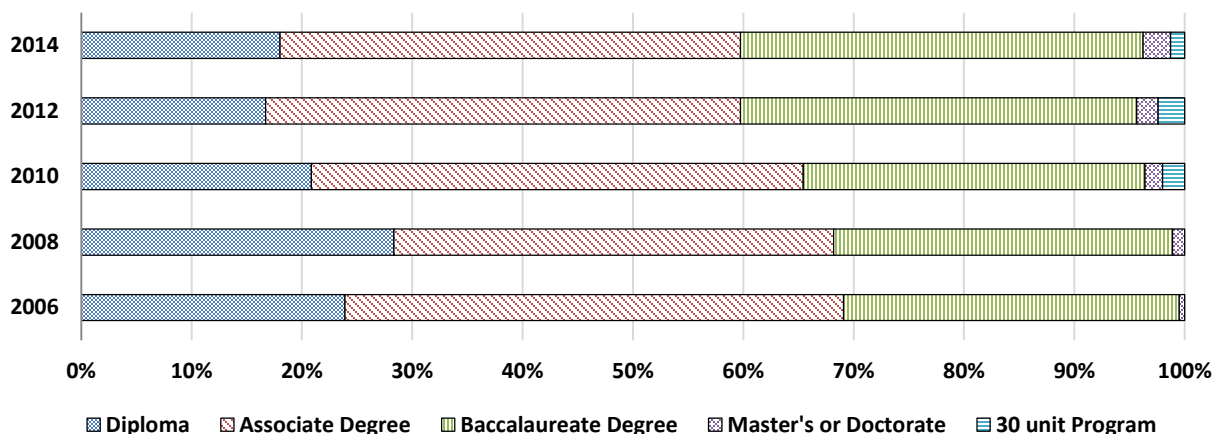
Ages of children	Working RNs					Non-working RNs				
	2006	2008	2010	2012	2014	2006	2008	2010	2012	2014
Birth to 2 years	16.9%	18.9%	16.9%	19.3%	18.6%	20.4%	16.7%	22.1%	13.8%	14.1%
3-5 years	16.8%	16.3%	16.3%	18.1%	18.1%	15.3%	20.5%	14.7%	19.5%	11.6%
6-12 years	32.8%	33.5%	36.8%	5.4%	32.1%	30.9%	36.1%	28.0%	4.7%	20.1%
13-18 years	33.1%	37.4%	32.2%	8.0%	28.4%	35.6%	40.3%	27.5%	9.5%	22.0%
Over 18	38.3%	34.7%	31.0%	30.2%	37.0%	38.4%	38.5%	34.3%	40.5%	53.5%

Note: 2014 working RN number of cases=2,050. 2014 non-working RN number of cases=286. 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; 17.8 percent of RNs not working in nursing are diploma-educated, as compared with 10.3 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. However, the proportion of RNs not working in nursing holding diploma degrees has decreased over time, down from 23.9 percent in 2006.

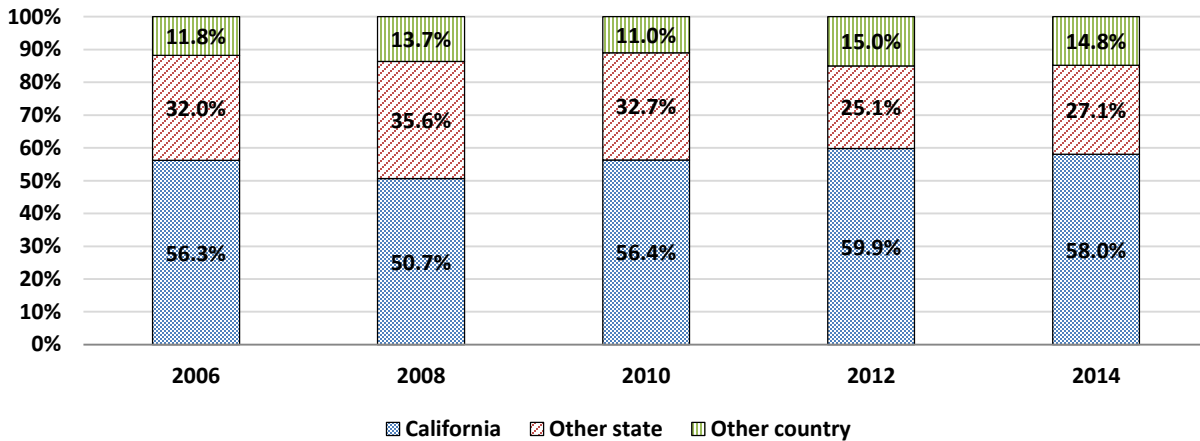
Figure 4.4. Pre-licensure education of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2014



Note: 2014 number of cases=917. 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 (58%), as seen in Figure 4.5. Fifteen percent of RNs not working in nursing were educated in another country, while 21 percent of working RNs was educated in other countries (Chapter 2, Table 2.18).

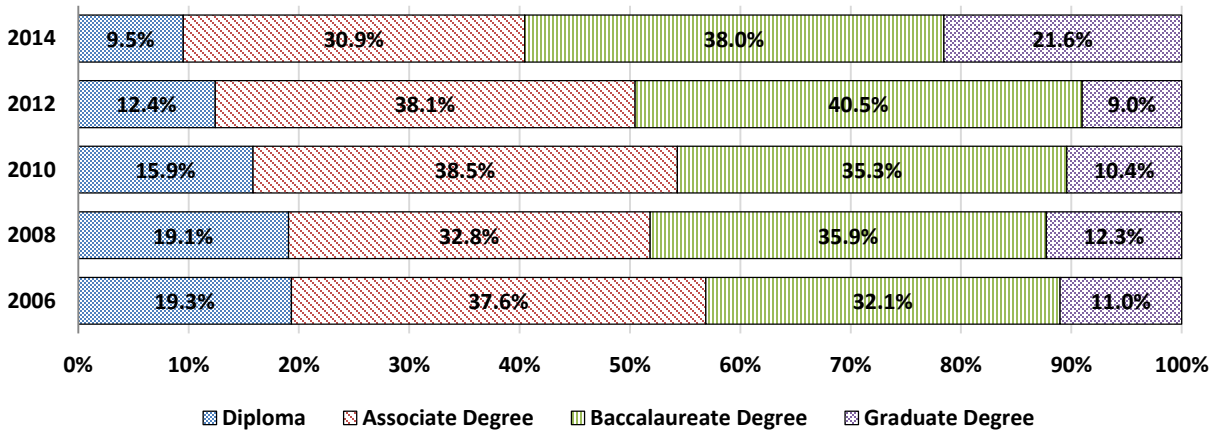
Figure 4.5. Location of education of registered nurses who are not working in nursing positions, for RNs with active California licenses and California addresses, 2006-2014



Note: 2014 number of cases=911. 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. In 2014, 61.5 percent of working RNs report that their highest education is at least a baccalaureate degree (Chapter 2, Figure 2.13); compared to 59.6 percent of non-working RNs. The share of RNs with baccalaureate and higher degrees that is not working in nursing was notably higher in 2014 than in prior years.

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, 2006-2014



Note: 2014 number of cases=917. Data might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

RNs not working in nursing are about as likely to have certification as RNs employed in nursing jobs. They are slightly more likely than working RNs to have certification in public health nursing (Table 4.6 and Chapter 2, Table 2.24).

Table 4.6. 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, 2006-2014

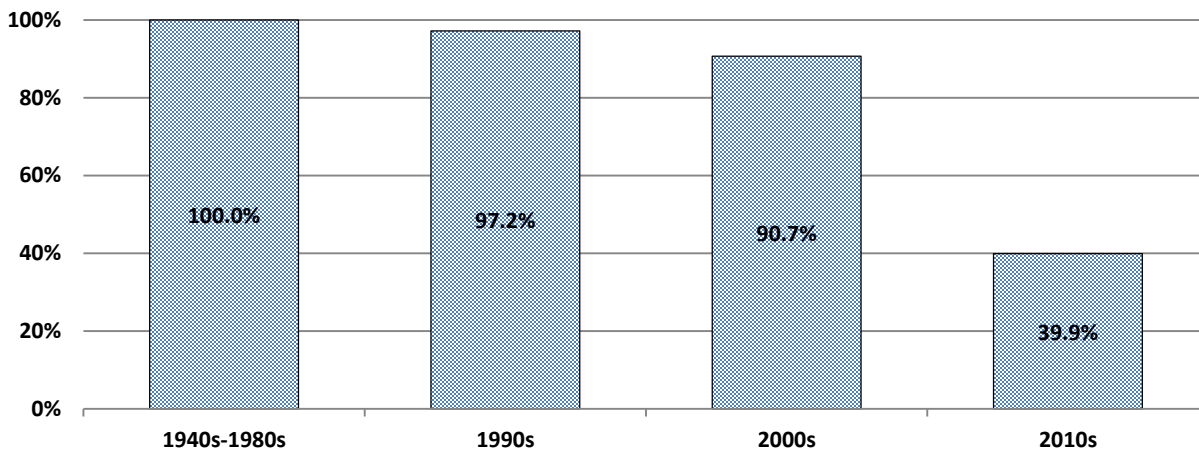
	Working RNs					Non-working RNs				
	2006	2008	2010	2012	2014	2006	2008	2010	2012	2014
No additional certifications	76.3%	77.9%	77.3%	75.9%	75.3%	78.9%	69.2%	73.6%	74.9%	74.1%
Nurse Anesthetist	0.6%	0.4%	0.4%	0.7%	1.2%	0.6%	0.3%	0.2%	0.3%	0.7%
Nurse Midwife	2.0%	0.6%	0.4%	0.4%	0.7%	1.0%	0.1%	0.5%	0.8%	0.4%
Nurse Practitioner	6.6%	7.1%	5.6%	5.6%	5.5%	5.4%	9.2%	6.1%	4.0%	5.0%
Public Health Nurse	15.5%	16.9%	14.9%	16.2%	17.2%	16.7%	21.0%	16.9%	18.8%	18.9%
Psychiatric/Mental Health Nurse	3.4%	1.1%	1.2%	1.5%	1.0%	0.5%	1.5%	2.1%	1.8%	1.2%
Clinical Nurse Specialist	2.8%	2.7%	2.7%	2.6%	2.3%	2.7%	5.6%	3.5%	3.5%	1.5%
Number of cases	3,282	3,532	4,368	3,842	4,129	549	737	774	815	918

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. Some respondents indicated that they have never worked as an RN. Figure 4.8 presents the percentages of non-working RNs who previously worked in registered nursing, by decade of graduation. All respondents who graduated prior to 1990 who are not presently employed in registered nursing had worked in the field previously, and nearly all of those who graduated in the 1990s had previously worked as RNs. However, only 90.7 percent of RNs who are not presently working and graduated in the 2000s held an RN job previously, and only 39.9 percent of non-working RNs who graduated in the 2010s have worked in nursing.

Figure 4.7. Percent of registered nurses who worked as a registered nurse, by decade of graduation from initial RN education program



Note: Number of cases=909. Data are weighted to represent all RNs with active licenses.

Among RNs not working in the nursing profession in 2014, but who had previously worked in nursing, 33 percent last worked in the field when they were under 45 years old (Table 4.7). Another 40.9 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 51.9 years.

Table 4.7. 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	2012	2014
Under 35	36.3%	28.0%	29.8%	18.6%	25.2%	13.7%	15.9%	14.3%	18.3%
35-44	28.6%	33.7%	38.2%	21.6%	32.8%	19.3%	17.4%	18.2%	14.7%
45-54	15.9%	21.0%	22.1%	22.2%	23.5%	20.5%	19.2%	13.7%	13.4%
55-59	8.8%	7.0%	6.3%	13.6%	9.9%	13.8%	14.0%	9.7%	12.8%
60-64	8.3%	5.8%	2.2%	14.4%	6.0%	17.1%	17.2%	16.7%	19.6%
65 and older	2.1%	4.5%	1.5%	9.6%	2.7%	15.7%	16.3%	16.7%	21.3%
Mean	41.4	42.5	40.6	48.2	43.3	51.2	50.9	51.0	51.9
Number of cases	444	245	274	500	568	617	733	740	762

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, 2012, and 2014 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 56 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 4.8. The mean number of years that nurses had been out of the field in 2012 was 6.7 years.

Table 4.8. 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	2012	2014
One year ago or less	11.7%	19.2%	25.5%	13.1%	32.3%	22.1%	26.4%	21.9%	29.1%
2-4 years ago	25.9%	3.6%	25.2%	31.2%	27.8%	27.2%	24.7%	23.3%	27.2%
5-9 years ago	21.4%	27.3%	22.6%	30.8%	18.6%	21.4%	22.0%	17.6%	18.8%
10-14 years	16.9%	13.9%	14.2%	9.8%	11.5%	13.4%	11.4%	10.8%	9.4%
15-24 years	14.6%	6.1%	9.1%	11.2%	8.2%	12.5%	11.9%	10.6%	10.7%
25 or more years	9.5%	2.8%	3.3%	3.9%	1.7%	3.5%	3.7%	5.0%	4.7%
Mean	10.0	6.7	6.7	7.5	5.6	7.4	7.0	7.7	6.7
Number of cases	444	245	274	519	568	617	733	740	762

Note: Columns might not total 100% due to rounding. Data (2006-2012) 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 4.9. Sixty-one percent of California residents who are not working in nursing report that they have at least 15 years of nursing experience. Fourteen percent have fewer than 5 years of experience.

Table 4.9. 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	2012	2014
Less than 5 years	14.9%	10.8%	14.9%	8.0%	14.9%	9.3%	11.4%	13.9%	13.8%
5-9 years	22.5%	26.4%	22.1%	16.4%	20.3%	12.2%	11.5%	13.0%	14.4%
10-14 years	23.9%	23.6%	25.4%	14.7%	20.2%	14.1%	13.2%	12.3%	10.5%
15-24 years	22.8%	24.0%	25.4%	25.4%	26.1%	22.4%	22.0%	20.6%	15.7%
25 or more years	16.0%	15.2%	12.3%	35.5%	18.5%	41.9%	41.9%	40.2%	45.6%
Mean	14.4	14.2	13.3	19.9	15.1	21.6	21.6	20.73	21.9
Number of cases	457	250	276	524	568	689	744	779	866

Note: Columns might not total 100% due to rounding. Data (2006-2012) are weighted to represent all RNs with active licenses.

Volunteering by RNs Not Working in Nursing

Nurses with active licenses who are not working in nursing positions were asked if they are volunteering in an RN or APRN role. As presented in Table 4.10, 15.5 percent of non-working RNs indicated they are volunteering. Volunteering was most common among nurses 45 to 54 years old (19.4%), under 35 years old (19.0%), and 65 years and older (18.9%). Among RNs not employed in nursing but volunteering in nursing, 10 percent reported they were in an internship or unpaid transition-to-practice program.

Table 4.10. Volunteering among registered nurses with actively licenses who are not working, by age group

	Total	Under 35 years	35-44 years	45-54 years	55-64 years	65 years and older
% Volunteering as an RN or APRN	15.5%	19.0%	12.5%	19.4%	9.8%	18.9%

Note: Number of cases=794. Data 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 4.11, the factors most frequently identified as “very important” were family responsibilities (33.5%), non-job-related illness/injury (20.0%), childcare responsibilities (18.2%), stress on the job (16.9%), moving to a different area (15.8%), travel (14.5%), and retirement (14.4%). Between 2012 and 2014, there was an increase in the share who said they are not working because they were laid off (5.9% in 2012 and 11.9% in 2014). There were decreases in the shares reporting that it was difficult to find a nursing position (15.9% in 2012 and 8.4% in 2014) or to find a desired position (20.7% in 2012 and 6.1% in 2014).

Table 4.11. 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, 2010, 2012, & 2014

	Not at all important/ Does not apply			Somewhat important			Important			Very important		
	2010	2012	2014	2010	2012	2014	2010	2012	2014	2010	2012	2014
Retired	60.9%	62.0%	76.7%	4.2%	2.1%	3.9%	11.3%	9.6%	5.0%	23.6%	26.3%	14.4%
Childcare responsibilities	75.4%	78.6%	66.9%	2.7%	2.8%	7.0%	3.8%	3.2%	7.9%	18.1%	15.3%	18.2%
Other family responsibilities	64.2%	67.8%	57.9%	6.1%	8.4%	2.5%	10.0%	6.2%	6.1%	19.7%	17.6%	33.5%
Moving to a different area	88.2%	86.6%	79.4%	1.7%	3.2%	1.5%	3.6%	2.2%	3.4%	6.5%	8.0%	15.8%
Stress on the job	52.1%	59.2%	68.3%	12.2%	8.6%	5.8%	13.8%	11.1%	9.0%	21.9%	21.1%	16.9%
Job-related illness/injury	86.6%	82.9%	83.4%	2.4%	2.7%	3.6%	3.6%	4.4%	4.7%	7.4%	10.0%	8.3%
Non-job-related illness / injury	81.0%	80.9%	61.2%	1.9%	2.7%	8.5%	5.3%	4.1%	10.3%	11.9%	12.4%	20.0%
Salary	71.5%	71.9%	83.1%	8.4%	8.0%	2.3%	11.3%	8.4%	3.7%	8.8%	11.7%	11.0%
Dissatisfied with benefits	81.0%	80.6%	83.5%	7.4%	5.7%	1.9%	5.6%	6.4%	4.4%	6.1%	7.3%	10.2%
Other job dissatisfaction	62.3%	64.7%	73.0%	9.0%	6.8%	8.1%	13.1%	12.9%	9.0%	15.6%	15.6%	9.9%
Dissatisfaction with nursing profession	69.7%	70.6%	81.8%	11.9%	9.9%	5.0%	11.5%	8.0%	7.9%	6.8%	11.5%	5.4%
Travel	84.5%	82.4%	70.1%	5.8%	3.1%	5.5%	5.9%	6.1%	9.9%	3.8%	8.4%	14.5%
Wanted to try another occupation	79.1%	76.5%	74.3%	3.4%	5.1%	9.5%	7.1%	8.0%	8.0%	10.5%	10.4%	8.3%
Inconvenient schedules	71.0%	69.3%	81.8%	9.1%	7.1%	5.7%	9.3%	8.2%	8.4%	10.6%	15.4%	4.2%
Difficult to find a nursing position	77.4%	75.6%	81.8%	3.3%	3.6%	3.9%	5.6%	4.9%	5.9%	13.7%	15.9%	8.4%
Laid off	90.2%	92.0%	73.4%	1.3%	0.2%	7.4%	2.8%	1.9%	7.2%	5.7%	5.9%	11.9%
Difficult to find desired position	*	65.8%	89.2%	*	5.8%	1.4%	*	7.6%	3.3%	*	20.7%	6.1%
Returned to school	*	85.8%	93.5%	*	1.5%	0.6%	*	2.4%	1.3%	*	10.3%	4.6%
Other	83.4%	83.4%	78.6%	0.9%	0.1%	0.0%	5.2%	3.8%	7.9%	10.5%	12.7%	13.5%

Note: 2014 number of cases=836. 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 4.12 examines these responses by the number of years since the nurse last worked in nursing, and by age. For 2012 and 2014, the first column 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, and 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. In 2014, the most important reasons among nurses who last held a nursing position within the past five years were retirement (48.5%), stress on the job (36.1%), other dissatisfaction with job (31.3%), difficulty finding a nursing position (28.9%), and other family responsibilities (25.4%).

The most important reasons for not working in nursing among nurses who have not held a nursing position for more than five years were retirement (35.8%), other family responsibilities (32.2%), childcare responsibilities (28.5%), stress on the job (28.2%), inconvenient schedules in nursing jobs (25.7%), wanting to try a new occupation (23.6%), and other job dissatisfaction (21.1%).

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 four columns of Table 4.12. In 2014, among nurses younger than 55 years, the most important factors for not working in nursing were difficulty finding a desirable nursing position (43.5%),

childcare responsibilities (42.0%), difficulty finding any nursing position (39.9%), other family responsibilities (36.1%), and stress on the job (30.1%). The most important reasons for not working in nursing among nurses 55 years and older were retirement (58.6%), stress on the job (30.3%), other job dissatisfaction (25.5%), and other family responsibilities (20.8%).

Table 4.12. 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, 2012 & 2014

	Years since last worked in nursing				Age of nurse			
	2012		2014		2012		2014	
	5 years or less	More than 5 yrs	5 years or less	More than 5 yrs	Under 55 yrs	55 yrs and older	Under 55 yrs	55 yrs and older
Retired	43.1%	34.5%	48.5%	35.8%	8.0%	52.2%	1.7%	58.6%
Childcare responsibilities	11.2%	26.7%	13.7%	28.5%	36.9%	7.8%	42.0%	7.8%
Other family responsibilities	21.1%	27.0%	25.4%	32.2%	34.0%	17.8%	36.1%	20.8%
Moving to a different area	11.7%	4.1%	14.3%	8.2%	18.6%	5.3%	24.0%	7.5%
Stress on the job	37.7%	29.4%	36.1%	28.2%	35.3%	30.4%	30.1%	30.3%
Job-related illness/injury	16.6%	11.9%	17.5%	13.8%	17.3%	12.8%	13.9%	15.0%
Non-job-related illness/injury	19.6%	14.2%	16.3%	15.7%	21.9%	13.3%	9.7%	17.0%
Salary	22.8%	18.1%	19.1%	18.5%	26.0%	16.6%	27.5%	14.5%
Dissatisfied with benefits	14.0%	13.2%	13.7%	13.2%	17.0%	11.8%	18.5%	10.6%
Other dissatisfaction with your job	33.7%	22.9%	31.3%	21.1%	28.9%	28.3%	22.1%	25.5%
Dissatisfaction with the nursing profession	23.3%	17.6%	20.4%	15.0%	22.6%	17.6%	13.7%	17.5%
Travel	14.0%	12.2%	16.2%	9.1%	18.3%	12.3%	11.7%	13.0%
Wanted to try another occupation	14.0%	22.4%	10.5%	23.6%	23.1%	15.6%	14.5%	14.2%
Inconvenient schedules in nursing jobs	21.2%	28.5%	18.0%	25.7%	29.3%	20.3%	24.2%	16.6%
Difficult to find a nursing position	22.5%	5.9%	17.8%	7.6%	35.5%	12.2%	39.9%	9.3%
Laid off	13.9%	1.3%	8.7%	3.3%	7.0%	8.2%	4.1%	6.8%
Difficult to find desired nursing position	31.5%	17.0%	28.9%	15.7%	40.6%	21.2%	43.5%	17.4%
Returned to school	12.0%	10.1%	6.8%	11.1%	23.1%	6.6%	4.1%	6.8%
Other	16.2%	17.5%	22.9%	19.9%	21.9%	13.5%	21.4%	21.4%
Number of cases	682	682	750	750	746	746	836	836

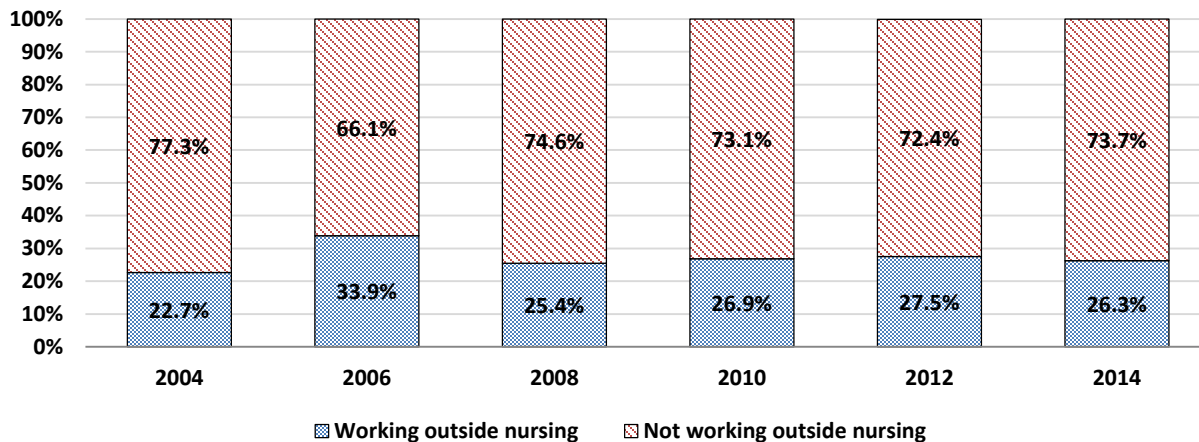
Note: Items that were omitted by respondents who answered at least one of these items were assumed not to apply. Data are weighted to represent all RNs with active licenses.

Employment Status of Nurses Not Working in Nursing

Some nurses who are not employed in nursing positions are employed outside nursing. Figure 4.8 presents the non-nursing employment status of RNs residing in California who do not work in nursing. In 2014, 26.3 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 4.9 refines these data by focusing on RNs who

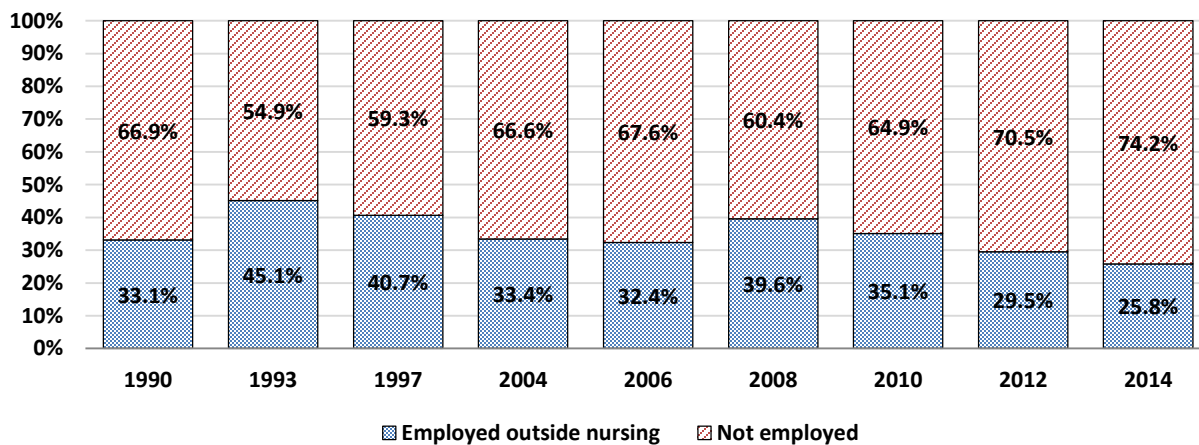
reported that they were not working in nursing but were not retired. Of these RNs, 25.8 percent of non-retired RNs not working in nursing were employed outside of nursing in 2014. This rate is lower than that observed any year this survey has been conducted.

Figure 4.8. Current employment status of registered nurses whose California licenses are active and who live in California, but who are not currently working as RNs, 2004-2014



Note: Data (2006-2014) are weighted to represent all RNs with active licenses.

Figure 4.9. 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: (2006-2014) are weighted to represent all RNs with active licenses.

Table 4.13 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 was the highest ever reported. The average number of hours worked per week decreased by 2014 to 35.1 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.

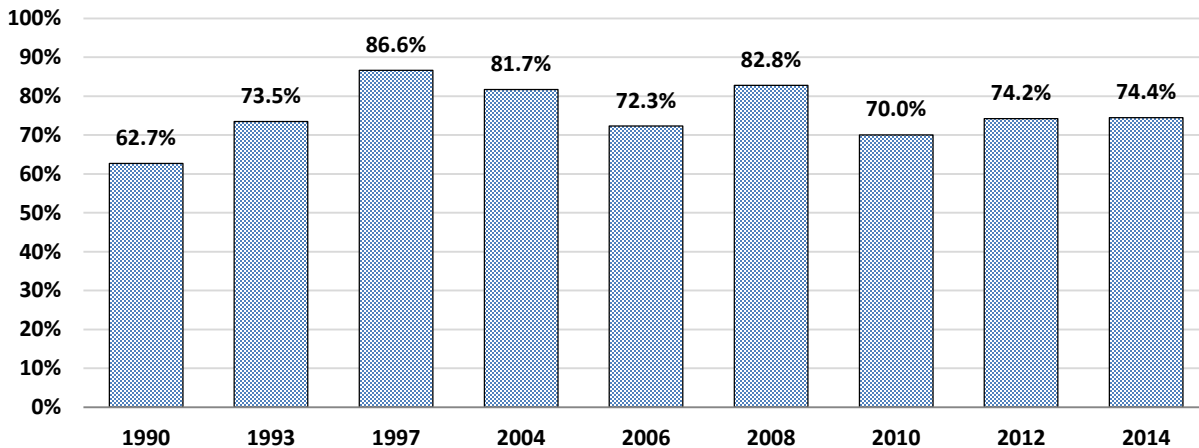
Table 4.13. Number of hours per week nurses work outside the nursing profession, for RNs with active licenses residing in California, by survey year

	1990	1997	2004	2006	2008	2010	2012	2014
8 hours or less	6.0%	4.5%	2.6%	4.2%	1.8%	7.3%	5.4%	9.3%
9-16 hours	6.6%	6.3%	12.3%	14.4%	8.5%	10.5%	11.7%	12.7%
17-24 hours	11.3%	12.5%	14.9%	15.3%	9.5%	11.6%	15.4%	11.4%
25-32 hours	8.6%	13.4%	8.8%	14.4%	17.0%	8.7%	5.4%	10.1%
33-40 hours	43.0%	35.7%	37.7%	37.5%	36.2%	32.2%	40.1%	34.0%
41-48 hours	8.6%	8.9%	9.7%	4.0%	9.5%	6.3%	1.7%	4.0%
More than 48 hours	15.9%	18.8%	14.0%	10.2%	17.8%	23.4%	20.3%	18.6%
Mean	35.8	36.0	34.7	33.6	35.8	40.7	39.3	35.1
Number of cases	151	112	114	200	156	198	173	170

Note: This question was not asked in 1993. Columns might not total 100% due to rounding. Data (2006-2012) 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 4.10, 74.4 percent of California residents said their non-nursing job used their nursing knowledge.

Figure 4.10. Utilization of nursing knowledge in non-nursing jobs, for nurses with active California licenses residing in California, by survey year



Note: 2014 number of cases=202. Data (2006-2014) are weighted to represent all RNs with active licenses.

As shown in Table 4.14, most non-nursing jobs held by RNs not employed in nursing were in health services (44.8%), as was true among RNs working in nursing. For RNs not working in nursing, other common areas of employment reported include “other” (23.3%) and retail sales (22.2%).

Table 4.14. Field outside of nursing as reported by RNs not working in nursing and residing in California who have a position outside of nursing, 2012-2014

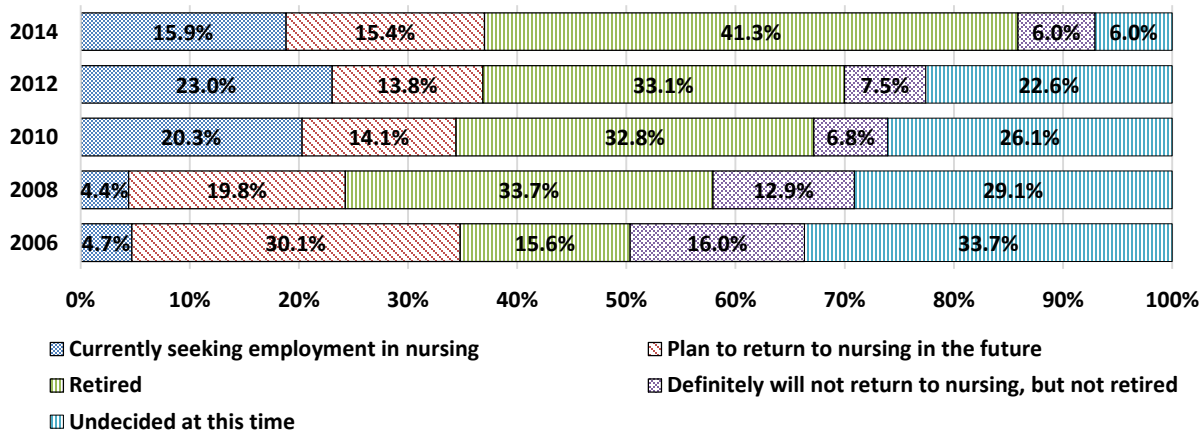
	2012	2014
Health Services	54.7%	44.8%
Retail sales	8.6%	22.2%
Education	11.9%	13.7%
Financial Services	7.7%	12.4%
Consulting	4.4%	4.6%
Other	24.4%	23.3%
Number of cases	207	108

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 4.11. About 31 percent said they plan to return to nursing or are currently seeking employment. Forty-one percent either were retired, and 6 percent say they would definitely not return to nursing. About 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 similar in 2014 than it was in 2012, and the share that was retired has increased since 2006. The proportion of RNs not working in the profession that is currently seeking employment in nursing is almost six times the proportion it was in 2006 and 2008.

Figure 4.11. Future plans of California nurses with active licenses not working in the profession, for California residents, 2006-2014



Note: 2012 number of cases=808. Data are weighted to represent all RNs with active licenses.

Table 4.15 examines the plans of nurses who were not working in nursing by survey year and age. In 2014, over sixty percent of non-working California RNs under 35 years of age were seeking nursing work, and nearly 29 percent more were planning to return to nursing in the future. The share of nurses seeking nursing work increased across nearly all age groups between 2008 and 2012, and then dropped slightly between 2012 and 2014, reflecting the effects of the recession and economic recovery.

Table 4.15. 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%
2012 (n=446)	Definitely will not return	8.8%	0.0%	5.3%	7.5%	13.6%	34.9%	11.6%
	May return	29.6%	9.9%	25.5%	38.5%	59.2%	31.6%	46.9%
	Currently seeking work	38.0%	70.2%	35.5%	31.1%	14.6%	15.5%	25.1%
	Plan to return	23.6%	19.9%	33.7%	22.9%	12.6%	18.0%	16.4%
2014 (n=427)	Definitely will not return	7.7%	0.0%	4.9%	14.1%	9.5%	13.7%	20.2%
	May return	29.9%	13.2%	21.6%	28.2%	61.8%	57.7%	48.0%
	Currently seeking work	33.8%	60.5%	32.3%	30.8%	13.7%	13.6%	4.4%
	Plan to return	28.6%	26.3%	41.2%	26.9%	15.0%	15.1%	27.4%

Note: Columns might not total 100% due to rounding. Data (2006-2012) are weighted to represent all RNs with active licenses..

Table 4.16 presents the time frame in which nurses who say they plan to return to nursing expect to do so. About 41 percent say they expect to return to nursing within the year. Another 37 percent plan to return in one to two years. Nearly nine percent plan to return in five or more years.

Table 4.16. 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, 2004-2014

	2004	2006	2008	2010	2012	2014
Less than one year	28.0%	39.9%	36.7%	40.4%	49.4%	41.0%
1 to 2 years	24.6%	28.3%	33.9%	34.7%	37.1%	37.2%
2 to 3 years	14.3%	*	*	*	*	*
3 to 4 years	7.4%	14.3%	18.8%	18.1%	4.2%	13.0%
4 to 5 years	5.1%	*	*	*	*	*
5 or more years	20.6%	17.5%	10.5%	6.8%	9.3%	8.8%
Number of cases	175	99	103	87	86	102

*Data not available

Note: Columns might not total 100% due to rounding. Data (2006-2012) 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 4.17 summarizes their responses. The factors most often rated as very important were availability of re-entry programs and mentoring (54.3%), flexible work hours (47.0%), better nurse-to-patient ratios (40.8%), and better support from nursing management (40.0%).

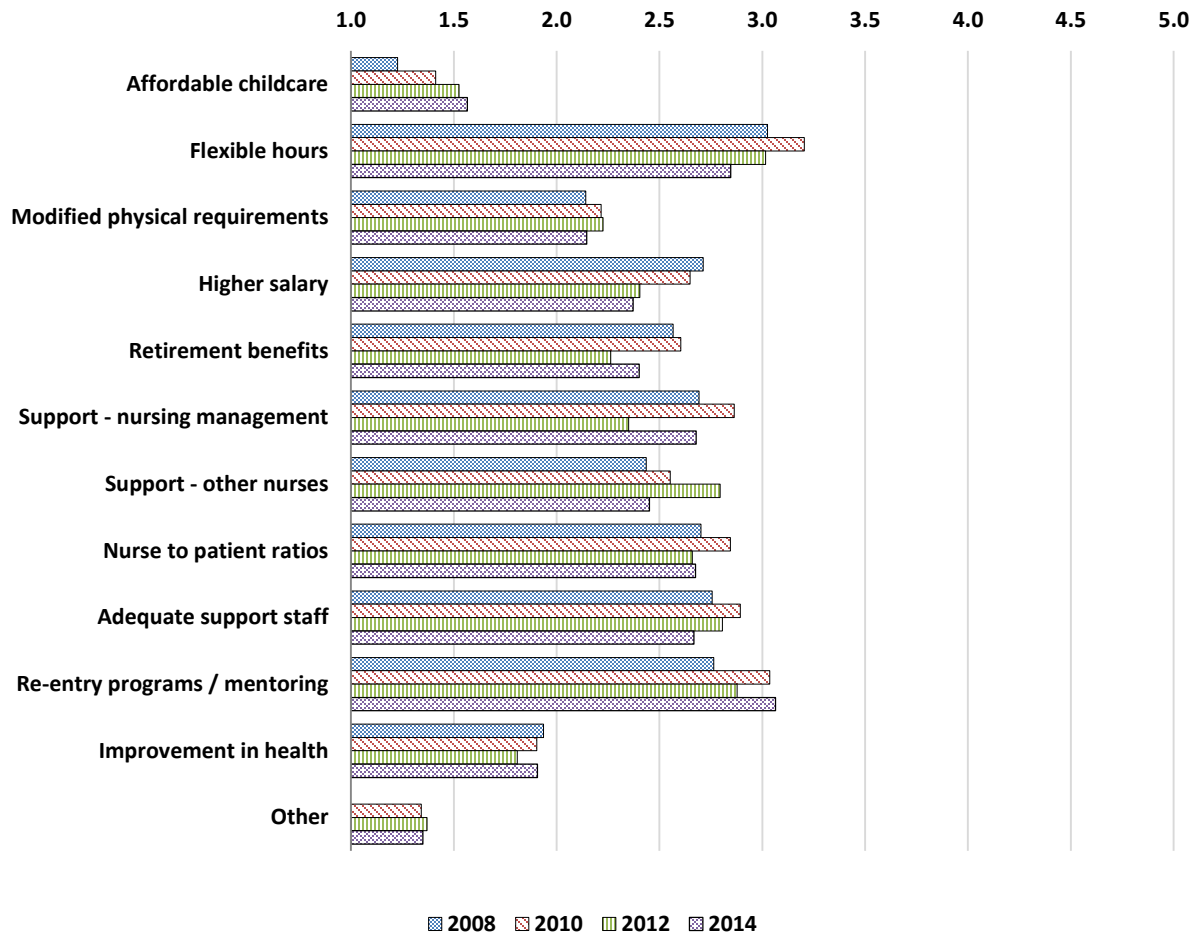
Table 4.17. Importance of factors in the decision to return to nursing for RNs who live in California, have active licenses, but are not working in nursing and are undecided about their future plans, 2014

	Not at all important/Does not apply	Somewhat important	Important	Very Important
Affordable childcare at or near work	71.4%	11.8%	5.5%	11.3%
Flexible work hours	25.0%	12.3%	15.7%	47.0%
Modified physical requirements of job	52.5%	7.2%	13.4%	26.9%
Higher nursing salary	38.8%	14.5%	17.7%	29.1%
Better retirement benefits	40.4%	10.3%	18.1%	31.3%
Better health care benefits	38.8%	9.2%	22.4%	29.6%
Better support from nursing management	34.3%	3.6%	22.1%	40.0%
More support from other nurses	37.2%	6.8%	29.7%	26.3%
Better nurse to patient ratios	32.8%	7.6%	18.8%	40.8%
Adequate support staff for non-nursing tasks	31.8%	4.5%	29.0%	34.7%
Availability of re-entry programs/mentoring	19.5%	8.9%	17.3%	54.3%
Improvement in my health status	64.0%	3.4%	10.7%	22.0%

Note: Number of cases=169. Rows might not total 100% due to rounding. Data are weighted to represent all RNs with active licenses.

Figure 4.12 summarizes the factors from 2008 through 2014 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. Between 2008 and 2014, the availability of re-entry programs/mentoring and the affordability of childcare have become more important factors in the decision to return to nursing, while flexible hours, higher salary, and retirement benefits have become less important.

Figure 4.12. Importance of factors in encouraging RNs with active licenses who live in California but are not working in nursing to return to nursing, 2006-2014



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 4.18 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 affordable childcare near work, retirement benefits, health care benefits, support from nursing management, better nurse-to-patient ratios, adequate support staff for non-nursing tasks, and improvement in health status as more important than did nurses out of work for more than five years.

Table 4.18. 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, 2014

	Years since last worked in nursing	
	5 years or less	More than 5 years
Affordable childcare at or near work	1.8	1.4
Flexible work hours	2.6	3.1
Modified physical requirements of job	2.2	2.2
Higher nursing salary	2.4	2.4
Better retirement benefits	2.5	2.3
Better health care benefits	2.6	2.3
Better support from nursing management	2.9	2.6
More support from other nurses	2.5	2.5
Better nurse to patient ratios	2.9	2.6
Adequate support staff for non-nursing tasks	2.9	2.7
Availability of re-entry programs/mentoring	2.9	3.2
Improvement in my health status	2.1	1.8

Note: Number of cases=159. 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.”

All nurses who responded to the 2012 and 2014 surveys were asked about their satisfaction with the nursing profession as a whole. Table 4.19 compares the satisfaction of RNs who were employed in nursing with those who were not employed in nursing. Unsurprisingly, nurses who were not employed in nursing were less satisfied with the nursing profession overall than were RNs who were working in the profession. Nearly 13 percent of nurses not employed in nursing reported that they are dissatisfied or very dissatisfied with the profession.

Table 4.19. Satisfaction with nursing profession of registered nurses residing in California, by employment in the nursing profession, 2012 & 2014

	2012		2014	
	Employed in nursing	Not employed in nursing	Employed in nursing	Not employed in nursing
Very satisfied	38.1%	27.8%	42.1%	30.9%
Satisfied	47.1%	35.7%	43.9%	39.2%
Neither satisfied nor dissatisfied	6.6%	21.9%	5.8%	15.7%
Dissatisfied	5.3%	10.9%	3.7%	9.1%
Very dissatisfied	2.9%	3.7%	3.6%	3.4%

Note: 2014 number of cases=5,047. Data are weighted to represent all RNs with active licenses.

Chapter 5. Thematic Analysis of Nurses' Comments

Introduction

All respondents, to both the online and mailed survey, were invited to offer “additional thoughts or ideas about the nursing profession in California” in the comment area of the survey. 1,129 respondents entered text into the comment area, representing approximately 20 percent of the total survey responses. Slightly more than 47 percent of all survey respondents offered contact information so that they can be notified when this report is available.

The survey respondents who entered narrative comments are slightly older than those who did not comment, have been practicing nursing a little longer, and were less likely to be ethnic minorities (Table 5.1).

Table 5.1 Characteristics of respondents who commented and all survey respondents

	Respondents who Commented	All Survey Respondents
Years in nursing (years)	21.4	18.1
Age (years)	53.8	50
Ethnicity (% White)	69.4%	61.5%

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

Online respondents were less likely to leave narrative comments than were hard-copy respondents (15 percent versus 22 percent) (Table 5.2). The online narrative respondent's characteristics more closely mirrored the larger population in terms of age and experience.

Table 5.2 Characteristics of online narrative respondents versus hard-copy narrative respondents

	Hard-Copy Respondents	Online Respondents
Years in nursing (yrs)	22.1	17.6
Age (yrs)	54.7	49.5
Ethnicity (% White)	70.6%	63.7%

Note: Number of total hard copy and online respondent cases=1,129. Data in table is not weighted.

The comments made by 20 percent of the sample respondents may not necessarily reflect the opinions of the whole sample of surveyed RNs, much less the whole of the California nursing workforce. Nonetheless, the fact that the expressed issues, opinions and concerns are shared by a considerable number of respondents, and that many of the same issues have been mentioned in survey's narrative responses for the last 10 years, suggests that these are very real concerns and issues in the nursing workforce.

Not all respondents' comments were included in this thematic analysis; some respondents merely wanted to express their thanks for having the opportunity to participate while others used the comment space to further clarify responses earlier in the survey, and several offered criticism or suggestions to improve the survey in the future. The majority of the comments concerned the practice of nursing in the hospital setting, although there were comments from nursing faculty, school nurses, a number of nurses in long-term care facilities, and some nurses in primary care settings.

This analysis utilizes five themes consistently identified in the past four 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 2014 survey comments were very similar to past surveys. The overall push for efficiency in the workplace and simultaneous digitization and collection of workplace data poses significant challenges to a profession built around “touch.” 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 2014 Survey of RNs was the changing culture of nursing. Broadly, these comments reflect (1) pride in and appreciation of nursing, and (2) how the changing health care environment is changing the profession.

Pride in the Nursing Profession

Pride in the nursing profession was the most common theme among narrative responses. Many of the critical comments reflected frustration and disappointment that the practice of nursing does not meet its own high standards. Commenters' frustration with how the ideals of nursing fare in a tightly scheduled, understaffed workplace is obvious. Some respondents were unequivocal in their pride and satisfaction with their nursing career:

I have loved being a RN and am very proud of the profession and the new group of younger nurses entering it. Semi-retired now but just not ready to stop. Love my job, love my employer & co-workers. Life is great.

It has been a wonderful career. After 32 years as an RN I plan to retire in 2 more years. I have had great opportunities and experiences. I have felt supported in my work and have always had good job security. Despite no advanced degrees other than a BSN I have been able to move into administration. I have an excellent salary, excellent benefits and will have an excellent pension. Every day at work has been valuable and important. I could not recommend it more highly.

However, there were almost a dozen respondents who let us know they would not recommend nursing as a career.

Not the job I signed up for; I would never encourage someone to enter nursing at this point. In no other career have I been so unhealthy (back and neck pain constantly, fatigue, GI issues, etc) Nor have I had to endure such verbal abuse, physical assault and threats (have been bitten, slapped, etc). Constant addition of responsibilities given to RN's while reducing ancillary staff, for no increase in pay. This business is exactly that-a business. Less about healthcare and more about profit, bottom lines and upper mgmt. bonuses. 2 thumbs down!

I enjoyed my nursing career in critical care then surgery. I would not encourage my daughter to become a nurse. If interested in medical science to get advanced degrees. I do not feel nurses are treated very well. Personally as employees. At least in a hospital setting.

I have always encouraged young women/girls to become nurses- I don't know if I would do that now.

State of Nursing Today

While many respondents noted that they loved nursing or their nursing career, many expressed concern about perceived changes in nursing practice and how these changes might affect the future of the profession. Negative changes in the nursing profession were linked with increased documentation requirements and correspondingly less time at the bedside; heavy workloads; inadequate nursing education; and facilities where cost-cutting and efficiency are a priority – all resulting in less than the highest quality of care. The topic of new nursing graduates was the third most mentioned issue in 2014 comments. The comments about new graduates were primarily concerning (1) the poor preparation of new graduates to assume clinical work, (2) a less-than professional attitude among newer graduates; or (3) warnings about the difficulties that new graduates face

finding a nursing position in their area and how that could threaten a constant supply of experienced RNs in the state.

Comments in 2014 note an attitude change among newer nurses for whom nursing seems to be less a “calling” and more a smart occupational choice. Some nurses perceive this as a “bad attitude” among new graduates, and concerns about this have been a consistent theme in the survey comments since 2008. Respondents perceive the attitude of new graduates as undermining professionalism and the quality of patient care, and also as challenging the view of nursing as a calling that motivated so many to enter the nursing profession.

Loved the work, but I have seen those who only see it as a job and not a passion in life. It saddens me to see this because the pt. is unable to receive the best care. Thankfully this is not too often the case. I wish these people could be weeded out of nursing programs...

The state of California is losing a great nurse who got into the profession to care for others and not for the financial benefits of nursing, which is why a majority of people become nurses these days as evidenced by the lack of caring and compassion that is shown by current nurses in hospital settings. Very sad indeed.

I feel that the nursing profession is truly an amazing field. However, I also feel that California is heavily numbered with nurses that really should not be in the field. Nursing, in my opinion, requires care and compassion. A good number of nurses have lost that somewhere.

California has had success in increasing nurse training capacity in the state, and some of those who commented discussed whether the state still has a shortage of nurses. Commenters raised the question of why new graduates and older returning nurses report difficulty finding employment, and observe that this belies the notion that there is a shortage of nurses in the state. Many new nursing graduates have had to accept positions that are not in their desired field, facility type, or geographic location. For some new nursing graduates, delay in getting into the clinical setting can affect the trajectory of their nursing career and/or force them to invest in refresher training.

Help new grads get jobs! New Grad opportunities are rare in Calif and hopefully this will change when many of us old RNs retire

Could not find a nursing job in California as a new graduate. Am planning a move to North Dakota, but will continue to hold a California active RN license as I do plan on coming back. Wish that there were more jobs for new graduate nurses that did not require a certain GPA. Some people may not be as good at taking test but really good at practical applications.

It was disappointing to work for a company 21 years; get my RN license (I went from LVN to RN) & that employer would not hire me as RN because I “had no experience as RN” and that none of my LVN years counted as experience. It took me 2 years to get a RN job! I hear many new RN grads had similar issues.

Beginning 2008 at the start of the economic down-turn, many healthcare agencies laid nursing staff off and have not replaced them. Large numbers of qualified nurses have not experienced success in locating careers/positions of the same caliber since that time. The same nursing shortage exist today. With the number of qualified nurses available to enter/re-enter the work force, why is there currently a nurse shortage. Is there currently a nursing shortage or are healthcare corporations using this misfortune as a way to save profit?

However, the majority of critical narrative responses in 2014 reflect the frustration of nurses not being able to provide the highest quality care to patients due to circumstances beyond their control. Two workplace

trends frequently mentioned as obstacles to quality patient care were 1) increased documentation requirements taking time away from direct patient care, and 2) cost-cutting that leaves units understaffed, over-worked, and stressed.

In the 19 years I have been a nurse, I have experienced a change in bedside nursing. I feel as though there is more focus on saving or making money for the employer. Also, more requirements for nurses to meet all the “new” policies or JCAHO requirements, and it takes away for focused patient care, and less time we spend on patient education and giving quality nursing care.

I am very disenchanted with the current California health care system. I’ve observed a continuous decline in clinician & patient freedom to choose, guide & participate in health care plans & treatments. It is profit driven health care organizations & health insurance corporations dictating current conditions/restrictions of health care services...and they have embraced & exploited the recent economic down turn to justify inadequate & unsafe health care conditions for both health care workers and their clients alike.

As a nurse, I prided myself in the collaborative efforts of the care team; physicians, technicians, etc. We were a cohesive, happy group. Now MDs are stressed, the nurses are removed from the patients; it is no longer a team. MDs agree. Time is spent on electronic charting which no one reads as a tool of communication. An MD recently told me “it’s just for some lawyer somewhere.” As an older nurse, I realize my thinking is outdated but as a committed, idealistic, nurse I loved what I did. Today, I would probably choose another profession. Guess this is “progress”. Health care won’t return to the “old way” no matter what I think. But, thanks for asking!

I have concerns about the future of nursing in California and the United States in general. I feel more and more nursing time is being consumed by EHR, and data collecting. I feel that the nursing profession is being driven by a corporate culture and mentality that values productivity and data rather than patient care and compassion.

Commenters were concerned that today’s situation – stressed nurses working harder to keep up with their workload while employers won’t hire new nursing graduates or invest in their clinical training – portends a shortage of experienced nurses as more nurses move closer to retirement. Some commenters observed that many older nurses, who may no longer be physically able to deliver nursing in a hospital setting, might be able to provide valuable mentoring to new nursing employees.

Where are the new nurses?... mass retirement looming! Who will take care of me!

The situation in California for new grads who were licensed between 2008-2014 is bad. These nurses who do not connect with paid RN jobs & who are not brought into the profession through meaningful training & retention programs will leave nursing.

In 5 years when a higher % of the current RN workforce retires and the new grads are not work ready...it is going to be bad. The nursing profession can change this disaster, if it starts now....

I know a lot of newly graduated RNs who cannot find employment. I hope something is being done to keep these people interested in nursing for when the baby boomers retire. The US and California should stop importing RNs from other countries since there are so many RNs looking for work.

I am very interested in how to utilize to “new” retired nurses who will be coming out of the workplace soon, as our mean RN age is around 58 yr age! We need a continuous pipeline of nurses in a variety of roles and need to include volunteer nursing in the continuum. I would be available for discussion and further explanation of alternative possibilities for nurses entering retirement.

The mean satisfaction ratings given by all active nurses were all relatively high (Chapter 3, Figure 3.12). Active nurses scored their “job overall” with a 4.1 rating, “nursing profession overall” with 4.2, “quality of patient care” with 4.0, and “work is meaningful” with a 4.1, 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, or may represent job-specific complaints rather than an overall assessment of the state of the profession.

Theme 2: Work Relationships

Some respondents felt that there was a general lack of respect for and appreciation of nursing skills and responsibilities. In the 2014 survey, this 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, whereas the 2004-2008 surveys’ comments tended to cite physician relations as the most stressful. While comments about nurses “eating their young” still appeared among narrative responses, there were relatively few comments about “mean” nurses, and respondents gave high ratings to relations among nurses. Relationships with patients were a high point of job satisfaction—a factor that is reflected in survey ratings (4.3) and most narrative responses. The importance of providing patient-centered care, which reflects a central tenet of the culture of nursing, was repeated throughout the narrative comments.

Relationships with Patients

The 2014 RN respondents rated interactions with patients (4.3) as the highest area of satisfaction. At the heart of this relationship, comments make clear, is the nurse’s compassion and commitment to the highest quality care.

Being a CA registered nurse is a responsibility of care to patient, a care with love and compassion.

A few respondents commented on a changing patient population with higher acuity levels and less respect for health care professionals. Some comments saw this lack of respect from patients and their families, in part, as a product of employers’ adoption of a customer service orientation.

The day the patient became a customer was the day I checked out of nursing. There, I said it and it felt good!

During my full-time work as a nurse before retiring I found...some people treat nurses like maids, pill dispensers & while some of it may be they are ill-much of it is the fact the state encourages them to feel & think that they can say & do anything to nurses so nurses become verbal punching bags.

The ‘patient is always right’ mentality to improve patient satisfaction scores is not always best.

I feel that the demand on RN’s is very high and that often treating the patient like a “customer” is what is expected as well as “speedy care”. I feel that quality of care can sometimes take a back seat to “appeasing the customer” and give them what they want instead of allowing the physicians and nurses to use their educations to determine the quality of care.

Relationships with Physicians

There were few comments regarding relations with physicians in the 2014 survey; in prior surveys a higher share of comments discussed this topic.

Physician—lack of camaraderie or respect! Changed to a hospitalist system where dr's are assigned too many patients and often don't know the pt and often are inexperienced to handle the intensive care pt.

We chart same info several times for convenience of physicians &/or auditing

Relations with Management and Employers

In general, critical comments in 2014 saw employers' mandate for cost-cutting as one of the major obstacles to providing high quality patient-centered care. The resulting understaffed units and heavy workloads were seen as both obstacles to optimal care as well as threats to patient safety. Many commenters did not feel their managers were doing a reliable job of mediating between the administration and the requirements for providing optimal care.

Administration positions should be filled with those who have experience and not just a degree.

I see a change in healthcare as healthcare becomes a business rather than a service. The fact that hospital administrators are no longer medically trained has resulted in a continuing slide from safety + quality medical outcomes to profit + increased profit. I see nurses + ancillary staff + patients treated as objects + systems that can be pushed within certain parameters toward failure. Good medical care is not a goal for business personnel.

In my years as a nurse, I have had the opportunity to work with great nurses & physicians; but only 2 great supervisors/administrators. It seems that most become indoctrinated by the "higher ups" & lose site of the dedication & day to day stress & strain on the bottom of the ladder.

I take a lot of pride of being a Registered Nurse; however, I am disappointed in nursing administration and/or management for poor mentor placement for either new registered nurses and/or new employees.

We need better oversight of nursing executives & nursing management. It seems that nursing management is frequently "out of touch" with the needs of the nursing staff that are actually the ones responsible for a well-functioning facility. I am in favor of the "magnet" concept-as described by the ANA.

These comments are consistent with some of the lower rated areas of satisfaction identified by working nurses in the 2014 RN Survey Report (Chapter 3, Figure 3.12): involvement in policy and management decisions (3.1), non-nursing tasks required (3.3), leadership from nursing administration (3.5), and recognition for a job well done (3.5).

Relations among Nurses

A few narrative responses in the 2014 survey mentioned a lack of support among fellow nurses. Critical comments regarding relations among nurses are not reflected in the 4.1 satisfaction score for "support from other nurses" as well as the 4.1 score for "teamwork between coworkers" identified in the 2014 RN Survey Report (Chapter 3, Figure 3.12).

As in past surveys, some comments in the 2014 survey were critical of foreign nurses in the workplace. These comments tended to focus on the issues posed by different languages being spoken and how communications among the team are affected. That foreign nurses are still being hired when there are many California-trained nurses seeking employment was also mentioned.

Mandatory English proficiency as a requirement to practice as an RN in CA should be regulated more closely.

Most foreign trained/educated RN's (those who even pass) must take board several times. When they enter the work field most are incompetent in the higher tech & our cultural environments of our institutions. American educated RN's (regardless of their entry level) fare better overall than most "3-year BSN" graduates from foreign programs. Most foreign BSN's are not equivalent to US BSN's.

Some of the 2014 narrative responses, like 2008-2012 surveys, remarked on the "attitude" of new nursing graduates coming into the workplace.

What I have seen in past yrs with new nurses is a sense of entitlement, when you hear them saying "I am not working nights" makes you wonder why they pursued the career. Discouraging to work w/ them. 0 sense of responsibilities/critical thinking skills. Find most un-inspired & truthfully lazy. Disconnected to old fashioned nursing care. Not sure computers have not added to the disconnection, glad retirement is close.

Some respondents reported bullying behaviors from colleagues and supervisors that caused them considerable stress.

Hospital nursing is not a nice profession. the pt interaction and care keeps me going but the back stabbing, gossip, bullying and lack of care by so much of the staff is discouraging. Seems like many new nurses become nurses for other than the caring aspect of nursing and more for the money.

Relations among nurses may have been impacted by the recession, as exemplified by some respondents expressing hostility towards nurses of other cultures and generations for "taking" jobs they thought better suited to others.

Nurses are TERRIBLE to other nurses. No matter what job I've held I've been the victim of backstabbing, sabotage, hazing, and terrible attitudes. I just want to take care of patients, but the barrier to that is my coworkers!

Theme 3: Job-related concerns

As in the 2010 and 2012 surveys, comments in 2014 expressed concern about the lack of adequate job opportunities, especially for new graduates and returning nurses. Comments mentioned employer requirements that make it difficult both for new graduates and for returning nurses to find a position. This was mentioned by new graduates, returning nurses, and experienced, employed nurses as a concern for nursing's future.

Very troubling to see young people encouraged to go into nursing, only to emerge from good schools with excellent grades and be unable or have great difficulty in finding a position.

Graduating in late 2009, I found it extremely difficult to find a hospital new grad position. I am now stable working for the state as a correctional RN but find it very difficult to advance my skills or to obtain a hospital job.

For employed RNs, the main issues in the workplace that were mentioned included (1) increased 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 increasing amount of time required for charting and documentation, resulting in time lost for patient care, was the most frequent complaint about the workplace.

Paperwork and Documentation

The increasing amount of documentation required of nurses was the subject of a great number of critical job-related comments and was included in 15% of comments overall. Many respondents reported that paperwork and charting detracted from patient care. The amount of paperwork required received the lowest satisfaction rating, 3.2, on a 5.0 scale, in the 2014 RN Survey (Chapter 3, Figure 3.12). Many respondents were especially critical of their electronic documentation systems with a few commenters expressing particular frustration that their EHR required entering some data more than once into the system.

I feel the computer charting takes away from the patient. If we fill in all the holes we could just sit at the computer and not see the patient. We are audited on our charting, a machine audits our turning the pt, but it doesn't tell if the patient is incontinent, combative, or won't stay in the turn position, but if we check the box it doesn't matter.

There seems to be a shift from actual pt. care hours to more hours charting in the EMAR. There are too many loop-holes and double charting that occur. I'm a new nurse-but I've worked in the same dept for 12 years-so even though the roll is new-EMAR is not.

Over the years our profession has gone through many changes. One is electronic charting-There are so many pros being computerized=pt safety with passing meds, instant ordering to various departments, multidiscipline access to name a few. The one downside for myself and coworkers is the amount of charting we RNs are responsible for. I feel we have turned into "Computer Nurses" instead of "Bedside Nurses". We now pull our computers into the patient rooms or doorways to chart. This is so our patients will not only see us, but also be able to talk with us while we stare at a computer inputting information.

Staffing and Workload

Understaffing and heavy workload were among the most commonly identified complaints among respondents. The satisfaction rating with workload in the 2014 RN Survey was 3.4 on a 5-point scale (Chapter 3, Figure 3.12), indicating that survey respondents have a slightly satisfied view of their workload. In many comments the heavy workload was considered evidence that the management does not understand the challenges of nursing in a hospital. Nurses pointed out the potential impact of understaffing on patient care as well as their own health and safety.

The work load on RNs is too much. With the economy going under a few years back it decreased patients in hospitals which decreased hours & jobs which lead to more responsibility on RN's with less staff. I have been actually considering getting out of nursing all together. I used to love my job.

California's mandatory staffing ratios were generally praised, and many noted that staffing ratios had made their jobs more manageable.

I respect, and appreciate that state has nurse to patient ratio to allow the opportunity for better quality of care.

Please keep/enforce the nurse:patient ratios.

Nurse to patient staff ratios are very important for safety and security of our patients/families.

I have worked in a few other states at the start of my career and California has been my favorite place so far, mainly related to the safe patient ratio law.

Some commenters felt their employers were using staffing ratios as an excuse to eliminate ancillary staff, putting more work on the RN. Still others noted that the ratios did not take into account patient acuity and needed to be adjusted accordingly. A number of comments indicated that the ratio law was not being properly enforced at their hospital, or that it should be expanded to address other types of workplaces like schools and skilled nursing facilities.

The limit of the number of patients a nurse can take care of-nurse/patient ratio has helped. However, the amount of documentation and requirements placed on nurses combined with the increase in patient acuity within the last few years has made it difficult to deliver quality of care. Assignments and staffing are based strictly on numbers and not patient acuity.

I feel there should be a mandatory patient ratio for CNA's of 8:1. Any more than that and patient care suffers. Also, the state needs to come up with a uniform, mandated method for acuity determination and patient assignment related to that acuity. Most hospitals do not have a clearly defined system.

Scheduling

While long shifts and inflexible scheduling were common complaints and cited as reasons for leaving the hospital environment or even the nursing profession altogether, the wide range of scheduling configurations available to nurses has also benefited many nurses raising families or attending school. Working through breaks or lunch came up frequently in connection with the issue of understaffing. The satisfaction rating for work schedule as discussed in the 2014 RN Survey was 4.0 on a 5-point scale (Chapter 3, Figure 3.12), indicating that survey respondents are generally satisfied with their work schedule.

Many younger women who have young families would love to work part-time, but our hospital only has full-time positions posted. I think that nurses with young families would be happier if they could work less days & spend balanced time at home. Happy home=happy workplace!

Nursing is the most flexible profession ever!

Many of my co-workers work a couple double shifts more than two times a week. We are frequently understaffed and more often than not, nurses are missing their breaks and meals. It is very frustrating and tiring to be working under those conditions.

Although one respondent felt 12 hour shifts improved continuity of care and allowed nurses more contiguous downtime during the week to recuperate, there were many complaints about 12 hour shifts.

Also, I believe that 12 hr shifts are dangerous & should be eliminated. More mistakes are made with tired nurses.

A new topic in the 2014 comments was identified as “call-offs.” A handful of commenters noted their employer policy that allowed nurse’s shifts to be cancelled if the unit/hospital census was low, sometimes with only a few hours’ notice. Comments indicated variations in how these call-offs are being implemented, with some nurses getting some minimal compensation for their lost time or being able to treat the time as on-call compensation.

Our hospital has frequent low patient census requiring frequent “call-offs”. This means our full-time job (36 hrs/wk) is more like 24 hrs/wk. We spend our PTO/VAC time to make up for time called off.

One issue in the nursing profession which I find incredibly disrespectful and demeaning is how canceling regularly scheduled nurses' shifts when the census is low is an accepted practice. It is shameful that at most hospitals nurses cannot rely on a predictable and steady income. It is particularly insulting that the cancellation occurs up to two hours before the start of a shift.

Quality of Care

Quality of care, and patient safety, were cited as the primary mandate of nursing. Heavy workloads, lack of sufficient support staff, and increased documentation requirements were cited as the main obstacles to delivering quality care. The inadequate skill level of new nursing graduates, and resulting potential for workplace errors, was also mentioned as a concern by several respondents.

An increasing number of RN's are working for a paycheck and do the minimum at work. I enjoyed bedside care, and enjoyed my patients. Weary now of the errors that occur due to poor hand-off. Many RN's don't understand labs, meds, and disease process. Do not pay attention to comorbidities-And are STILL unwilling to call physicians or administrators on off shifts and weekends.

Electronic records/charting pose a serious threat to patient care in the hospital. Gone are the days of holding a hand to comfort. With the demand to "prove" care given for reimbursement, patient contact has diminished. It is a crime that quality of patient care is dictated by profits.

This concerns me very much with regards to patient care and my RN license. They have recently dramatically decreased their ancillary staff members leaving the RN's to do all aspects of care, including cleaning of patient bed side commodes. These kinds of tasks along with the lengthy time working on the electronic medical record has left me very concerned with overall patient care and legality issues.

Theme 4: Nursing Education

Nursing education was a frequently-discussed theme that included comments about: (1) inadequate preparatory education, (2) lack of available nursing re-entry programs, and (3) workplace training or orientation. Many commenters were frustrated with nursing education because increasing levels of education do not necessarily translate into nursing quality or increases in salary across the various practice settings. Comments were more positive than negative regarding BSN-level education requirements.

Preparatory Education

There were a number of comments about preparatory education in California being inadequate to the demands of the workplace, with the lack of hands-on clinical skills being the primary complaint. A lack of critical thinking skills and appropriate work ethic among recently-graduated RNs were also mentioned. Some of those who commented wanted to see employers offer more in-house training to remedy gaps in new graduate skillsets to prepare the next generation to take their places as current nurses moved towards retirement. A few comments from disabled or older nurses who could no longer perform standard nursing tasks mentioned their willingness to put their experience to work as mentors/advisors to new graduates.

Quality of nursing care becomes compromised because, new grads are not equipped out of school to handle all the challenges nurses face. Education of the new grad RN is abbreviate and mostly rushed. Only a few new grads can survive this way.

Also, I am a strong advocate for requiring baccalaureate degrees for registered nurses. In my experience, there is a clear difference in the skill level in registered nurses having completed baccalaureate programs versus ADN or MEPN programs.

Most newly CA grads (RNs) seemed less prepared academically. Most came out of school with only “technical” knowledge. Not so much in depth nursing knowledge for anatomy & physiology, ..., “science & biology” skills, etc. My point is, NY RNs seemed prepared and are very professional & CA RNs & BSN lack professionalism.

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 are located near their homes.

“For an RN wanting to return to nursing after a period of 11 years, this has been the most frustrating job-seeking experience. Understandably, no one wants to hire an absentee RN, but the availability of re-entry/refreshers programs “somewhere” would be great asset to the experienced nurses and the nursing profession, as well as provide jobs in this bad economy. I am fortunate that the temp agency has given me an opportunity to hopefully re-enter the nursing market...”

Transition/Orientation Programs

Transition-to-practice and orientation programs were perceived by many commenters to be vital to nurses hoping to transfer into the hospital setting. These adjunct training programs might become more important as more new graduates must delay their entry into the hospital work setting.

After one year of graduation new grad programs were no longer an option since they don't accept you and I found myself without any resources for my training and transition from school to the workplace.

I would like to see changes that would support new grads transitions from nursing school to work.

Entry programs need to be accommodating and helpful. RN programs need to be able to train and help nurses find jobs post-graduation. Hospitals need to be required to offer adequate training, CEU's and ongoing education to working RN's.

Specific orientation programs need to be put in place! Especially for emergency room nurses.

Theme 5: Compensation for Work

The 2014 RN Survey findings showed the average compensation for working RNs in California was \$93,919, compared to \$89,940 in 2012 (Chapter 3, Table 3.30). 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 3.35). Almost universally, narrative responses regarding compensation expressed dissatisfaction with salary, benefits, or both.

Salary

Many respondents were satisfied with their salaries, and a number noted that they had moved to California for higher salaries and better working conditions, despite the high cost of living. The satisfaction rating for salary as discussed in the 2014 RN survey was 3.9 on a 5-point scale (Chapter 3, Figure 3.12). However, more respondents felt their salary was inadequate considering the amount of work and responsibility required of them.

With the kind of responsibilities RN gets I expect that pay would be better, and job security as well. I am satisfied where I am but I believe as an RN who does their work whole heartedly and definitely, we deserves to be compensated more and our profession to be taxed less.

Salary low for education and work demands required.

I have an excellent salary, excellent benefits and will have an excellent pension.

Some respondents expressed dissatisfaction with perceived salary ranges within the nursing profession. Some commenters noted that getting a higher degree or certification did not necessarily translate to being a better nurse, or result in higher pay, while other commenters supported the idea of there being pay differentials associated with education.

My concern is the salary nurse practitioners are paid, my expectations were higher. Staff RNs make more money/hr than a NP that has much more responsibility.

Nursing profession is a very prestigious career. What I want to see is that nurses with higher education should be given an incentive or salary increase just like when you are a board certified. There should be a difference in salary from AD Diploma to BSN and MSN.

I recognize that new grads need mentoring and additional education so a different starting pay or job title may be appropriate in some instances; however, they deserve the respect of being a licensed professional in this evolving and important field.

Benefits

Benefits, while not mentioned as often as salary, were noted as an important and desirable aspect of a fair compensation package. Several respondents mentioned insufficient retirement packages, including lack of pension (401k only), and lack of retirement compensation altogether, while other commenters felt their compensation was fair. A handful of commenters mentioned efforts by their employers that they felt threatened future benefits. A number of nurses mentioned benefits policies in conjunction with concerns about workplace injuries. Some commenters mentioned that they were forced, or feared they would be forced, to leave nursing before retirement age due to injuries or failing health. Other complaints concerned reasonable health care benefits, and lack of employer support for educational advancement and certifications.

The union made a huge difference in pay, retirement benefits & quality of input from my employer.

California is much better at providing benefits of all kinds to nurses than other states that I have worked in (GA and NC).

But it is uncertain if benefits will change in the future. To tell someone that in the future we may not have retirement or pension benefits would be devastating.

I am now approaching retirement in a career that had me caring for many others. Now that it is close, I am finding that my employer is wanting to take away my retirement and benefits. This is the biggest insult any nurse could ever experience. It is simply wrong.

Respondents' Suggestions for Improving Nursing

Many respondents provided suggestions to strengthen the nursing profession and improve nursing education. These included new graduate programs to assist recent nursing graduates gain clinical skills and employment and stronger and more supportive leadership from nursing administrators. Respondents also suggested that more flexible scheduling and less physically demanding job roles would allow the older, experienced nurses to continue contributing to a profession they love.

Need RN and NP residency programs (mandatory) incorporated into degrees. No sense in completing 4yr program only to be informed you're "unemployable" as new grad and need 6 months training-which no one will provide.

More opportunities for handicapped but mentally capable nurses.

It would be wonderful for California to pass a law requiring all hospitals to use the same acuity tool designed by bedside nurses for deciding nurse patient ratio rather than allowing it to be up to the discretion of insurance companies and those not involved in direct patient care.

I wish you still did the BRN Newsletter. It was mailed, in the past. However, you could do it online, now...& save on postage! It had education features and also listed the RN's who had been disciplined in the prior months. That was an important item!

Adopt formal PAID residency programs, similar to MD residencies, for newly graduated/licensed nurses. Something must be done to keep new grad nurses engaged in clinical practice when it takes up to a year or more to get their first RN job in the current market.

Respondents had divided views on certain issues, including requiring the BSN to practice nursing, as noted earlier, and on the merit of unions.

Make BSN entry level to RN profession. ADN & LVN are almost equal now, and ADN are functioning in leadership roles, not through education, but inter-departmental peter-principal process. Modern day RN-level nursing needs minimum BSN.

I am sorry to see so many hospitals requiring BSN as I feel the education I received at the community college was superb.

In the journey to obtain "magnet" status the ADN and Diploma RN are generally passed over for the BSN or MSN for promotions. In many cases, this is not the best nurse for the position. I have worked with plenty of nurses; both with BSN or MSNs and also without. There is positive and negative in all, I think experience can also be a benefit.

The trend for BSN degrees is challenging, for a large percentage of nurses do not have this. Many are over 40 yrs old and cannot financially afford going back to school, raise their children and maintain working full time. Many nurses do not have the resources available to drop what they're doing to achieve a higher degree of education. Colleges are expensive and space is limited or out of state applicants get first choice for financial reasons.

Summary of Thematic Findings

The comments provided in the 2014 RN Survey represent the opinions of a self-selected group of nurses with active California licenses, and provide a nuanced look at the concerns driving the survey statistics. The commonality of key issues among respondents to this 2014 survey, and their persistence in BRN survey comments from 2004 through 2014, indicates that these issues are relevant in workplaces across California.

Many 2014 respondent comments expressed concern that their profession is changing for the worse due to conditions beyond their control. The recession of 2008 and introduction of the Affordable Care Act have kept the healthcare environment in a state of flux, and employers are making cost-cutting a priority – affecting hiring, staffing, and scheduling for California nurses. The difficulty finding nursing positions for both new graduates and returning RNs raised concerns about the pending adequacy of the supply of experienced nurses when large numbers of Baby Boomer RNs retire. At the same time, the increasing digitization of healthcare data along with technological advances in the workplace, make it more difficult for nurses to maintain the personal, compassionate connection to the patient that is at the heart of the profession’s identity.

Commenters blamed management for inadequate concern about working conditions and undue focus on “the bottom line.” Nurses’ complaints of heavy workloads, demanding schedules, increased reporting and documentation requirements, and inadequate support systems reflected concern for their health and safety on the job. The comments made it clear that nurses’ are primarily concerned about their personal bottom line—patient safety. The comments demonstrate that nurses are frustrated and distressed by a work environment perceived to erode professional respect and pride, and more importantly, their ability to provide high quality care.

These narrative comments offer some insight into issues that respondents consider in their decision to continue a career in the nursing profession or work in the hospital setting. 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 the highest quality patient-centered care.

Chapter 6. Conclusions

The registered nursing labor market in California is beginning to show signs of recovery from the economic recession. Employment rates of registered nurses are very high, particularly for a profession composed of many older and female workers. However, there has been a decline in the share of RNs employed in nursing since 2010, from 87.4 percent to 83.4 percent in 2014. This decline has been most notable among nurses under 40 years old, and many of these unemployed nurses indicated that they have not been able to find a job in nursing. At the same time, employment rates of nurses age 55 years and older have been returning to their pre-recession levels after increasing between 2008 and 2010. The high share of young RNs who are not employed is problematic, as California has spent considerable money on increasing school enrollments to abate the nursing shortage.

California has a diverse workforce of nurses, and this diversity is increasing with the entry of more men and minorities into the profession. The age of the RN workforce has stabilized in the past five years. In 2014, 47.6 percent of RNs were 50 years or older. The age distribution has become more even across age groups, with nearly as many nurses in the youngest age groups as in the oldest age groups. The workforce has continued to become more diverse. In 2014, nearly 12 percent of RNs were men, and more than 47 percent were non-White. Fewer than 45 percent of RNs under 45 years old are White.

The employment settings and job titles 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. Within acute-care hospitals, however, there has been growth in the share of RNs working in ambulatory care departments, and decreases in the share working in acute care units. Across all employment settings, nurses work in a wide range of roles, including management, patient care coordination, education, and other roles. Slightly less than 15 percent of working RNs who reside in California reported that they hold more than one nursing position. Total compensation for nurses rose substantially from 1990 through 2014, from an average of \$31,504 in 1990 to \$93,911 in 2014. Earnings from nursing are very important to the households of nurses, with nearly half of nurses reporting their nursing income comprised at least eighty percent of household income.

Rising shares of California RNs are completing additional education after nursing licensure. Between 2012 and 2014, the share reporting they had a baccalaureate or higher degree in nursing rose from 53.2 percent to 61.5 percent. Forty-one percent of working RNs in 2014 reported that their entry-level education was a bachelor's degree. In 2014, about 39 percent of nurses with active California licenses indicated they completed additional education after licensure. Nurses have a wide range of job opportunities available, and can take advantage of even more with appropriate educational advancement. However, the pattern of long gaps between initial RN education and completion of additional education has not changed. In 2014, RNs who entered the profession with an associate degree took an average of 9.1 years before completing a baccalaureate degree, and those whose initial education was a baccalaureate degree took an average of 9.9 years to complete a master's degree.

In 2014, 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 2014 were interaction with patients, the nursing profession overall, feeling that work is meaningful, job overall, and relations with non-nursing staff. The five lowest rated aspects of nursing in 2014 were involvement in policy and management decisions, amount of paperwork required, non-nursing tasks required, employer-supported educational/training programs, and quality of preceptor/mentor programs.

About 13 percent of currently employed RNs plan to retire in the next five years, which is an increase from the 9.5 percent that had such plans in 2010. In 2014, five percent of RNs indicated they plan to retire within 2 years. Among nurses under 35 years, about 19 percent plan to increase their hours of nursing work, while 13.3 percent intends to reduce their hours of nursing work. About 9.2 percent of RNs aged 35 to 44 years plans to reduce their hours of nursing work, while 13.8 percent plan to increase their hours.

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, 2012, and 2014 surveys show signs of stress among nurses caused by the recession of the late 2000s. Many new people are entering the field of nursing, but employment rates of younger RNs have been lower than historical patterns since 2010. Many new graduates are having difficulty finding nursing work. At the same time, employment rates of older RNs are returning to historic patterns after rising during the recession. A growing share of older RNs indicates they plan to retire in the near future. As the economy continues to improve, it is likely that older nurses will reduce their employment. It is essential that recently-graduated RNs find employment opportunities so they are prepared to take on the roles of retiring RNs.

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. Employers and health care leaders will continue to benefit from supporting this dynamic workforce, seeking to improve the factors that frustrate nurses, promoting the aspects of nursing which attract RNs to the profession, and ensuring that new graduates have opportunities to work in rewarding positions within California.

Appendices

Appendix A. Tabulations of Responses, 2006-2014

1. What was the highest level of education you completed *prior* to your basic RN nursing education?

	2006	2008	2010	2012	2014
Less than High School Diploma	0.4%	0.2%	0.6%	0.7%	0.5%
High School Diploma	45.1%	41.9%	45.7%	49.0%	62.3%
Associates Degree	27.6%	28.3%	25.8%	24.4%	18.0%
Baccalaureate Degree	23.4%	25.8%	24.0%	22.4%	17.1%
Master's Degree	2.9%	3.0%	3.1%	2.7%	1.2%
Doctoral Degree	0.5%	0.7%	0.8%	1.0%	0.8%
Number of cases	4,456	4,822	5,503	4,942	5,028

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	2012	2014
No	57.0%	58.1%	57.9%	57.3%	58.7%
Clerical or Administrative	*	5.0%	5.1%	5.4%	5.1%
Military Medical Corps	*	0.7%	0.6%	0.9%	0.9%
Nursing Aide	19.3%	17.3%	15.7%	14.5%	13.6%
Other Health Technician	*	3.7%	5.5%	4.4%	3.8%
Medical Assistant	*	2.8%	2.7%	3.0%	2.9%
LPN/LVN	10.2%	8.1%	9.2%	9.7%	8.8%
Other	13.5%	4.4%	3.2%	4.8%	6.1%
Number of cases	4,461	4,807	5,495	4,942	5,038

* Question was not asked in this survey year.

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

3. In what kind of program did you receive your initial, pre-licensure RN education?

	2006	2008	2010	2012	2014
Diploma	16.9%	16.0%	12.4%	10.3%	10.2%
Associates Degree Program	47.4%	45.9%	45.0%	45.8%	44.3%
Baccalaureate Program	34.9%	36.6%	38.0%	2.7%	40.1%
Masters Program	0.1%	0.3%	1.5%	39.0%	0.6%
Entry Level Master Program	0.6%	1.2%	0.2%	2.1%	1.9%
Doctoral program	0.0%	0.1%	0.2%	0.0%	0.1%
30 Unit option program	*	*	2.8%	0.0%	1.6%
Number of cases	4,440	4,773	5,476	4,913	5,032

* 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	2012	2014
California	60.1%	54.6%	56.2%	59.7%	60.6%
Other US state	22.0%	23.2%	22.3%	20.4%	18.5%
Australia	0.1%	0.0%	0.2%	0.1%	0.1%
Canada	1.4%	1.2%	1.0%	0.8%	0.9%
China	0.2%	0.2%	0.4%	0.4%	0.2%
England	0.8%	0.9%	0.8%	0.3%	0.7%
India	0.5%	0.7%	0.6%	0.6%	0.6%
Ireland	0.1%	0.1%	0.0%	0.0%	0.0%
Korea	0.9%	1.0%	1.3%	1.0%	1.0%
Philippines	11.1%	13.7%	14.0%	13.7%	13.6%
Other Country	3.0%	4.4%	3.3%	2.7%	3.8%
Number of cases	4,351	4,775	5,480	4,905	5,047

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

5. In what year did you graduate from that program?

	2006	2008	2010	2012	2014
1940s	0.2%	0.2%	0.2%	0.0%	0.0%
1950s	2.7%	2.3%	1.3%	1.0%	0.7%
1960s	8.3%	8.3%	6.1%	4.3%	4.3%
1970s	23.3%	21.7%	17.4%	16.1%	15.3%
1980s	25.1%	22.7%	20.4%	19.1%	18.0%
1990s	25.8%	25.2%	24.1%	23.5%	21.1%
2000s	14.6%	19.8%	30.3%	28.7%	27.2%
2010s	*	*	0.1%	7.0%	13.3%
Number of cases	4,375	4,688	5,463	4,900	4,993

* 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	2012	2014
1940s	0.1%	0.2%	0.2%	0.0%	0.0%
1950s	2.5%	2.1%	1.1%	0.9%	0.6%
1960s	7.9%	7.8%	5.8%	4.0%	3.5%
1970s	21.3%	19.8%	16.4%	14.6%	12.4%
1980s	25.1%	22.8%	20.2%	18.2%	17.1%
1990s	26.5%	24.8%	23.4%	24.1%	18.0%
2000s	16.5%	22.3%	31.8%	29.3%	32.0%
2010s	*	*	1.1%	8.8%	16.3%
Number of cases	4,448	4,767	5,551	4,967	5,047

* 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	2012	2014
California	63.9%	60.1%	61.7%	64.1%	65.3%
Other US	20.1%	21.5%	20.5%	18.7%	18.0%
Australia	0.1%	0.0%	0.2%	0.1%	0.1%
Canada	1.6%	1.1%	1.0%	0.8%	0.8%
China	0.1%	0.3%	0.3%	0.3%	0.0%
England	0.7%	1.0%	0.6%	0.4%	0.6%
India	0.4%	0.6%	0.5%	0.5%	0.4%
Ireland	0.1%	0.1%	0.0%	0.0%	0.0%
Korea	0.8%	0.8%	1.1%	0.9%	0.6%
Philippines	9.6%	10.9%	11.7%	11.7%	9.4%
Other Country	2.7%	3.7%	2.6%	2.4%	4.8%
Number of cases	4,447	4,790	5,480	4,914	5,047

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	2012	2014
1940s	0.1%	0.1%	0.0%	0.0%	0.0%
1950s	1.2%	1.0%	0.6%	0.5%	0.3%
1960s	5.2%	5.3%	3.9%	2.5%	2.9%
1970s	16.9%	14.6%	11.9%	11.1%	10.4%
1980s	26.5%	23.6%	20.3%	17.7%	16.9%
1990s	26.2%	22.2%	20.1%	19.1%	16.9%
2000s	23.9%	33.2%	42.0%	37.8%	33.7%
2010s	*	*	1.2%	11.3%	18.9%
Number of cases	4,459	4,765	5,490	4,967	5,047

* 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	2012	2014
0	88.2%	88.0%	90.0%	89.5%	91.6%
1	8.5%	8.4%	7.0%	7.9%	6.3%
2	2.3%	2.5%	2.2%	1.9%	1.4%
3	0.7%	0.5%	0.4%	0.6%	0.5%
4	0.2%	0.3%	0.2%	0.1%	0.0%
5 or more	0.1%	0.3%	0.2%	0.1%	0.0%
Number of cases	4,456	4,746	5,551	4,967	5,047

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?

In what year was it completed?

	% received	Year received							Number of cases
		1950s	1960s	1970s	1980s	1990s	2000s	2010s	
ASN	3.1%	1.3%	2.2%	11.7%	15.8%	25.2%	38.8%	5.1%	164
BSN	12.0%	0.2%	2.0%	9.0%	17.1%	27.2%	40.8%	3.6%	616
MSN	7.3%	0.0%	0.9%	6.1%	9.5%	27.7%	52.5%	3.2%	412
Doctorate, Nursing (DNP)	0.1%	0.0%	0.0%	0.0%	0.0%	89.1%	11.0%	0.0%	3
Doctorate, Nursing (PhD)	0.3%	0.0%	0.0%	0.0%	21.0%	15.5%	63.5%	0.0%	15
Associate's, non-nursing	1.8%	0.0%	2.9%	13.4%	10.7%	27.2%	38.9%	6.8%	92
Bachelor's, non-nursing	3.5%	0.0%	0.6%	7.9%	27.7%	27.8%	35.3%	0.7%	187
Master's, non-nursing	3.7%	0.0%	1.1%	3.9%	19.5%	21.6%	51.0%	2.8%	210
Doctorate, non-Nursing	0.7%	0.0%	0.0%	0.7%	14.0%	38.1%	39.9%	7.3%	32

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	2012	2014
Nurse Anesthetist	0.8%	0.4%	0.4%	0.6%	1.1%
Public Health Nurse	16.1%	17.5%	15.2%	16.6%	17.5%
Nurse Midwife	1.3%	0.6%	0.4%	0.5%	0.6%
Psychiatric/Mental Health Nurse	3.2%	1.1%	1.3%	1.5%	1.1%
Nurse Practitioner	5.6%	7.4%	5.7%	5.4%	5.4%
Clinical Nurse Specialist	3.2%	3.0%	2.8%	2.8%	2.2%
None	77.2%	76.7%	76.8%	75.7%	75.1%
Number of cases	*	*	5,142	4,657	5,047

* 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	2012	2014
Less than 5 years	14.1%	15.7%	19.2%	19.9%	20.8%
5 to 9 years	15.5%	14.7%	16.4%	17.2%	16.9%
10 to 14 years	14.5%	13.8%	13.5%	12.8%	13.3%
15-19 years	12.3%	11.8%	12.0%	11.9%	10.8%
20-24 years	13.5%	12.2%	9.7%	10.0%	9.2%
25-29 years	12.2%	11.7%	9.7%	9.3%	7.2%
30-34 years	9.3%	9.4%	8.9%	8.4%	8.8%
35+ years	8.7%	10.8%	10.6%	10.4%	13.1%
Number of cases	4,345	4,754	5,242	4,691	4,971

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	2012	2014
No	93.5%	93.0%	91.8%	88.1%	90.0%
Yes	6.5%	7.0%	8.3%	11.9%	10.0%
Number of cases	4,440	4,814	5,444	4,854	5,047

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

15. What is your degree objective?

	2006	2008	2010	2012	2014
Associates Degree	0.3%	1.0%	0.3%	5.2%	5.0%
Baccalaureate Degree	33.7%	34.4%	31.2%	33.0%	42.3%
Master's Degree	44.1%	38.5%	44.1%	29.3%	34.8%
Non-degree specialty certification	17.4%	21.2%	17.6%	27.1%	11.3%
Doctoral Degree	4.4%	4.9%	6.8%	5.4%	*
Doctoral Degree (DNP)	*	*	*	*	5.8%
Doctoral Degree (Research)	*	*	*	*	4.1%
Number of cases	242	285	360	472	444

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

16. How satisfied are you with the nursing profession overall?

	2006	2008	2010	2012	2014
Very Dissatisfied	2.4%	1.6%	2.3%	3.0%	3.6%
Dissatisfied	10.6%	8.4%	6.0%	6.1%	4.6%
Neither satisfied nor dissatisfied	12.4%	12.8%	9.3%	8.9%	7.5%
Satisfied	54.2%	52.7%	50.6%	45.4%	43.6%
Very satisfied	20.4%	24.5%	31.8%	36.6%	40.7%
Number of cases	*	*	5,404	4,764	4,998

* 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

17. Are you **currently employed** in registered nursing?

	2006	2008	2010	2012	2014
Employed in nursing	86.7%	86.9%	12.6%	14.9%	16.6%
Not employed in nursing	13.3%	13.1%	87.4%	85.1%	83.4%
Number of cases	4,346	4,890	5,551	4,967	5,047

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	2012	2014
Under 5 hours	1.7%	0.7%	1.1%	0.7%	0.8%
5-7.5 hours	4.0%	3.9%	3.8%	2.8%	3.5%
8 hours	42.8%	39.5%	41.7%	45.3%	44.7%
8.5-11.5 hours	15.3%	13.5%	11.6%	11.4%	12.0%
12 hours	34.7%	40.8%	40.1%	38.5%	37.5%
More than 12 hours	1.6%	1.5%	1.8%	1.2%	1.6%
Number of cases	3,109	3,559	3,986	3,313	3,334

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	2012	2014
Less than 1 Hour	0.0%	0.0%	0.0%	0.0%	0.2%
1 to 20 Hours	8.9%	7.2%	6.8%	7.8%	7.0%
21 to 30 Hours	14.0%	13.3%	13.4%	12.4%	12.2%
31 to 40 hours	62.7%	63.9%	65.7%	68.0%	66.5%
41 to 60 hours	13.2%	13.6%	12.6%	10.8%	12.2%
60+ hours	1.2%	2.0%	1.5%	1.1%	2.0%
Number of cases	3,649	3,984	4,603	3,953	4,034

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

	Any Overtime				
C. Overtime hours per week	2006	2008	2010	2012	2014
None or less than one hour	50.9%	57.0%	65.5%	69.3%	65.2%
1-2hours	14.6%	14.3%	11.8%	10.5%	12.3%
3-4 hours	10.6%	7.6%	6.6%	5.9%	6.6%
5-6 hours	6.4%	4.3%	3.4%	3.7%	2.8%
7-8 hours	4.1%	4.6%	4.0%	3.4%	4.2%
8+ hours	13.4%	12.2%	8.7%	7.2%	8.9%
Number of cases	3,313	3,952	4,605	3,953	3,728

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	2012	2014
No on-call hours	*	86.2%	86.6%	89.5%	89.5%
0.5-9 hours	*	5.7%	6.0%	3.9%	3.9%
10-19 hours	*	4.3%	3.7%	3.8%	3.8%
20-29 hours	*	1.0%	1.4%	1.3%	1.2%
30 or more hours	*	2.9%	2.3%	1.4%	1.6%
Number of cases	*	3,951	4,615	3,960	5,047

* 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.

19. How many **months** per year do you work as an RN?

In prior years, the question was “how many weeks” rather than months.

	2012	2014
Less than 8 months	1.3%	1.1%
8-10 months	0.8%	0.8%
11-12 months	98.0%	98.1%
Number of cases	3,983	4,020

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

20a. Within the next two years, what are your intentions?

	2012	2014
Plan to increase hours of nursing work	11.6%	11.0%
Plan to work approximately as much as now	72.0%	70.6%
Plan to reduce hours of nursing work	10.5%	10.7%
Plan to leave nursing entirely, but not retire	0.9%	1.0%
Plan to retire	5.1%	6.7%
Number of cases	3,180	4,005

Note: This question was asked for the first time in 2012.

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

20b. Within the next five years, what are your intentions?

	2006	2008	2010	2012	2014
Plan to increase hours of nursing work	9.5%	10.1%	13.1%	10.8%	10.4%
Plan to work approximately as much as now	53.1%	54.6%	60.2%	50.9%	50.2%
Plan to reduce hours of nursing work	21.6%	19.8%	15.2%	20.8%	20.0%
Plan to leave nursing entirely, but not retire	3.0%	3.1%	2.0%	3.0%	2.7%
Plan to retire	12.8%	12.4%	9.5%	14.5%	16.7%
Number of cases	3,694	4,037	4,660	3,142	3,906

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	2012	2014
Regular Employee	96.0%	95.8%	96.2%	96.2%	96.6%
Temp or Agency	2.4%	2.6%	1.3%	1.2%	1.1%
Self-Employed	1.7%	1.6%	2.0%	2.2%	1.7%
Traveling RN	*	*	0.5%	0.5%	0.7%
Number of cases	3,800	4,032	4,652	4,015	4,096

* 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	2012	2014
0 to 20 Hours	10.5%	10.0%	7.6%	8.0%	9.4%
21 to 30 Hours	15.1%	13.5%	14.4%	12.6%	12.2%
31 to 40 hours	61.6%	63.4%	66.4%	69.2%	68.8%
41 to 60 hours	11.1%	10.2%	10.3%	9.3%	8.3%
60+ hours	1.7%	3.0%	1.3%	0.9%	1.2%
Number of cases	3,778	4,031	4,644	4,000	4,079

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

23. How many **months per year** do you normally work in your **principal** nursing position?

In prior years, the question was “how many weeks” rather than months.

	2012	2014
Less than 8 months	1.1%	1.3%
8-10 months	2.6%	3.1%
11-12 months	96.3%	95.6%
Number of cases	3,946	4,038

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	2012	2014
Less than 5 miles	16.5%	17.7%	17.7%	15.9%	16.8%
5-9 miles	23.0%	21.4%	20.6%	23.2%	21.5%
10-19 miles	30.7%	30.7%	31.8%	30.3%	30.8%
20-39 miles	22.7%	23.9%	22.7%	23.3%	23.8%
40 or more miles	7.2%	6.4%	7.1%	7.4%	7.1%
Number of cases	3,750	3,961	4,210	3,950	4,008

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	2012	2014
Less than 5 years	46.3%	46.1%	42.8%	42.0%	48.5%
5-9 years	21.4%	19.4%	24.0%	23.8%	20.8%
10-14 years	8.7%	8.2%	12.5%	11.8%	13.1%
More than 14 years	23.6%	26.3%	20.8%	22.3%	17.7%
Number of cases	3,598	4,020	4,617	4,034	5,046

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	2012	2014
Hospital, acute care or emergency department	55.6%	56.3%	53.4%	52.2%	48.9%
Hospital, nursing home unit	0.5%	0.5%	0.4%	0.7%	1.0%
Hospital-based ambulatory care department	4.8%	5.5%	7.8%	8.0%	10.3%
Hospital-based ancillary department	1.8%	1.4%	2.3%	1.4%	0.8%
Hospital, other department	*	0.7%	*	*	4.6%
Skilled nursing/extended care/nursing home	2.3%	3.0%	2.8%	4.0%	4.0%
University or college	3.3%	*	1.6%	1.4%	1.8%
Academic nursing program	*	1.4%	*	*	*
Public health dept/community health agency	2.5%	2.6%	1.7%	1.8%	3.6%
Home health nursing agency or service	3.0%	2.5%	3.3%	2.6%	3.9%
Hospice	1.7%	1.4%	1.4%	1.7%	0.2%
Ambulatory care setting (office, surgery center)	6.3%	9.3%	7.3%	7.2%	5.3%
Dialysis	1.5%	1.2%	1.6%	1.3%	0.9%
Telenursing organization/call center	*	1.1%	0.7%	0.8%	0.7%
Occupational health/employee health	0.5%	0.3%	0.3%	0.6%	0.1%
School health (K-12 or college)	1.8%	2.1%	1.7%	1.5%	1.7%
Mental health/drug and alcohol treatment	3.8%	0.8%	1.9%	*	
Outpatient mental health/substance abuse	*	*	*	0.9%	0.4%
Inpatient mental health/substance abuse	*	*	*	1.5%	1.7%
Insurance organization	*	0.6%	*	*	0.6%
Forensic setting (correctional facility, prison, jail)	2.0%	1.2%	1.9%	1.6%	1.5%
Government agency (local, state, federal)	1.4%	1.0%	1.7%	1.2%	1.5%
Case management/disease management	*	2.3%	2.2%	2.6%	2.2%
Self employed	0.5%	0.7%	0.7%	0.6%	0.4%
Long term care	*	*	0.4%	*	*
Rehabilitation	*	*	1.2%	2.2%	*
Urgent Care	*	*	0.8%	0.4%	0.3%
Other	6.9%	4.1%	3.0%	3.8%	3.8%
Number of cases	3,661	4,080	4,671	4,049	4,092

* 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	2012	2014
Direct patient care provider/staff nurse	61.2%	58.5%	59.8%	54.8%	50.0%
Senior management, any setting	1.0%	1.9%	1.5%	2.1%	1.6%
Middle management, any setting	7.7%	5.8%	6.0%	6.1%	5.1%
Front-line management	5.9%	3.0%	2.9%	3.1%	2.1%
Charge Nurse/Team Leader	*	7.6%	8.4%	10.9%	1.7%
Direct care and Charge Nurse (both)	*	0.8%	*	*	16.1%
Clinical Nurse Specialist	1.6%	1.1%	0.8%	0.9%	0.5%
Certified Registered Nurse Anesthetist	0.4%	0.4%	0.4%	0.7%	0.3%
Certified Nurse Midwife	0.2%	0.3%	0.2%	0.2%	0.4%
Nurse Practitioner	4.7%	4.1%	3.4%	3.6%	3.7%
School Nurse	1.8%	1.8%	1.5%	1.2%	1.6%
Public Health Nurse	1.9%	1.3%	1.5%	1.2%	1.5%
Educator, academic setting	2.5%	1.5%	1.4%	1.6%	1.5%
Educator, service setting/clinical nurse educator	1.7%	1.6%	1.3%	1.1%	1.1%
Patient care coordinator/case manager/discharge planner	3.9%	4.2%	4.0%	4.0%	5.3%
Infection Control Nurse	0.3%	0.3%	0.2%	0.2%	0.3%
Quality Improvement Nurse/Utilization Review	1.7%	1.9%	1.3%	2.1%	2.3%
Occupational Health Nurse	0.3%	0.2%	0.2%	0.2%	0.1%
Telenursing	0.7%	1.3%	1.1%	1.0%	0.9%
Nurse Coordinator	*	0.2%	1.0%	1.0%	
Consultant	*	0.3%	*	*	0.5%
Researcher	*	0.2%	0.2%	0.3%	0.4%
Patient Educator	*	*	0.5%	0.4%	0.8%
Clinical Nurse Leader	*	*	*	0.3%	0.2%
Other	2.6%	1.7%	2.5%	3.0%	2.3%
Number of cases	3,675	4,108	4,689	4,046	4,097

* 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	2012	2014
0 to 25 percent of time	*	*	26.3%	28.3%	27.7%
26 to 50 percent of time	*	*	19.6%	17.4%	18.9%
51 to 75 percent of time	*	*	26.7%	27.4%	26.8%
76 to 100 percent of time	*	*	27.5%	27.0%	26.6%
Number of cases	*	*	4,484	3,880	3,943

* Question was not asked in this survey year.

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

Patient Education	2006	2008	2010	2012	2014
0 to 25 percent of time	93.3%	93.4%	90.6%	89.7%	88.9%
26 to 50 percent of time	5.5%	5.2%	8.4%	9.4%	10.0%
51 to 75 percent of time	0.7%	0.6%	0.6%	0.7%	0.7%
76 to 100 percent of time	0.6%	0.8%	0.4%	0.3%	0.4%
Number of cases	3,320	4,018	4,484	3,880	3,943

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

Indirect patient/client care (consultation, planning, evaluating care)	2006	2008	2010	2012	2014
0 to 25 percent of time	86.3%	93.1%	91.2%	91.3%	90.6%
26 to 50 percent of time	8.2%	4.0%	5.3%	4.5%	5.6%
51 to 75 percent of time	2.0%	1.4%	1.6%	1.6%	1.7%
76 to 100 percent of time	3.5%	1.4%	2.0%	2.5%	2.1%
Number of cases	3,320	4,018	4,484	3,880	3,943

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

Education of students in health care occupations (including preparation time)	2006	2008	2010	2012	2014
0 to 25 percent of time	97.7%	97.3%	95.9%	96.7%	96.7%
26 to 50 percent of time	0.9%	1.1%	1.9%	1.9%	1.7%
51 to 75 percent of time	0.4%	0.6%	0.5%	0.4%	0.6%
76 to 100 percent of time	0.9%	1.0%	1.7%	1.0%	1.0%
Number of cases	3,320	4,018	4,484	3,880	3,943

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

Supervision	2006	2008	2010	2012	2014
0 to 25 percent of time	91.5%	91.7%	89.6%	88.1%	88.5%
26 to 50 percent of time	5.4%	5.0%	5.1%	6.3%	5.7%
51 to 75 percent of time	1.5%	1.3%	2.6%	2.6%	2.8%
76 to 100 percent of time	1.6%	1.9%	2.7%	3.1%	2.9%
Number of cases	3,320	4,018	4,484	3,880	3,943

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

Administration	2006	2008	2010	2012	2014
0 to 25 percent of time	93.8%	92.7%	96.5%	94.7%	95.4%
26 to 50 percent of time	2.4%	3.8%	2.1%	3.1%	2.4%
51 to 75 percent of time	0.9%	1.3%	0.5%	0.7%	0.9%
76 to 100 percent of time	2.9%	2.1%	1.0%	1.6%	1.3%
Number of cases	3,320	4,018	4,484	3,880	3,943

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

Research	2006	2008	2010	2012	2014
0 to 25 percent of time	*	*	99.5%	99.3%	99.2%
26 to 50 percent of time	*	*	0.3%	0.3%	0.4%
51 to 75 percent of time	*	*	0.1%	0.0%	0.2%
76 to 100 percent of time	*	*	0.1%	0.3%	0.2%
Number of cases	*	*	4,484	3,880	3,943

* 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	2012	2014
0 to 25 percent of time	*	99.0%	99.2%	99.4%	99.7%
26 to 50 percent of time	*	0.8%	0.6%	0.5%	0.3%
51 to 75 percent of time	*	0.1%	0.1%	0.1%	0.0%
75 to 100 percent of time	*	0.1%	0.0%	0.0%	0.0%
Number of cases	*	4,018	4,484	3,880	3,943

* Question was not asked in this survey year.

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

Other	2006	2008	2010	2012	2014
0 to 25 percent of time	*	96.7%	96.2%	96.2%	96.3%
26 to 50 percent of time	*	1.1%	1.5%	1.2%	1.1%
51 to 75 percent of time	*	0.6%	0.4%	0.5%	0.4%
75 to 100 percent of time	*	1.6%	1.9%	2.2%	2.2%
Number of cases	*	4,018	4,484	3,880	3,943

* 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	2012	2014
Not involved in direct patient care	10.4%	12.0%	11.9%	12.3%	13.6%
Ambulatory/outpatient	*	10.2%	8.2%	8.6%	*
Ambulatory/outpatient (primary care)	*	*	*	*	3.9%
Ambulatory/outpatient (specialty care)	*	*	*	*	3.7%
Cardiology	*	2.0%	2.3%	2.6%	2.0%
Community/public health	1.6%	1.3%	1.2%	1.4%	1.3%
Corrections	1.3%	0.8%	1.4%	0.9%	1.0%
Dialysis	1.4%	1.3%	1.7%	1.6%	1.4%
Emergency Trauma	6.3%	5.8%	5.9%	6.2%	6.3%
Geriatrics	2.3%	2.2%	2.4%	3.1%	3.6%
Home health care	2.6%	2.4%	2.6%	2.6%	2.5%
Hospice	1.6%	1.4%	1.3%	1.7%	1.5%
Intensive Care	10.8%	9.8%	9.4%	7.2%	7.5%
Labor & delivery	*	3.6%	3.5%	4.1%	2.9%
Medical/surgical	15.3%	11.5%	10.3%	9.7%	9.9%
Mother-baby or normal newborn nursery	*	2.5%	2.5%	2.9%	2.6%
Neonatal Care	3.8%	3.4%	2.9%	3.1%	2.8%
Obstetrics	6.3%	0.2%	1.3%	1.2%	1.7%
Oncology	*	2.1%	1.9%	2.3%	1.8%
Pediatrics	3.9%	2.9%	2.9%	2.6%	3.9%
Peri-operative/Surgery/PACU/Anesthesia	6.6%	6.0%	6.9%	7.0%	8.1%
Pysch/Mental Health	2.8%	2.8%	3.1%	3.1%	3.0%
Rehabilitation	2.1%	1.4%	1.4%	1.8%	1.3%
School (K-12)	2.2%	2.0%	1.5%	1.2%	1.3%
Step down unit	2.7%	1.7%	1.4%	1.6%	1.5%
Telemetry	*	4.5%	4.2%	3.0%	3.5%
Multiple area	1.4%	2.0%	2.0%	1.3%	0.8%
Endoscopic	*	0.1%	*	*	0.2%
Radiology	*	0.2%	*	*	0.6%
Orthopedics	*	0.2%	*	*	1.0%
Other	14.5%	2.9%	5.8%	7.0%	5.0%
Number of cases	3,812	4,100	4,633	4,005	4,040

* 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.

32. What is your experience with the information systems in your **principal nursing position**?

	2006	2008	2010	2012	2014
All systems work well	13.3%	11.4%	15.1%	15.3%	18.0%
Systems are generally helpful, but have some flaws	51.4%	56.4%	57.2%	55.0%	59.0%
Systems have problems that affect my work	16.8%	18.6%	15.4%	17.4%	18.0%
Systems interfere with my delivery of care	6.4%	6.0%	3.4%	4.7%	4.9%
No system	12.1%	7.6%	8.9%	7.6%	0.1%
Number of cases	3,751	3,972	4,600	3,971	3,294

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	2012	2014
Less than 25,000	3.7%	2.9%	3.1%	3.5%	3.3%
25,000 to 49,999	12.9%	9.3%	7.4%	6.9%	6.2%
50,000 to 74,999	41.0%	32.3%	29.1%	23.4%	21.1%
75,000 to 99,999	30.9%	34.7%	33.4%	31.5%	31.8%
100,000 to 124,999	9.4%	15.4%	19.0%	23.8%	24.2%
over 125,000	2.1%	5.4%	8.0%	10.9%	13.4%
Number of cases	3,567	3,711	3,707	3,692	3,824

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

34. Does your compensation from your **principal position** include:

	2008	2010	2012	2014
Retirement Plan	84.8%	84.2%	85.1%	87.3%
Personal Health insurance	83.6%	84.5%	87.6%	88.1%
Dental Insurance	88.5%	88.6%	88.5%	87.3%
Family Health Insurance	70.0%	68.7%	70.7%	71.0%
Tuition Reimbursement	*	*	43.2%	44.7%
Paid Time Off for Education	*	*	20.2%	20.7%

* Question was not asked in the 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:

This question was asked about current position, only for those working as nurses, in 2010 through 2014.

	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						
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied	Does not Apply	Number of cases
Your job overall	0.9%	5.1%	7.1%	47.8%	39.1%	0.1%	4,657
Your salary	1.4%	11.9%	11.5%	47.6%	27.4%	0.2%	4,666
Employee benefits	2.3%	10.1%	12.7%	41.7%	27.2%	6.0%	4,613
Adequacy of RN skill level where you work	0.7%	6.3%	10.2%	48.9%	32.0%	1.9%	4,665
Adequacy of the number of RNs where you work	3.0%	17.1%	13.2%	40.6%	22.5%	3.5%	4,666
Adequacy of clerical support services	4.2%	18.6%	17.5%	40.7%	16.5%	2.5%	4,663
Non-nursing tasks required	3.9%	17.0%	27.8%	35.9%	8.7%	6.7%	4,617
Amount of paperwork required	9.9%	27.9%	20.5%	32.9%	7.4%	1.5%	4,648
Your workload	4.2%	17.9%	18.0%	47.2%	12.4%	0.3%	4,664
Physical work environment	2.8%	11.8%	16.3%	49.1%	19.4%	0.7%	4,676
Work schedule	1.2%	5.9%	9.1%	47.9%	35.8%	0.2%	4,679
Job security	2.5%	7.5%	12.2%	45.5%	31.8%	0.6%	4,673
Opportunities for advancement	3.2%	14.0%	23.1%	38.4%	17.2%	4.0%	4,664
Support from other nurses you work with	1.5%	5.9%	11.0%	42.2%	36.4%	3.0%	4,679
Teamwork between coworkers and yourself	1.5%	5.7%	9.8%	41.2%	40.3%	1.4%	4,687
Leadership from your nursing administration	9.0%	19.9%	17.4%	32.1%	17.1%	4.5%	4,678
Relations with physicians	1.3%	6.1%	16.0%	48.5%	24.8%	3.3%	4,683
Relations with other non-nursing staff	0.4%	3.0%	11.2%	56.7%	27.6%	1.2%	4,682
Relations with agency/registry nurses	0.2%	2.3%	18.5%	32.8%	7.9%	38.4%	4,653
Interaction with patients	0.3%	1.1%	6.5%	45.3%	41.9%	4.9%	4,680
Time available for patient education	3.5%	19.4%	15.8%	39.4%	14.8%	7.0%	4,684
Involvement in policy/management decisions	6.5%	20.5%	27.2%	28.9%	10.5%	6.4%	4,651
Opportunities to use your skills	1.0%	5.6%	10.2%	52.4%	30.5%	0.4%	4,628
Opportunities to learn new skills	2.1%	11.5%	16.0%	45.1%	24.6%	0.8%	4,642
Quality of preceptor and mentor programs	4.3%	13.2%	20.8%	32.6%	14.3%	14.9%	4,640
Employer-supported educational opportunities	6.3%	15.7%	17.7%	38.1%	18.7%	3.5%	4,655
Quality of patient care where you work	0.7%	5.8%	12.6%	45.8%	31.4%	3.8%	4,662
Feeling that work is meaningful	1.1%	3.9%	9.5%	41.7%	43.6%	0.2%	4,628
Recognition for a job well done	7.2%	16.6%	19.1%	36.2%	20.5%	0.4%	4,591

Note: 2010 total potential number of cases=4,726. Rows might not total 100% due to rounding. In 2010-2014 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 represented only employed RNs. Data are weighted to represent all RNs with active licenses. Rows might not total 100% due to rounding

	2012						Number of cases
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied	Does not Apply	
Your job overall	1.3%	5.4%	8.2%	47.9%	37.1%	0.0%	3,987
Your salary	2.2%	10.4%	12.9%	45.1%	29.1%	0.2%	4,027
Employee benefits	3.1%	10.0%	13.3%	39.1%	28.2%	6.3%	3,771
Adequacy of RN skill level where you work	1.0%	5.1%	11.4%	48.7%	32.3%	1.6%	4,025
Adequacy of the number of RNs where you work	3.8%	17.2%	14.0%	41.0%	20.8%	3.3%	3,989
Adequacy of clerical support services	4.2%	17.5%	18.6%	40.3%	16.5%	3.0%	4,025
Non-nursing tasks required	3.9%	16.7%	27.3%	36.5%	9.5%	6.1%	3,949
Amount of paperwork required	8.5%	26.1%	23.5%	33.2%	7.3%	1.4%	4,015
Your workload	4.8%	19.5%	18.2%	45.0%	12.4%	0.2%	3,979
Physical work environment	2.8%	11.9%	19.1%	46.8%	18.8%	0.6%	4,022
Your IT system	5.1%	14.7%	24.2%	39.4%	12.1%	4.6%	3,958
Work schedule	1.7%	6.5%	10.6%	47.4%	33.6%	0.3%	4,033
Job security	2.2%	7.0%	15.5%	44.7%	29.9%	0.6%	3,979
Opportunities for advancement	4.7%	14.0%	24.3%	36.8%	16.3%	3.9%	4,022
Support from other nurses you work with	1.7%	5.2%	10.8%	45.1%	35.0%	2.2%	4,020
Teamwork between coworkers and yourself	1.5%	5.4%	9.7%	43.9%	38.6%	0.9%	4,033
Leadership from your nursing administration	9.2%	18.1%	18.5%	34.0%	16.1%	4.2%	4,015
Relations with physicians	1.8%	6.0%	16.1%	49.8%	23.3%	3.1%	4,028
Relations with other non-nursing staff	0.5%	2.6%	12.0%	57.8%	25.8%	1.3%	4,019
Relations with agency/registry nurses	0.7%	2.7%	19.0%	31.5%	8.6%	37.6%	3,984
Interaction with patients	0.7%	1.5%	6.0%	45.1%	41.4%	5.3%	3,991
Time available for patient education	3.4%	17.5%	16.7%	38.6%	16.6%	7.3%	4,027
Involvement in policy/management decisions	7.4%	17.6%	27.0%	30.9%	10.7%	6.3%	4,011
Opportunities to use your skills	2.0%	5.9%	10.7%	51.2%	29.7%	0.5%	4,026
Opportunities to learn new skills	3.1%	10.6%	17.8%	44.2%	23.1%	1.2%	3,998
Quality of preceptor and mentor programs	4.6%	12.4%	20.9%	33.4%	14.7%	13.9%	4,021
Employer-supported educational opportunities	7.2%	15.6%	22.7%	34.7%	15.2%	4.6%	4,022
Quality of patient care where you work	1.0%	5.5%	12.3%	46.8%	30.3%	4.1%	4,032
Feeling that work is meaningful	1.0%	5.0%	8.5%	42.5%	42.6%	0.4%	3,929
Recognition for a job well done	6.2%	15.3%	18.5%	38.6%	21.2%	0.3%	4,015

Note: Rows might not total 100% due to rounding. In 2010-2014 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

	2014					
	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied	Number of cases
Your job overall	1.2%	5.1%	8.7%	51.1%	33.9%	4,069
Your salary	2.4%	11.3%	11.6%	47.0%	27.7%	4,068
Employee benefits	3.3%	9.2%	14.0%	44.3%	29.1%	3,751
Adequacy of RN skill level where you work	0.8%	5.3%	11.1%	54.1%	28.7%	3,956
Adequacy of the number of RNs where you work	4.8%	21.0%	15.9%	40.7%	17.6%	3,915
Adequacy of clerical support services	5.1%	18.1%	20.1%	43.5%	13.2%	3,943
Non-nursing tasks required	3.7%	16.8%	31.9%	39.6%	8.0%	3,727
Amount of paperwork required	6.3%	22.6%	23.1%	41.1%	6.9%	3,895
Your workload	4.7%	18.7%	19.8%	45.5%	11.3%	4,047
Physical work environment	3.1%	12.1%	18.1%	49.8%	16.9%	4,048
Work schedule	1.2%	6.4%	11.3%	54.0%	27.2%	4,020
Job security	2.1%	7.4%	13.6%	48.3%	28.6%	4,059
Opportunities for advancement	4.2%	13.2%	24.2%	40.0%	18.5%	3,912
Support from other nurses you work with	2.6%	7.1%	15.8%	47.8%	26.8%	3,962
Teamwork between coworkers and yourself	1.6%	5.0%	11.1%	48.2%	34.2%	4,035
Leadership from your nursing administration	7.8%	16.2%	17.0%	38.1%	20.9%	3,965
Involvement in patient care decisions	3.9%	8.2%	16.4%	50.9%	20.5%	3,868
Relations with physicians	1.1%	5.1%	14.9%	53.1%	25.8%	3,932
Relations with other non-nursing staff	0.6%	2.4%	10.5%	59.9%	26.7%	4,014
Relations with agency/registry nurses	0.7%	3.5%	27.2%	55.7%	12.8%	2,519
Interaction with patients	0.3%	1.4%	6.3%	53.3%	38.8%	3,852
Time available for patient education	3.0%	18.2%	19.4%	43.7%	15.7%	3,753
Involvement in policy/management decisions	8.0%	20.1%	30.8%	31.7%	9.5%	3,780
Opportunities to use your skills	1.0%	5.3%	11.0%	53.9%	28.8%	4,034
Opportunities to learn new skills	2.3%	11.3%	18.8%	46.4%	21.2%	3,992
Quality of preceptor and mentor programs	5.3%	15.9%	27.6%	37.4%	13.7%	3,399
Employer-supported educational opportunities	6.1%	19.1%	23.9%	37.2%	13.7%	3,840
Quality of patient care where you work	1.2%	6.2%	12.5%	53.0%	27.0%	3,889
Feeling that work is meaningful	1.2%	5.2%	9.3%	45.4%	38.8%	4,062
Recognition for a job well done	7.0%	15.9%	19.9%	38.1%	19.0%	4,049

Note: Rows might not total 100% due to rounding. In 2010-2014 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	2012	2014
No	82.0%	82.2%	82.7%	84.9%	85.6%
Yes	18.0%	17.8%	17.3%	15.1%	14.4%
Number of cases	3,826	4,047	4,628	4,031	4,086

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	2012	2014
One	76.7%	80.3%	75.6%	76.7%	75.6%
Two	20.9%	18.7%	21.3%	19.8%	20.9%
Three or more	2.4%	1.0%	*	*	*
Three	*	*	2.2%	1.8%	3.0%
Four or more	*	*	0.8%	1.7%	0.3%
Number of cases	627	652	696	548	529

* 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.

38. In your other **nursing** positions, are you...

	2006	2008	2010	2012	2014
Regular employee	72.0%	73.7%	77.1%	73.7%	72.5%
Employed through a temporary service agency	17.4%	15.3%	13.3%	8.7%	14.7%
Self-employed	17.1%	14.1%	11.4%	16.5%	14.1%
Travel nurse or employed through a travel agency	*	*	2.5%	2.1%	1.9%
Number of cases	*	*	668	537	515

* 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	2012	2014
Hospital staff	45.2%	44.0%	40.4%	37.5%	37.9%
Public health/community health	2.1%	1.1%	1.4%	2.5%	1.9%
Long Term Acute Care	*	2.0%	2.5%	3.2%	0.6%
School Health	*	*	1.4%	1.8%	1.3%
Nursing home/skilled nursing facility staff	5.7%	6.7%	6.5%	5.6%	5.8%
Mental health/substance abuse	3.4%	3.1%	3.2%	2.5%	4.5%
Home health or hospice	9.4%	7.4%	7.6%	11.1%	8.9%
Telehealth/telenursing	*	*	2.0%	2.1%	1.4%
Teaching health professions/nursing students	11.0%	9.4%	11.4%	10.7%	12.4%
Ambulatory care, school health, occupational health	9.2%	8.9%	15.5%	13.1%	14.4%
Self-Employed	5.9%	3.7%	3.8%	3.9%	3.1%
Other	31.1%	23.1%	17.2%	16.1%	18.4%
Number of cases	*	*	690	539	528

* 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	2010		2012		2014	
	Additional Job 1	Additional Job 2	Additional Job 1	Additional Job 2	Additional Job 1	Additional Job 2
8 or less	35.8%	51.2%	23.3%	42.3%	37.8%	70.0%
9-16	41.8%	44.0%	57.1%	32.0%	38.7%	11.9%
17-24	15.7%	4.5%	13.4%	20.4%	15.8%	14.3%
25-32	3.5%	0.3%	3.3%	4.7%	2.4%	3.2%
33-40	3.0%	0.0%	2.3%	0.7%	5.1%	0.5%
More than 40	0.2%	0.0%	0.7%	0.0%	0.3%	0.0%
Number of cases	629	80	458	45	472	60

There were not enough respondents to report data for 3rd or more jobs.

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

Months worked per year	2010		2012		2014	
	Additional Job 1	Additional Job 2	Additional Job 1	Additional Job 2	Additional Job 1	Additional Job 2
Less than 4	5.9%	16.2%	8.8%	6.3%	6.3%	19.7%
4-6	6.5%	4.6%	8.0%	2.7%	9.4%	8.2%
7-9	7.8%	4.9%	5.0%	18.4%	6.3%	10.4%
10-12	79.8%	74.3%	78.2%	72.6%	78.0%	61.7%
Number of cases	573	77	436	40	420	54

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

Estimated pre-tax annual income

Job 1	2006	2008	2010	2012	2014
Less than 25,000	72.5%	68.3%	97.5%	70.3%	63.8%
25,000 to 49,999	18.5%	23.0%	1.7%	20.4%	22.6%
50,000 to 74,999	6.9%	7.0%	0.9%	6.4%	7.6%
75,000 to 99,999	1.6%	1.0%	0.0%	2.3%	3.4%
100,000 to 124,999	0.5%	0.6%	0.0%	0.6%	2.3%
Over 125,0000	0.1%	0.1%	0.0%	0.0%	0.3%
Number of cases	582	549	521	386	405

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

Job 2	2006	2008	2010	2012	2014
Less than 25,000	87.0%	100%	98.6%	83.1%	73.4%
25,000 to 49,999	6.4%	0.0%	1.4%	11.6%	10.8%
50,000 to 74,999	3.6%	0.0%	0.0%	5.3%	14.7%
75,000 to 99,999	1.3%	0.0%	0.0%	0.0%	0.0%
100,000 to 124,999	0.0%	0.0%	0.0%	0.0%	1.0%
Over 125,0000	1.7%	0.0%	0.0%	0.0%	0.0%
Number of cases	110	3	65	42	49

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

41. Are you doing volunteer work as an RN or APRN (working in an unpaid capacity as an RN or APRN)?

Are you in an internship/transition residency program?

Questions first asked in 2012.

	2012	2014
Yes, volunteering	9.0%	9.0%
Number of cases	3,316	4,014
If volunteering, in internship/residency	7.8%	4.6%
Number of cases	375	512

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

42. Are you currently employed through a temporary agency, traveling agency, or registry?

	2006	2008	2010	2012	2014
Temporary agency or registry	3.4%	2.9%	3.3%	2.2%	2.1%
Traveling agency	1.2%	1.2%	0.6%	0.6%	0.4%
Neither temporary nor traveling agency	95.4%	95.9%	96.3%	97.4%	97.5%
Number of cases	3,820	4,032	4,500	3,907	5,047

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

43. Please indicate which of the following reasons describe why you work for a temporary agency, traveling agency, or registry.

	2006	2008	2010	2012	2014
Wages	59.5%	58.6%	28.0%	33.3%	26.8%
Control of work location	54.1%	39.8%	31.1%	24.3%	18.5%
Maintain skills/get experience	27.3%	22.5%	25.9%	36.0%	27.3%
Unable to find a permanent RN job	*	*	13.8%	30.7%	17.9%
Unable to find enough hours at my primary job	*	*	*	*	4.0%
Benefits	5.7%	7.9%	1.1%	0.0%	0.2%
Control of work conditions	26.1%	24.2%	9.3%	16.4%	7.8%
Waiting for a desirable permanent position	12.8%	16.1%	16.5%	24.9%	11.9%
Control of schedule	57.2%	56.9%	52.6%	39.8%	38.5%
Supplemental income	36.6%	42.6%	46.2%	45.1%	35.7%
Travel/see other parts of the country	15.4%	15.8%	6.7%	6.8%	10.0%
Other	16.1%	12.9%	5.3%	2.9%	15.9%
Number of cases	114	125	121	78	104

* 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

44. Have you ever stopped working as a registered nurse for a period of more than one year?

	2006	2008	2010	2012	2014
No	85.1%	87.6%	88.5%	88.1%	88.9%
Yes	14.9%	12.4%	11.5%	11.9%	11.1%
Number of cases	3,855	4,117	4,561	3,937	4,082

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

45. How long did you stop working as a registered nurse?

	2006	2008	2010	2012	2014
Less than 5 years	62.3%	62.9%	59.4%	72.4%	81.4%
5 to 9 years	19.8%	20.5%	21.0%	16.6%	13.5%
10 to 14 years	10.3%	11.9%	10.6%	7.0%	4.5%
15 or more years	7.7%	4.7%	8.9%	4.1%	0.7%
Number of cases	556	567	612	511	242

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

46. 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	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					
	Not at all Important	Somewhat Important	Important	Very important	Does not Apply	Number of cases
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

	2012					Number of cases
	Not at all Important	Somewhat Important	Important	Very important	Does not Apply	
Could not find work as an RN	19.0%	7.4%	6.5%	13.0%	54.2%	444
Child care responsibilities	5.4%	2.5%	6.4%	57.4%	28.3%	476
Other family responsibilities	8.1%	4.7%	11.4%	43.4%	32.5%	448
Moving to a different area	11.5%	2.8%	12.2%	28.2%	45.3%	459
Stress on the job	15.1%	6.4%	7.6%	22.7%	48.1%	445
Job-related injury or illness	17.8%	0.7%	1.3%	13.5%	66.8%	446
Non-job-related injury or illness	17.9%	2.6%	3.8%	8.0%	67.7%	443
Salary	20.0%	4.6%	4.7%	13.3%	57.4%	445
Dissatisfied with benefits	20.8%	2.9%	2.3%	9.7%	64.3%	441
Laid off	14.0%	1.7%	5.3%	8.3%	70.7%	486
Return to school	13.1%	1.0%	3.4%	13.8%	68.7%	443
Travel	14.8%	4.3%	7.7%	8.4%	64.9%	440
To try another occupation	14.7%	3.1%	7.3%	15.8%	59.1%	444
Other dissatisfactions with your job	15.9%	2.8%	6.1%	17.7%	57.6%	442
Dissatisfaction with the nursing profession	14.0%	5.2%	5.9%	11.3%	63.7%	445
Other	8.3%	0.0%	2.9%	18.6%	70.1%	195

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

	2014				
	Not at all Important	Somewhat Important	Important	Very important	Number of cases
Could not find work as an RN	80.6%	3.7%	3.5%	12.3%	402
Child care responsibilities	33.5%	0.6%	3.0%	63.1%	432
Other family responsibilities	42.6%	1.3%	12.0%	44.1%	409
Moving to a different area	59.3%	2.4%	9.0%	29.3%	416
Stress on the job	67.9%	10.8%	8.4%	13.0%	403
Job-related injury or illness	85.2%	3.1%	2.0%	9.7%	401
Non-job-related injury or illness	84.3%	4.3%	3.8%	7.7%	406
Salary	80.7%	2.9%	9.0%	7.4%	399
Dissatisfied with benefits	89.1%	2.1%	6.3%	2.5%	395
Laid off	89.0%	2.5%	2.7%	5.8%	403
Return to school	85.5%	1.5%	2.5%	10.5%	406
Travel	86.0%	3.5%	4.9%	5.6%	403
To try another occupation	76.0%	5.5%	7.9%	10.6%	402
Other dissatisfactions with your job	74.0%	7.0%	7.0%	11.9%	398
Dissatisfaction with the nursing profession	75.6%	8.0%	6.5%	10.0%	400
Other	71.5%	0.0%	11.1%	17.4%	267

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

47. What was the last year you worked for pay as a registered nurse?

	2006	2008	2010	2012	2014
One year ago or less	32.3%	22.1%	29.8%	42.0%	34.7%
2-4 years ago	27.8%	27.2%	24.3%	18.6%	22.5%
5-9 years ago	18.6%	21.4%	26.0%	17.3%	17.2%
10-14 years	11.5%	13.4%	10.1%	9.6%	9.8%
15-24 years	8.2%	12.5%	7.0%	8.9%	11.9%
25 or more years	1.7%	3.5%	2.8%	3.7%	3.9%
Number of cases	568	617	714	743	774

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

48. 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. Data are weighted to represent all RNs with active licenses

	2008				2010					Number of cases
	Not at all important/Does not	Somewhat important	Important	Very important	Not at all Important	Somewhat Important	Important	Very Important	Does not Apply	
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. Data are weighted to represent all RNs with active licenses

	2012					Number of cases
	Not at all Important	Somewhat Important	Important	Very Important	Does not Apply	
Cannot find any work as an RN	18.6%	4.0%	6.0%	22.5%	48.9%	632
Difficult to find desired nursing position	17.5%	8.3%	9.1%	26.9%	38.1%	644
Retired	8.7%	1.8%	6.6%	14.5%	68.4%	675
Childcare responsibilities	9.9%	4.4%	4.1%	24.3%	57.2%	648
Other family responsibilities	7.5%	11.4%	5.9%	26.1%	49.1%	644
Moving to a different area	15.1%	4.3%	3.1%	13.1%	64.5%	643
Stress on the job	12.5%	10.2%	11.5%	26.5%	39.3%	644
Job-related illness/injury	14.1%	3.2%	4.5%	12.3%	66.0%	645
Non-job-related illness/injury	14.1%	2.7%	4.8%	15.8%	62.6%	648
Salary	18.4%	9.3%	10.8%	15.2%	46.4%	642
Dissatisfied with benefits	17.2%	6.8%	8.3%	8.6%	59.0%	633
Other dissatisfaction with your job	13.3%	9.1%	14.2%	17.9%	45.5%	644
Dissatisfaction with the nursing profession	15.9%	12.0%	7.7%	15.2%	49.2%	636
Travel	19.9%	2.6%	6.6%	11.3%	59.6%	643
Wanted to try another occupation	13.5%	6.5%	9.5%	13.9%	56.6%	639
Inconvenient schedules in nursing jobs	16.7%	8.7%	9.8%	20.1%	44.7%	644
Returned to school	10.4%	3.6%	3.3%	15.4%	67.3%	635
Laid off	12.3%	0.3%	1.8%	6.8%	78.8%	644
Other	2.0%	0.3%	9.6%	40.5%	47.6%	295

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

	2014			
	Not at all Important	Somewhat Important	Important	Very Important
Cannot find any work as an RN	65.8%	5.5%	5.7%	23.0%
Difficult to find desired nursing position	56.0%	7.7%	9.1%	27.2%
Retired	76.0%	2.3%	3.9%	17.7%
Childcare responsibilities	68.9%	2.0%	4.6%	24.6%
Other family responsibilities	59.4%	8.5%	11.4%	20.7%
Moving to a different area	74.3%	5.6%	6.3%	13.8%
Stress on the job	56.3%	10.2%	12.5%	21.0%
Job-related illness/injury	80.5%	2.9%	6.1%	10.5%
Non-job-related illness/injury	84.9%	1.7%	3.7%	9.7%
Salary	63.9%	10.4%	10.5%	15.2%
Dissatisfied with benefits	75.3%	5.9%	10.6%	8.2%
Other dissatisfaction with your job	66.4%	8.4%	10.9%	14.4%
Dissatisfaction with the nursing profession	70.7%	12.3%	8.5%	8.5%
Travel	80.7%	7.9%	7.8%	3.6%
Wanted to try another occupation	79.4%	4.1%	7.0%	9.5%
Inconvenient schedules in nursing jobs	67.0%	10.7%	8.1%	14.2%
Returned to school	85.6%	1.9%	4.5%	8.0%
Laid off	90.5%	2.8%	1.7%	5.0%
Other	77.7%	0.0%	8.0%	14.3%
Number of cases	836			

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

49. (For those not working) Are you doing volunteer work as an RN or APRN (working in an unpaid capacity as an RN or APRN)?

Are you in an internship/transition residency program?

Questions first asked in 2012.

	2012	2014
Yes, volunteering	15.2%	15.5%
Number of cases	771	794
If volunteering, in internship/residency	7.2%	12.3%
Number of cases	225	135

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

50. Which of the following best describes your current intentions regarding work in nursing?

	2006	2008	2010	2012	2014
Currently seeking employment in nursing	4.7%	4.4%	20.3%	31.8%	24.6%
Plan to return to nursing in the future	30.1%	19.8%	14.1%	19.8%	21.8%
Retired	15.6	33.7	32.8%	16.3%	22.1%
Definitely will not return to nursing but not retired	16.0%	12.9%	6.8%	7.4%	6.7%
Undecided at this time	33.7%	29.1%	26.1%	24.8%	24.8%
Number of cases	173	682	782	762	808

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

50a. (For those who plan to return to nursing) How soon?

	2012	2014
Less than one year	50.3%	45.3%
1-2 years	38.7%	36.6%
3-4 years	2.6%	10.6%
5 or more years	8.4%	7.5%
Number of cases	86	125

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

51. Would any of the following factors affect your decision to return to nursing?

	2006			
	Not at all important/Does not	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					
	Not at all important/Does not	Somewhat important	Important	Very Important	Not at all important	Somewhat important	Important	Very important	Does not apply	Number of cases
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 and 2012, 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.

	2012					Number of cases
	Not at all important	Somewhat important	Important	Very important	Does not apply	
Affordable childcare at or near work	32.5%	3.6%	7.4%	8.2%	48.3%	156
Flexible work hours	6.5%	7.7%	26.5%	50.8%	8.5%	160
Modified physical requirements of job	19.4%	1.6%	25.6%	27.4%	26.0%	154
Higher nursing salary	10.4%	16.6%	32.2%	20.4%	20.5%	157
Better retirement benefits	16.4%	21.3%	18.9%	23.7%	19.7%	153
Better health benefits	16.9%	14.6%	27.0%	22.2%	19.3%	156
Better support from nursing management	4.3%	16.3%	31.0%	34.5%	14.0%	155
More support from other nurses	8.0%	15.2%	34.2%	27.6%	15.1%	156
Better nurse to patient ratios	9.9%	7.5%	20.6%	45.6%	16.5%	155
Adequate support staff for non-nursing tasks	6.7%	10.1%	27.1%	43.4%	12.7%	156
Availability of re-entry programs/mentoring	8.4%	8.8%	9.8%	63.7%	9.2%	159
Improvement in my health status	9.5%	9.8%	3.1%	25.8%	52.0%	158
Other	19.6%	0.0%	3.3%	43.0%	34.1%	57

Note: In 2010 and 2012, 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.

	2014			
	Not at all important	Somewhat important	Important	Very important
Affordable childcare at or near work	79.9%	8.9%	3.1%	8.0%
Flexible work hours	26.0%	10.6%	14.2%	49.2%
Modified physical requirements of job	51.2%	6.9%	15.2%	26.7%
Higher nursing salary	38.9%	14.5%	19.7%	26.8%
Better retirement benefits	44.6%	8.8%	16.1%	30.5%
Better health benefits	41.7%	8.6%	19.2%	30.4%
Better support from nursing management	33.6%	4.9%	23.7%	37.8%
More support from other nurses	37.2%	8.3%	26.3%	28.2%
Better nurse to patient ratios	34.9%	5.8%	18.1%	41.2%
Adequate support staff for non-nursing tasks	30.7%	5.7%	26.5%	37.1%
Availability of re-entry programs/mentoring	20.6%	9.7%	14.9%	54.9%
Improvement in my health status	64.3%	4.4%	8.1%	23.2%
Other	85.1%	0.0%	5.0%	9.8%
Number of cases	169			

Note: In 2010, 2012, and 2014, 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.

52. Are you currently employed outside nursing?

	2006	2008	2010	2012	2014
No	66.1%	74.6%	73.1%	93.4%	94.1%
Yes	33.9%	25.4%	26.9%	6.6%	6.0%
Number of cases	641	682	802	4,761	4,887

Note: Starting in 2012, this question was asked of all RNs. In prior years, it was asked only of RNs who were not employed in nursing. Data are weighted to represent all RNs with active licenses.

53. Does your position utilize any of your nursing knowledge?

	2006	2008	2010	2012	2014
No	27.7%	17.2%	30.4%	24.8%	30.1%
Yes	72.3%	82.8%	69.6%	75.2%	69.9%
Number of cases	182	161	206	303	277

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

54. Please indicate the field(s) of your work position(s) outside nursing. (Check all that apply.)

	2010	2012	2014
Health-related services	45.3%	55.4%	47.6%
Pharmaceutical or biotech services	*	*	5.8%
Retail sales & services	11.5%	9.9%	15.2%
Education	12.2%	11.8%	15.7%
Financial, accounting, & insurance services	8.6%	7.3%	7.4%
Consulting	5.7%	4.5%	7.0%
Other	39.4%	29.0%	22.8%
Number of cases	203	296	299

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

55. Please indicate the following for work positions outside of nursing.

Hours Worked per Week	2010		2012		2014	
	Position #1	Position #2	Position #1	Position #2	Position #1	Position #2
8 or fewer	0.0%	0.0%	18.2%	36.7%	23.8%	42.1%
9-16	15.2%	19.0%	18.3%	19.1%	17.4%	5.1%
17-24	13.3%	21.1%	18.1%	12.7%	12.6%	15.7%
25-32	10.7%	7.0%	6.4%	2.1%	10.1%	0.9%
33-40	40.0%	32.5%	28.2%	23.0%	25.3%	30.2%
41-48	5.9%	7.4%	1.3%	0.0%	2.5%	0.0%
Over 48	14.8%	13.0%	9.5%	6.3%	8.3%	6.1%
Number of cases	161	21	254	57	245	31

Note: Not enough observations for the 3rd position to report data. Data are weighted to represent all RNs with active licenses.

Estimated annual pre-tax income	2010		2012		2014	
	Position #1	Position #2	Position #1	Position #2	Position #1	Position #2
Less than 25,000	38.1%	47.3%	72.7%	87.6%	47.7%	57.6%
25,000 to 49,999	16.9%	15.8%	8.2%	12.4%	14.5%	2.0%
50,000 to 74,999	16.0%	1.6%	10.3%	0.0%	6.9%	10.0%
75,000 to 99,999	6.0%	27.7%	2.5%	0.0%	9.2%	8.4%
100,000 to 124,999	10.2%	2.7%	0.7%	0.0%	10.2%	9.3%
Over 125,000	13.0%	4.9%	5.6%	0.0%	11.5%	12.7%
Number of cases	130	26	128	27	214	29

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

56. Have you changed work status, positions or employers in the past year? (Check all that apply.)

Note: Similar content was in one question in 2010

	2010	2012	2014
No change in job, position, or work status	71.5%	73.4%	77.0%
Added second nursing job	*	13.8%	5.3%
Added second non-nursing job	*	1.4%	0.7%
Stopped working second nursing job	*	*	2.6%
Stopped working second non-nursing job	*	*	0.5%
Not working now, but was working earlier this year	9.1%	6.8%	2.1%
Now in an RN job, was not last year	7.8%	6.1%	1.1%
New position with same employer	20.4%	29.5%	6.9%
Same position with different employer	9.5%	14.2%	2.8%
New position with different employer	16.6%	20.2%	6.4%
Other change in job or position	*	18.5%	1.6%
Other change (2010)	18.8%	*	*
Number of cases	1,521	1,230	4,924

* Question was not asked that year.

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

57. Has there been a change in how much you work as an RN in the past year? (Check all that apply.)

Note: Similar content was in one question in 2010

	2010	2012	2014
No change in hours	*	60.8%	62.7%
Did not work as RN last year	*	19.0%	7.7%
Increased hours (general)	20.1%	*	*
Increased hours – employer imposed	*	11.1%	5.2%
Increased hours – my choice	*	29.1%	10.8%
Decreased hours (general)	26.3%	*	*
Decreased hours – employer imposed	*	14.6%	4.9%
Decreased hours – my choice	*	21.5%	11.0%
Other change in hours	*	11.0%	7.5%
Number of cases	1,521	1,870	4,909

* Question was not asked that year.

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

58. How important were each of the following factors in your change in employment or hours worked 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%	1,159
Childcare Responsibilities	11.4%	2.8%	7.2%	22.1%	56.4%	1,177
Other Family Responsibilities	8.0%	7.2%	16.5%	29.2%	39.1%	1,179
Salary	8.5%	8.4%	21.8%	39.8%	21.5%	1,204
Laid off	9.4%	1.8%	3.2%	12.0%	73.5%	1,136
Change in spouse/partner work situation	9.4%	2.8%	7.5%	17.7%	62.6%	1,144
Change in financial status	6.9%	6.7%	13.4%	30.1%	42.9%	1,170
Relocation/moved to a different area	10.2%	2.5%	5.4%	13.7%	68.2%	1,143
Promotion/career advancement	8.6%	4.0%	11.6%	26.8%	49.0%	1,151
Change in my health status	9.4%	4.7%	6.6%	16.0%	63.4%	1,147
Wanted more convenient hours	8.6%	6.0%	13.3%	30.0%	42.2%	1,179
Dissatisfaction with previous position	9.5%	7.6%	10.8%	21.9%	50.2%	1,156
Other	4.1%	0.8%	8.2%	29.5%	57.5%	536

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

	2012					Number of cases
	Not at all important	Somewhat important	Important	Very Important	Does not apply	
Retired	8.8%	2.4%	6.3%	12.2%	70.2%	1,415
Childcare Responsibilities	9.4%	2.7%	6.2%	21.1%	60.6%	1,382
Other Family Responsibilities	7.1%	5.8%	12.5%	34.2%	40.4%	1,379
Salary	6.6%	6.7%	18.8%	40.6%	27.3%	1,390
Laid off	6.9%	0.8%	3.7%	7.6%	81.0%	1,342
Employer reduced hours	6.2%	1.7%	6.7%	16.9%	68.5%	1,354
Change in spouse/partner work situation	6.2%	2.0%	5.5%	15.6%	70.7%	1,348
Change in financial status	5.6%	3.2%	11.2%	31.3%	48.8%	1,369
Relocation/moved to a different area	7.0%	1.1%	4.6%	14.0%	73.3%	1,338
Promotion/career advancement	6.0%	2.9%	8.9%	21.9%	60.3%	1,353
Change in my health status	7.3%	1.7%	7.4%	16.0%	67.6%	1,374
Wanted more convenient hours	6.4%	3.9%	11.3%	25.6%	52.8%	1,370
Dissatisfaction with previous position	7.1%	5.6%	9.2%	18.5%	59.8%	1,351
Other	4.4%	0.6%	7.2%	27.6%	60.3%	625

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

	2014				Number of cases
	Not at all important	Somewhat important	Important	Very Important	
Retired	36.7%	8.5%	16.5%	38.4%	620
Childcare Responsibilities	34.9%	5.4%	12.2%	47.5%	690
Other Family Responsibilities	17.5%	8.3%	22.7%	51.6%	1,002
Salary	14.3%	10.0%	24.5%	51.1%	1,223
Benefits	19.1%	9.2%	22.4%	49.3%	1,032
Laid off	48.5%	3.0%	17.2%	31.3%	331
Employer reduced hours	30.1%	8.3%	20.1%	41.5%	502
Change in spouse/partner work situation	29.4%	5.8%	21.9%	42.8%	523
Change in financial status	17.1%	9.3%	25.7%	48.0%	779
Relocation/moved to a different area	36.7%	5.0%	19.0%	39.3%	460
Promotion/career advancement	25.6%	5.5%	22.9%	46.0%	663
Change in my health status	27.1%	8.6%	20.9%	43.4%	561
Wanted more convenient hours	20.1%	6.0%	22.0%	52.0%	877
Dissatisfaction with previous position	21.2%	11.7%	25.8%	41.3%	753
Stress on the job	12.4%	9.9%	25.6%	52.0%	1,067
Desire to use my skills more/learn new skills	14.9%	6.1%	25.5%	53.5%	1,059
Other	5.6%	2.9%	34.2%	57.3%	306

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

59. Do you reside outside California?

This question was excluded as it did not pertain to California Residents

60. 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

61. 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

62. 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

63. Gender

	2006	2008	2010	2012	2014
Male	9.4%	13.8%	10.1%	11.1%	11.1%
Female	90.6%	86.2%	89.9%	88.9%	89.0%
Number of cases	4,477	4,890	5,480	4,894	5,000

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

64. Year of Birth (converted to age groups)

	2006	2008	2010	2012	2014
Under 30 years	7.5%	6.1%	9.3%	9.3%	7.4%
30-34 years	10.3%	9.3%	9.4%	10.6%	11.1%
35-39 years	10.6%	11.5%	11.2%	12.0%	10.3%
40-44 years	12.3%	11.2%	12.1%	11.6%	13.1%
45-49 years	13.9%	12.3%	11.2%	10.2%	10.1%
50-54 years	19.1%	17.0%	15.6%	13.5%	11.8%
55-59 years	12.6%	14.1%	13.2%	13.3%	13.5%
60-64 years	7.7%	9.8%	10.2%	11.2%	11.6%
65 years and older	6.1%	8.8%	7.9%	8.3%	11.1%
Number of cases	4,442	4,890	5,551	4,967	5,047

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

65. Country of birth

First asked in 2012.

	2012	2014
Canada	1.1%	1.2%
China	0.7%	0.6%
Germany	0.5%	0.3%
India	1.1%	1.0%
Japan	0.5%	0.5%
Korea	1.6%	1.5%
Mexico	1.9%	1.4%
Philippines	17.8%	17.8%
United States	66.3%	65.8%
Vietnam	0.6%	0.9%
Number of cases	4,840	4,946

Note: Only countries with greater than 0.5% reported here. Data are weighted to represent all RNs with active licenses.

66. Marital status

	2006	2008	2010	2012	2014
Never Married	11.9%	13.0%	15.2%	17.8%	17.7%
Married/Domestic Partnership	69.8%	68.2%	67.7%	67.4%	67.3%
Separated/Divorced	14.9%	15.1%	14.8%	*	*
Widowed	3.4%	3.6%	2.3%	*	*
Separated/Divorced/Widowed	*	*	*	14.8%	15.0%
Number of cases	4,494	4,748	5,441	4,876	4,983

* Item was not asked in 2012.

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

67. What is your ethnic/racial background (select the **one** with which you most strongly identify)?

Note: Questions was significantly changed in 2012.

	2006	2008	2010	2012	2014
African-American	4.2%	4.1%	4.3%	5.1%	4.9%
White	63.1%	58.6%	55.8%	54.9%	54.1%
Native American/Alaskan Native	0.2%	0.4%	0.3%	0.3%	0.5%
Other or Mixed	*	*	*	3.0%	6.2%
Asian Indian	1.0%	1.3%	1.4%	*	
Asian, not Filipino or Indian	6.2%	7.1%	7.7%	*	
Cambodian				0.0%	0.0%
Chinese				2.9%	3.1%
Indian				1.5%	1.2%
Indonesian				0.4%	0.2%
Japanese				1.3%	1.0%
Korean				2.0%	1.6%
Laotian/Hmong				0.0%	0.2%
Pakistani				0.0%	0.0%
Thai				0.3%	0.4%
Vietnamese				0.8%	1.0%
Latino	6.1%	7.5%	8.0%	*	*
Central American				0.7%	0.9%
South American				0.6%	0.4%
Cuban				0.1%	0.2%
Mexican				4.6%	4.6%
Other Hispanic				0.7%	0.8%
Fijian				0.0%	0.0%
Filipino	16.3%	18.0%	19.2%	20.1%	18.6%
Guamanian				0.0%	0.0%
Native Hawaiian	0.2%	0.1%	0.2%	0.1%	0.0%
Samoan				0.1%	0.0%
Tongan				0.0%	0.0%
Other Pacific Islander				0.2%	0.1%
Mixed race	2.3%	2.0%	2.6%	*	*
Other	0.4%	0.8%	0.5%	*	*
Number of cases	4,480	4,726	5,417	4,797	4,961

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

68. Other than English, what languages do you speak fluently?

	2006	2008	2010	2012	2014
No other language	*	*	*	59.7%	57.8%
Spanish	10.3%	11.4%	30.3%	11.6%	11.9%
Korean	1.1%	1.1%	3.7%	1.9%	1.6%
Vietnamese	0.5%	0.6%	2.0%	0.9%	1.0%
Tagalog	13.6%	*	*	*	*
Tagalog or other Filipino language	*	16.6%	44.0%	18.0%	18.5%
French	*	*	4.1%	1.0%	1.6%
Hindi	0.8%	*	*	*	*
Hindi or other South Asian language	*	1.3%	3.6%	1.5%	1.5%
Mandarin	1.2%	2.2%	4.3%	1.5%	1.5%
Cantonese	0.8%	1.5%	2.6%	1.4%	1.0%
Other Chinese dialect	*	*	*	0.7%	0.5%
Other	8.0%	8.0%	15.3%	6.4%	6.9%
Number of cases	*	*	1,777	4,711	4,777

* Question was not asked in this survey year. In 2010, data are only for those who speak another language.
 Note: Respondents could report fluency in multiple languages. Data are weighted to represent all RNs with active licenses.

69. Do you have children living at home with you?

	2006	2008	2010	2012	2014
No	48.0%	50.6%	48.9%	49.9%	49.7%
Yes	52.0%	49.4%	51.1%	50.1%	50.3%
Number of cases	4,500	4,765	5,449	4,884	4,985

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

69 a-e. If Yes, how many are:

	2006					2008				
	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	81.7%	82.3%	66.1%	61.7%	57.6%	83.9%	85.5%	70.4%	64.0%	58.6%
1 child	17.4%	16.7%	29.6%	32.6%	39.6%	14.2%	12.9%	21.4%	27.0%	32.3%
2 children	0.9%	1.0%	4.1%	5.1%	2.2%	1.6%	1.6%	7.2%	7.9%	7.6%
3 or more children	0.0%	0.0%	0.2%	0.7%	0.6%	0.3%	0.1%	0.9%	1.1%	1.5%
Number of cases	1,481					2,189				

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

	2010					2012				
	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	81.6%	84.7%	68.1%	70.5%	60.8%	72.7%	74.9%	92.1%	87.3%	43.0%
1 child	16.4%	12.9%	22.0%	21.8%	29.1%	24.6%	22.1%	6.1%	9.7%	42.6%
2 children	2.1%	2.5%	8.7%	6.8%	8.4%	2.7%	2.9%	1.8%	2.9%	12.4%
3 or more children	0.0%	0.0%	1.2%	0.9%	1.8%	0.0%	0.1%	0.0%	0.2%	1.7%
Number of cases	2,440					1,378				

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

	2014				
	0 to 2 years	3 to 5 years	6 to 12 years	13-18 years	19+ years
0 children	81.8%	82.4%	68.1%	70.7%	58.4%
1 child	16.1%	15.0%	21.4%	21.2%	30.0%
2 children	2.1%	2.5%	8.9%	6.6%	9.5%
3 or more children	0.0%	0.0%	1.6%	1.4%	2.0%
Number of cases	2,230				

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

70. Home Zip Code:

This question was excluded for confidentiality

72. 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	2012	2014
Less than \$30,000	2.0%	1.4%	2.0%	3.3%	1.9%
\$30K-\$44,999	3.0%	2.5%	2.4%	2.8%	2.1%
\$45K-\$59,999	5.5%	3.8%	4.0%	3.4%	3.1%
\$60K-\$74,999	12.4%	10.0%	9.4%	8.8%	6.9%
\$75K-\$99,999	21.8%	19.4%	17.8%	16.5%	17.6%
\$100K-124,999	21.5%	22.3%	21.5%	20.3%	20.4%
\$125K-\$149,999	13.4%	13.0%	13.6%	14.6%	14.3%
\$150K-\$174,999	8.5%	10.8%	10.4%	10.5%	11.3%
\$175K-\$199,999	4.8%	5.8%	6.6%	7.3%	7.4%
\$200K or more	7.2%	11.0%	12.2%	12.8%	15.1%
Number of cases	4,302	4,468	5,028	4,605	4,754

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

73. Approximately what percentage of your **total household** income comes from your nursing job(s)?

	2006	2008	2010	2012	2014
None	*	*	8.4%	9.7%	10.2%
Less than 20 percent	4.1%	3.4%	3.5%	3.4%	3.4%
20 to 39 percent	9.7%	9.3%	7.5%	6.4%	6.9%
40 to 59 percent	23.9%	21.5%	18.5%	17.3%	18.1%
60 to 79 percent	17.7%	19.5%	18.5%	18.2%	18.6%
80 to 99 percent	14.6%	13.9%	12.6%	12.9%	13.5%
100 percent	30.1%	32.5%	31.1%	32.1%	29.3%
Number of cases	3,676	3,983	5,324	4,775	4,905

* 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 Postcard

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 active 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 20 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,
Lela Chu, Project Director
UC San Francisco

Follow-up Postcard

CHECKING IN.

The **California Board of Registered Nursing**, working with the University of California, mailed you a copy of the 2014 RN Survey over 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 active 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 online, **please call me toll-free at 1-877-276-8277** or email me at lela.chu@ucsf.edu. (If you have already mailed your completed questionnaire, please disregard this notice.) Thank you.

Lela Chu, Project Director
UC San Francisco

Final Postcard

LAST CHANCE!

The **California Board of Registered Nursing**, working with the University of California, mailed you a copy of the 2014 RN Survey a month 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 active licenses, to nurses currently working in nursing, those working in other fields, and those who have retired from nursing altogether.

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Lela Chu, Project Manager
UC San Francisco

Letter for Active RNs

XXXXXX XXXXXX
XXXXXXXXXX
XXXXXXXXXX
XXXXXX, CA 94555

Dear XXXXXXXXXXXX;

We are pleased to inform you the Board of Registered Nursing is inviting you to be one of a select group of California nurses to provide the Board with vital information concerning current nursing practice in the state. Only 10,000 of California's estimated 400,000 RNs/APRNs 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 nursing practice. Survey results will be used by the Board to guide public policy and plan for California's future nursing workforce needs. Summary results of the survey will be published on the Board's website in early 2015.

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.

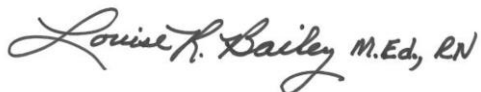
The University of California, San Francisco is conducting the survey for the Board. The attached survey has been sent to RNs/APRNs with active California licenses residing in and outside of California. Completion of the survey should take no more than 20 minutes. The survey may be completed in the attached 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://rnworkforce.ucsf.edu/brn_2014/

Your online USERNAME is: XXXXXXXXXXXX.

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 Lela Chu 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
Executive Officer
California Board of Registered Nursing



California Board of Registered Nursing

Survey of Registered Nurses 2014

Conducted for the Board of Registered Nursing
by the
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.

**CALIFORNIA BOARD OF REGISTERED NURSING
2014 RN SURVEY**

SECTION A: EDUCATION AND LICENSURE INFORMATION

1. From 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 | <input type="checkbox"/> ₇ Doctoral program |
| <input type="checkbox"/> ₃ 30-unit option program (LVN to RN) | <input type="checkbox"/> ₈ Other (Please specify: _____) | |

2. In what state or country did you complete your pre-licensure RN education that qualified you for RN licensure in the United States?

2-letter state code: _____ **OR** Other country: _____

3. In what year did you **graduate** from that program? _ _ _ _

4. **Before** you started your initial RN education, what was the highest level of education you completed?

- | | | |
|---|--|---|
| <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 |

5. **Immediately prior** to starting your initial 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: _____) | |

6. **After** graduating from the initial RN 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"/> _g Other Associate degree (non-nursing)	
<input type="checkbox"/> _c Baccalaureate of Science in Nursing (BSN)		<input type="checkbox"/> _h Other Baccalaureate degree (non-nursing)	
<input type="checkbox"/> _d Master's degree in Nursing (MSN)		<input type="checkbox"/> _i Other Master's degree (non-nursing)	
<input type="checkbox"/> _e Practice-based Doctorate in Nursing (DNP)		<input type="checkbox"/> _j Other Doctoral degree (non-nursing)	
<input type="checkbox"/> _f Research-or education-focused Doctorate in Nursing (PhD, DNSc, etc.)			

7. Are you currently enrolled in a degree program or certification program?

₁ Yes ₂ No —▶ **Skip to Question #10 below.**

8. What is your objective? (**Check all that apply.**)

- | | |
|--|--|
| <input type="checkbox"/> _a Associate degree in Nursing (ADN) | <input type="checkbox"/> _g Non-nursing Associate degree |
| <input type="checkbox"/> _b Baccalaureate of Science in Nursing (BSN) | <input type="checkbox"/> _h Non-nursing Baccalaureate degree |
| <input type="checkbox"/> _c Master's degree in Nursing (MSN) | <input type="checkbox"/> _i Non-nursing Master's degree |
| <input type="checkbox"/> _d Practice-based Doctorate in Nursing (DNP) | <input type="checkbox"/> _j Non-nursing Doctoral degree |
| <input type="checkbox"/> _e Research-or education-focused Doctorate in Nursing (PhD, DNSc, etc.) | <input type="checkbox"/> _k Non-nursing certificate |
| <input type="checkbox"/> _f Non-degree nursing certificate | |

9. What percent of coursework is through online or distance learning? _____%

10. In what state or country were you **first licensed** as an RN? ←

2-letter state code: _____ **OR** Other country: _____

11. In what year were you first licensed as an RN **in the United States**? _ _ _ _

12. In what year were you first licensed as an RN **in California**? _ _ _ _

13. Do you presently have an **active** RN license in California?

₁ Yes ₂ No

14. In how many **other** states, **not including California**, do you hold an **active** RN license?

_____ # other states or ₀ No other states

15. Which of the following **California Board of Registered Nursing certifications or listings**, if any, do you have? (Check all that apply.)

- | | | |
|---|---|---|
| <input type="checkbox"/> _a None | | |
| <input type="checkbox"/> _b Nurse Anesthetist | <input type="checkbox"/> _d Nurse-Midwife | <input type="checkbox"/> _f Nurse Practitioner |
| <input type="checkbox"/> _c Public Health Nurse | <input type="checkbox"/> _e Psychiatric/Mental Health Nurse | <input type="checkbox"/> _g Clinical Nurse Specialist |

16. **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

17. **How satisfied are you with the nursing profession overall?**

- | | | | | |
|---------------------------------------|---------------------------------------|--|---------------------------------------|---------------------------------------|
| Very
dissatisfied | Dissatisfied | Neither
satisfied
nor dissatisfied | Satisfied | Very
satisfied |
| <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ | <input type="checkbox"/> ₅ |

18. Are you **currently employed for pay** in a position that requires a registered nursing license, including any Advanced Practice Registered Nurse (APRN) positions?

₁ **Yes**, working full or part-time
Continue to Section B, below.

₂ **No** → **Skip to Section C, page 11.**



SECTION B: FOR NURSES CURRENTLY EMPLOYED IN NURSING

Please complete this section if you are working in a position that requires a registered nursing license, including a position in which you are an Advanced Practice Registered Nurse (APRN). In this survey, the term "RN" or "registered nursing" refers to both RNs and APRNs.

19. How many **hours** do you **normally** work in all positions that require a registered nursing license? **(Please complete all items.)**

- a. ____ # hours per **day** in all nursing positions
- b. ____ # hours per **week** in all nursing positions (do not include unworked on-call hours)
- c. ____ # overtime hours per **week** in all nursing positions
- d. ____ # hours **on call** not worked per week in all nursing positions

20. How many **months** per year do you work as an RN? ____ # months per **year**

21. What are your intentions regarding your nursing employment in the next:

TWO YEARS?
(Check only one.)

FIVE YEARS?
(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

- 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 22 through 36 refer to your principal nursing position, which is the current RN or APRN position in which you spend most of your working time.

22. In your **principal** nursing position, are you...? **(Check only one.)**

- ₁ A regular employee
- ₂ Employed through a temporary employment service agency
- ₃ Self-employed
- ₄ Travel nurse or employed through a traveling nurse agency

23. How long have you been employed as an RN with your **principal** employer?

____ years and ____ months

24. How many **hours per week** do you normally work in your **principal** nursing position?

_____ # hours per week

25. How many **months per year** do you normally work in your **principal** nursing position?

_____ # months per year

26. Where is your **principal** nursing position located? **(Please complete all items.)**

- a. Zip Code _____ c. City _____
 b. County _____ d. State _____ (2-letter)

27. How many miles is it **one-way** from your residence to your **principal** nursing position? If you work for a traveling nurse agency or registry, write the average **one-way distance** from your residence to your current or most recent employment location.

_____ miles one-way

28. 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.)**

Hospital (not mental health)		
<input type="checkbox"/> ₁ Hospital, inpatient care or emergency department	<input type="checkbox"/> ₃ Hospital, ambulatory care department (outpatient, surgery, clinic, etc.)	<input type="checkbox"/> ₅ Hospital, other type of department (administration, home health, etc.)
<input type="checkbox"/> ₂ Hospital, ancillary unit	<input type="checkbox"/> ₄ Hospital, nursing home unit	
Other inpatient setting		
<input type="checkbox"/> ₆ Nursing home /extended care/skilled nursing facility/group home	<input type="checkbox"/> ₉ Correctional facility/prison/jail	
<input type="checkbox"/> ₇ Rehabilitation facility/long-term acute care	<input type="checkbox"/> ₈ Inpatient mental health /substance abuse	<input type="checkbox"/> ₁₀ Inpatient hospice (not hospital-based)
Clinic/ambulatory		
<input type="checkbox"/> ₁₁ Private medical practice, clinic, physician office, etc.	<input type="checkbox"/> ₁₃ School health service (K-12 or college)	<input type="checkbox"/> ₁₅ Urgent care , not hospital-based
<input type="checkbox"/> ₁₂ Public clinic, rural health center, FQHC, etc.	<input type="checkbox"/> ₁₄ Outpatient mental health /substance abuse	<input type="checkbox"/> ₁₆ Ambulatory surgery center (free-standing)
Other types of employment settings		
<input type="checkbox"/> ₁₇ Occupational health or employee health service	<input type="checkbox"/> ₂₀ Outpatient Dialysis Center	<input type="checkbox"/> ₂₃ Case management /disease management
<input type="checkbox"/> ₁₈ Public health or community health agency (not a clinic)	<input type="checkbox"/> ₂₁ University or college (academic department)	<input type="checkbox"/> ₂₄ Call center /telenursing center
<input type="checkbox"/> ₁₉ Government agency other than public/community health or corrections	<input type="checkbox"/> ₂₂ Home health agency/ home health service (including hospice)	<input type="checkbox"/> ₂₅ Self-employed
<input type="checkbox"/> ₂₆ Other (Please describe: _____)		

29. 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"/> ₁₃ Educator, academic setting (professor, instructor in a school of nursing)
<input type="checkbox"/> ₂ Charge Nurse and direct care nurse	<input type="checkbox"/> ₁₄ Staff educator, service setting (in-service educator, clinical nurse educator)
<input type="checkbox"/> ₃ Charge Nurse or Team Leader (not direct care)	<input type="checkbox"/> ₁₅ Patient educator
<input type="checkbox"/> ₄ Senior management (Vice President, Nursing Executive, Dean)	<input type="checkbox"/> ₁₆ Patient care coordinator/case manager/discharge planner/patient navigator
<input type="checkbox"/> ₅ Middle management (Asst. Director, Dept. Head, House Supervisor, Nurse Manager, Associate Dean)	<input type="checkbox"/> ₁₇ Quality improvement nurse, utilization review, risk management
<input type="checkbox"/> ₆ Front-line management (Head Nurse, Supervisor)	<input type="checkbox"/> ₁₈ Infection control nurse
<input type="checkbox"/> ₇ Clinical Nurse Specialist (CNS)	<input type="checkbox"/> ₁₉ Occupational health nurse
<input type="checkbox"/> ₈ Certified Registered Nurse Anesthetist (CRNA)	<input type="checkbox"/> ₂₀ Wound and/or ostomy nurse
<input type="checkbox"/> ₉ Certified Nurse-Midwife (CNM)	<input type="checkbox"/> ₂₁ Telenursing
<input type="checkbox"/> ₁₀ Nurse Practitioner (NP)	<input type="checkbox"/> ₂₂ Researcher
<input type="checkbox"/> ₁₁ School Nurse	<input type="checkbox"/> ₂₃ Clinical Nurse Leader (CNL)
<input type="checkbox"/> ₁₂ Public Health/Community Health Nurse	
<input type="checkbox"/> ₂₄ Other (Please describe: _____)	

30. 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

31. 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"/> ₁₁ Geriatrics	<input type="checkbox"/> ₂₀ Pediatrics
<input type="checkbox"/> ₂ General medical-surgical (inpatient)	<input type="checkbox"/> ₁₂ Home health care	<input type="checkbox"/> ₂₁ Psychiatry/mental health
<input type="checkbox"/> ₃ Critical care/ Intensive care	<input type="checkbox"/> ₁₃ Hospice	<input type="checkbox"/> ₂₂ Rehabilitation
<input type="checkbox"/> ₄ Ambulatory care – primary care	<input type="checkbox"/> ₁₄ Labor and delivery	<input type="checkbox"/> ₂₃ School health (K-12 or post-secondary)
<input type="checkbox"/> ₅ Ambulatory care - specialty	<input type="checkbox"/> ₁₅ Mother-baby unit or normal newborn	<input type="checkbox"/> ₂₄ Step-down or transitional bed unit
<input type="checkbox"/> ₆ Cardiology	<input type="checkbox"/> ₁₆ Neonatal care	<input type="checkbox"/> ₂₅ Surgery/pre-op/post-op/PACU/anesthesia
<input type="checkbox"/> ₇ Community/public health	<input type="checkbox"/> ₁₇ Obstetrics/gynecology	<input type="checkbox"/> ₂₆ Telemetry
<input type="checkbox"/> ₈ Corrections	<input type="checkbox"/> ₁₈ Oncology	<input type="checkbox"/> ₂₇ Work in multiple areas and do not specialize
<input type="checkbox"/> ₉ Dialysis	<input type="checkbox"/> ₁₉ Orthopedics	
<input type="checkbox"/> ₁₀ Emergency/trauma	<input type="checkbox"/> ₂₈ Other (Please describe: _____)	

32. Do you use an electronic health record or electronic medical record in your **principal** nursing position?

₁ Yes ₂ No **→ Skip to question #35 below**



33. What is your experience with the electronic health/medical records 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
--	---	--	---	---

34. How does your electronic health/medical record affect the quality of care you provide to patients? **(Check only one.)**

<input type="checkbox"/> ₁ The system nearly always improves the quality of patient care	<input type="checkbox"/> ₂ The system usually improves the quality of patient care	<input type="checkbox"/> ₃ The system has no effect on the quality of care	<input type="checkbox"/> ₄ The system occasionally reduces the quality of patient care	<input type="checkbox"/> ₅ The system almost always reduces the quality of patient care	<input type="checkbox"/> ₆ No systems in my workplace
--	--	--	--	---	---

35. 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

36. Does your compensation from your **principal** nursing position include:
(Check all that apply.)

- _a Retirement plan
- _b Personal health insurance
- _c Tuition reimbursement
- _d Dental insurance
- _e Family/dependent health insurance
- _f Paid time to pursue an educational degree

37. 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	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
B. Your salary	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
C. Employee benefits	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
D. Adequacy of RN skill level where you work	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
E. Adequacy of the number of RN staff where you work	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
F. Adequacy of clerical support services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
G. Non-nursing tasks required	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
H. Amount of charting required	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
I. Your workload	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
J. Physical work environment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
K. Work schedule	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
L. Job security	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
M. Opportunities for advancement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
N. Support from other nurses you work with	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
O. Teamwork between coworkers and yourself	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
P. Leadership from your nursing administration	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
Q. Involvement in patient care decisions	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
R. Relations with physicians	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
S. Relations with other non-nursing staff	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
T. Relations with agency or registry nurses	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
U. Interaction with patients	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
V. Time available for patient education	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied	Does not apply
W. Involvement in policy or management decisions	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
X. Opportunities to use my skills	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Y. Opportunities to learn new skills	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Z. Quality of preceptor and mentor programs	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
AA. Employer-supported educational opportunities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
BB. Quality of patient care where you work	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
CC. Feeling that work is meaningful	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
DD. Recognition for a job well done	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

38. Do you currently hold more than one nursing job?

1 Yes 2 No → **Skip to Question #43 on the next page.**



39. How many nursing positions do you hold **in addition to** your **principal** job?

1 One 2 Two 3 Three 4 Four or more

40. In your **other** nursing positions, are you...? (**Check all that apply.**)

- a A regular employee c Self-employed
b Employed through a temporary employment service agency, not traveling d Travel nurse or employed through a traveling nurse agency

41. What type of work do you do in your **other nursing positions**? (**Check all that apply.**)

- a Hospital staff e Nursing home, extended care, or skilled nursing facility staff i Teaching health professions or nursing students
b Public health or community health f Mental health or substance abuse treatment j Ambulatory care, occupational health
c Long-term acute care g Home health or hospice k Self-employed
d School health h Telehealth/telenursing
l Other (**Please describe:** _____)

42. Please report the following for your **other** nursing positions.

Additional nursing positions (not principal nursing position)	Hours worked per week	Months worked per year	Estimated <u>pre-tax</u> annual income
Additional job 1	(a1) _____ Hrs/week	(a2) _____ Months/year	(a3) _____ \$/year
Additional job 2	(b1) _____ Hrs/week	(b2) _____ Months/year	(b3) _____ \$/year
Additional job 3	(c1) _____ Hrs/week	(c2) _____ Months/year	(c3) _____ \$/year
All other additional nursing positions	(d1) _____ Hrs/week	(d2) _____ Months/year	(d3) _____ \$/year

43. Are you doing **volunteer work** as an RN or APRN (working in an unpaid capacity)?

₂ No ₁ Yes → Are you in an internship/transition residency program? ₁ Yes ₂ No

44. Are you currently employed through a temporary agency, traveling agency, or registry for any of your nursing jobs? (**Check all that apply.**)

_a Yes, a temporary agency or registry
↓
_b Yes, a traveling agency
↓
_c No → **Skip to Question #46 below.**

45. Please indicate which of the following reasons describe why you work for a temporary agency, traveling agency, or registry. (**Check all that apply.**)

- _a Wages _e Benefits _i Control of schedule
_b Control of work location _f Control of work conditions _j Supplemental income
_c Unable to find any permanent RN job _g Maintain skills/get experience _k Travel/see other parts of the country
_d Waiting for a desirable permanent position _h Unable to work enough hours at my primary job
_i Other (**Please describe:** _____)

46. Have you ever stopped working as a registered nurse **for a period of more than one year**?

₁ Yes ₂ No → **Skip to Section D on page 13.**



47. How long did you stop working as a registered nurse? _____ years and _____ months

48. How important were each of the following reasons for why you stopped working as a registered nurse for **a period of more than one year?**

If you have not stopped working for more than one year, skip to Section D on page 13.

	Not at all important	Somewhat important	Important	Very important	Does not apply
A. Could not find work as an RN	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
B. Childcare responsibilities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
C. Other family responsibilities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
D. Moving to a different area	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
E. Stress on the job	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
F. Job-related illness or injury	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
G. Non-job-related illness or injury	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
H. Salary	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
I. Dissatisfied with benefits	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
J. Laid off	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
K. Went back to school	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
L. Travel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
M. Try another occupation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
N. Other dissatisfaction with job	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
O. Dissatisfaction with the nursing profession	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
P. Other	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

(Please describe: _____)

PLEASE SKIP TO SECTION D, PAGE 13

SECTION C: FOR PERSONS NOT EMPLOYED IN REGISTERED NURSING

The purpose of this section is to learn why people are not employed in nursing or have left nursing practice. The term “registered nurse” applies to both RNs and APRNs.

If you are currently employed as an RN or APRN, please skip to Section D on page 13.

49. What was the last year you worked for pay as a registered nurse or APRN? _____

I have never worked for pay as an RN or APRN

50. How important are each of the following factors in why you are **not employed** in nursing?

	Not at all important	Somewhat important	Important	Very important	Does not apply
A. Cannot find any work as an RN	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
B. Difficult to find desired nursing position	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
C. Retired	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
D. Childcare responsibilities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
E. Other family responsibilities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
F. Moving to a different area	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
G. Stress on the job	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
H. Job-related illness/injury	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
I. Non-job-related illness/injury	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
J. Salary	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
K. Dissatisfied with benefits	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
L. Other dissatisfaction with your job	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
M. Dissatisfaction with the nursing profession	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
N. Travel	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
O. Wanted to try another occupation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
P. Inconvenient schedules in nursing jobs	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Q. Returned to school	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
R. Laid off	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
S. Other (Please describe: _____)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

51. Are you doing volunteer work as an RN or APRN (working in an unpaid capacity)?

2 No 1 Yes ➔ Are you in an internship/transition residency program? 1 Yes 2 No

52. Which of the following best describes your current intentions regarding work in nursing?

₁ Currently seeking employment in nursing → **Skip to Section D, page 13.**

₂ Plan to return to nursing in the future

52a. How soon? ₁ Less than one year

₂ 1-2 years

₃ 3-4 years

₄ 5 or more years

Skip to Section D, page 13.

₃ Retired

₄ Definitely will not return to nursing, but not retired } → **13.**

Skip to Section D, page

₅ Undecided at this time (**Continue to Question #53.**)



53. Would any of the following factors affect your decision to return to nursing?

	Not at all <u>important</u>	Somewhat <u>important</u>	<u>Important</u>	Very <u>important</u>	Does not <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 health care benefits	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
G. 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
H. 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
I. 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
J. 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
K. 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
L. 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
M. Other	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
(Please describe: _____)					

SECTION D: EMPLOYMENT OUTSIDE NURSING

54. Are you currently employed in a non-nursing position (that does not require a registered nursing license)?

₁ Yes

₂ No —————> **Skip to Section E, below.**



55. Does your position utilize any of your nursing knowledge? ₁ Yes ₂ No

56. Please indicate the field(s) of your work position(s) outside of nursing. **(Check all that apply.)**

- _a Health-related services outside of nursing
- _b Pharmaceuticals, biotechnology, or medical devices
- _c Retail sales and services
- _d Education, elementary and secondary
- _e Financial, accounting, and insurance services
- _f Consulting organization
- _g Other **(Please describe: _____)**

57. Please indicate the following for up to three work positions **outside of nursing.**

Position #1 (a1) _____ Hours/week (a2) _____ \$/year

Position #2 (b1) _____ Hours/week (b2) _____ \$/year

Position #3 (c1) _____ Hours/week (c2) _____ \$/year

SECTION E: CHANGES IN THE PAST YEAR

58. Have you changed **positions or employers** in the past year? **(Check all that apply.)**

- _a No change in positions or employers
- _b Added second nursing job
- _c Added second non-nursing job
- _d Stopped working in a secondary nursing job
- _e Stopped working in a secondary non-nursing job
- _f I am not working as an RN now, but was working earlier this year
- _g I was not working earlier this year, but am working now as an RN
- _h New position with the same employer
- _i Same position with a different employer
- _j New position with a different employer
- _k Other **(Please describe: _____)**

59. Has there been a change in **how much you work** as an RN in the past year?
(Check all that apply.)

- _a No change in hours worked
- _b Did not work as an RN in the past year
- _c Increased hours – employer imposed
- _d Increased hours – my choice
- _e Decreased hours – employer imposed
- _f Decreased hours – my choice
- _g Other (**Please describe:** _____)

If you answered “No change” in both Question 58 and 59, please skip to Section F on the next page.

60. How important were each of the following factors in your **change** in employment or hours worked during the past year?

	Not at all <u>important</u>	Somewhat <u>important</u>	<u>Important</u>	Very <u>important</u>	Does not <u>apply</u>
A. Retired	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
B. Childcare responsibilities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
C. Other family responsibilities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
D. Salary	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
E. Benefits	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
F. Laid off	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
G. Employer reduced hours	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
H. Change in spouse/partner work situation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
I. Change in financial status	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
J. Relocation/moved to a different area	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
K. Promotion/career advancement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
L. Change in my health status	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
M. Wanted to work more convenient hours	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
N. Dissatisfaction with previous position	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
O. Stress on the job	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
P. Desire to use my skills more fully or learn new skills	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
Q. Other	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
(Please describe: _____)					

SECTION F: RESIDENCE OUTSIDE CALIFORNIA

61. Do you reside primarily outside California? ₁ Yes ₂ No → **Skip to Section G, below.**



62. 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 Regularly 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

63. How many months did you work **in California** as an RN in the past 12 months?

_____ months or ₀ Did not work as an RN in CA

64. If you reside outside California, do you plan to work as an RN in California in the **next two 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 regularly commute to California to work as an RN.
- _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: DEMOGRAPHIC INFORMATION

65. Gender ₁ Female ₂ Male

66. Year of birth 19 ____ ____

67. In what country were you born? _____

68. Marital status ₁ Single ₂ Currently married/partnered ₃ Separated/divorced/widowed

69. What is your ethnic/racial background (select the **ONE** with which you most strongly identify)?

- ₁ African American/Black/African
 ₂ Caucasian/White/European/Middle Eastern
 ₃ American Indian/Native American/Alaskan Native
 ₄ Other or Mixed

Asian		Latino/Hispanic	Native Hawaiian/Pacific Islander	
<input type="checkbox"/> ₅ Cambodian	<input type="checkbox"/> ₁₀ Korean	<input type="checkbox"/> ₁₅ Central American	<input type="checkbox"/> ₂₀ Fijian	<input type="checkbox"/> ₂₅ Tongan
<input type="checkbox"/> ₆ Chinese	<input type="checkbox"/> ₁₁ Laotian/Hmong	<input type="checkbox"/> ₁₆ South American	<input type="checkbox"/> ₂₁ Filipino	<input type="checkbox"/> ₂₆ Other
<input type="checkbox"/> ₇ Indian	<input type="checkbox"/> ₁₂ Pakistan	<input type="checkbox"/> ₁₇ Cuban	<input type="checkbox"/> ₂₂ Guamanian	
<input type="checkbox"/> ₈ Indonesian	<input type="checkbox"/> ₁₃ Thai	<input type="checkbox"/> ₁₈ Mexican	<input type="checkbox"/> ₂₃ Hawaiian	
<input type="checkbox"/> ₉ Japanese	<input type="checkbox"/> ₁₄ Vietnamese	<input type="checkbox"/> ₁₉ Other Hispanic	<input type="checkbox"/> ₂₄ Samoan	

70. Other than English, what languages do you speak fluently? (**Check all that apply.**)

- _a None
 _b Spanish
 _e Tagalog/other Filipino dialect
 _h Mandarin
_c Korean
_f French
_i Cantonese
_d Vietnamese
_g Hindi/Urdu/Punjabi/other South Asian language
_j Other Chinese dialect
_k Other (**Please describe:** _____)

71. Do you have children living at home with you? ₁ Yes ₂ No → **Continue to Question #72**

If Yes, **how many** are:

- a) 0-2 years _____ b) 3-5 years _____ c) 6-12 years _____ d) 13-18 years _____ e) 19+ years _____

72. Do you have responsibility for assisting or caring for an adult family member who needs help because of a condition related to aging or a disability? **Do not include paid positions.**

- ₁ Yes ₂ No → **Continue to Question #73**

↓
If Yes, **how many** adults do you assist or care for?

- ₁ 1 adult ₂ 2 adults ₃ 3 or more adults

73. Your home Zip code: _____ or other country (**Please specify:** _____)

74. 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

75. Approximately what percentage of your **total household** income comes from your nursing job(s)?

- ₁ None
₃ 20-39%
₅ 60-79%
₇ 100%
₂ 1-19%
₄ 40-59%
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: _____