What would you get if you took a snapshot of nursing? To answer that question, American Nurse Today surveyed thousands of nurses to examine a variety of nursing trends. The goal of the survey was not just to collect salary data, but also to unearth valuable information about what keeps nurses satisfied, what nurses value, and how they perceive their work environments. In short, what do nurses need and why do they stay?

This comprehensive survey considered managers and clinicians separately and as a group, broadening its usefulness in understanding what’s important to nurses at all levels of the profession. Nearly 6,000 nurses took the survey between June and August 2017—an outstanding response that shows a deep level of engagement.

This, the first of a two-part report, focuses on who nurses are, what keeps them in the profession, and where employers might want to focus their efforts in retaining engaged and satisfied nurses.

Manager metrics
Managers who responded to the survey report a wide range in years worked. Most say they’ve been in a management role either between 1 and 10 years (44%) or more than 10 years (37%).

Most respondents manage a budget from $100,000 to $250,000, followed by $250,001 to $500,000. (However, nearly half preferred not to answer.)

Over half (57%) say they aren’t eligible for a bonus. Of those who received a bonus, 21% say it was nondiscretionary, 16% say it was discretionary, and 6% say it was both.

Key takeaways
87.2% of respondents would still become a nurse.
62% of respondents say their workload has increased over the last year.
60% of managers say recruiting RNs in the past 12 months has been difficult.
48% of clinicians who responded are certified in their specialty.
18% of managers who responded are certified in nursing leadership.
Clinician workforce demographics

Primary nursing role
Just slightly more than 50% of clinicians say they work as a clinical or staff nurse, and 10% work as advanced practice RNs. Other roles identified include educators in both academic and nonacademic settings, charge nurses, case managers, and clinical nurse leaders.

Nursing shift stats
Most of the responding nurses work the day shift only (82% of managers and 71% of clinicians); 13.5% of clinicians report working nights only; and 10% rotate between the day and night shift. (Only 9% of managers rotate between two shifts; 4% rotate among three shifts.)

In all, 40% of clinicians who responded said they work 12-hour shifts on a regular basis.

Salary and benefits
Both clinicians and managers shared information about their current salary, the raises they’ve received, and the benefits offered by their employers.

Salary
When asked how their current salary compared to the prior year’s, 59% reported a salary increase, 33% said their salary remained the same, and 8% said their salary decreased.

Raises
Nearly three-quarters of respondents (74%) report having received a raise within the last 18 months; 15% say it’s been 2 or more years since they received a raise.

Benefits
When asked about health insurance and paid time off, 82% of nurses report receiving both; 75% receive retirement contributions and dental insurance.

APRN breakdown
Here’s a breakdown of advanced practice RN (APRN) specialties among respondents.

- Nurse practitioner: 76.78%
- Nurse anesthetist: 1.42%
- Nurse midwife: 4.27%
- Nurse practitioner: 76.78%
- Nurse anesthetist: 1.42%
- Nurse midwife: 4.27%

Employment status
40% report working 12-hour shifts
84% report working full-time
10% report working part-time

About 50% report education funds (including tuition reimbursement) and disability insurance.

In all, 47% of clinicians report receiving additional compensation for shift work, 37% for education level, 36% for certification, 26% for serving as a precept-
tor, and 25% for a clinical ladder. (Respondents could choose more than one.)

**Turnover trends**
Almost 35% of nurses report having worked for their current employer for 1 to 5 years.

### Reported salary

<table>
<thead>
<tr>
<th>Salary Range</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than $40k</td>
<td>6.9%</td>
</tr>
<tr>
<td>$40-$59k</td>
<td>21.07%</td>
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<tr>
<td>$60-$79k</td>
<td>29.63%</td>
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<tr>
<td>$100-$120k</td>
<td>11.15%</td>
</tr>
<tr>
<td>$120+k</td>
<td>7.99%</td>
</tr>
</tbody>
</table>

**Future employment plans**
When asked about their employment plans, 10% of respondents say they plan to stay with their employer for less than a year; 46% say they plan to stay for 5 or more years. Of those who intend to leave within a year, 76% are currently seeking a job with another employer or plan to do so within the next 3 months.

For nurses who intend to stay with their employer, the two biggest factors that they report would motivate them to take a job with a new employer are a salary increase and a better work environment.

### Job satisfaction
Nurses were asked to complete a satisfaction question, rating a variety of factors related to job satisfaction (on a scale of 1-5, with 1 being not satisfied and 5 being totally satisfied). Nurse
managers were asked to do the same in a separate question geared toward a management role.

Among the answer choices, nurses report being most satisfied with their relationships with coworkers (with a weighted average of 3.9) and non-nurse colleagues, such as respiratory therapists and physical therapists (with a weighted average of 3.8). They are least satisfied with their salary/comparisons, opportunities for organizational advancement, and upper-management support (each with a weighted average score of 2.9). When it comes to salary, even with a low weighted average, 64% rate their satisfaction between 3 and 5 on the scale (satisfied to totally satisfied). In comparison, consider a Medscape physician compensation survey done in early 2017, in which an average of 54% of physicians reported they felt that they were fairly compensated.

Your voice:
What keeps nurses most satisfied?

In an open-response question, nurses were asked to identify the single most important factor related to job satisfaction. The most common themes included caring for patients, making a difference in patients’ lives, and providing quality care. Other themes were schedule flexibility, helping nursing students and new nurses grow, opportunities for career advancement, and the variety of nursing roles available. Here’s a small sample of those comments.

- “My nursing colleagues who are both in education settings and in various practice settings. They are a wonderful support, encouragement, and motivation to continue to learn and improve.”
- “Knowing that [as a] quality-assurance nurse in public health…the funding through contracts that I support [will] provide access to care and improved health by direct care and referral for community resources.”
- “The opportunity to learn something new. It can occur serendipitously on the job, at a seminar, or through personal research.”
- “I LOVE mentoring and teaching new nurses. I will continue teaching for a university once I retire from my hospital job.”
- “Health, happiness, and well-being of my staff.”
- “My research making a difference in public policy to provide nurses with adequate staff and resources to care for patients.”
- “Helping a patient get well or die with dignity.”
- “Nurses who are committed to advancing the practice, and who demonstrate professionalism.”
- “Knowing that I can have a positive impact on the health of one person, one family, one community, one hospital, one healthcare system, one nation.”
- “I love the art & science of nursing...best career decision I made.”

Retirement trends

35% of the nurses who responded said they plan to retire between 2018 and 2025.

Nearly 40% of respondents plan to retire between the ages of 61 and 65, and 35% between the ages of 66 and 70.

We asked clinicians, “How satisfied are you with the following, with 1 being not satisfied at all and 5 being totally satisfied?”

We asked:
If you had to do it all over again, would you still become a nurse?

87.2% said yes!
Nurse managers report a high level of satisfaction with their relationships with those who report to them (a weighted average of 3.9) and with their peers (a weighted average of 3.9). Among the other answer choices, they say they’re least satisfied with the amount of time worked, opportunities for advancement within the organization, and salary/compensation (weighted average of 3.2, 3.1, and 3, respectively).

**Top three most valued job factors for clinicians:**

1. Salary
2. Patient care
3. Flexible hours

**Nurse respondent demographics**

The sample of nurses who responded to the survey comprise a fairly even split across the country. Approximately 25% live in the Midwest, 27% in the Northeast, 29% in the South, and 20% in the West. The sample was predominantly female (91%). When asked about ethnicity, 76% identify as white/non-Hispanic, 7% as black/African American, 5% as Asian, and 4% as Hispanic; 6% chose not to select an ethnicity. A small margin (less than 2%) identify as Native American or Native Pacific Islander.

**Years of experience**

42% of survey respondents have worked as a nurse for 25 years or more.

**Age of nurse respondents**

The ages of survey participants range from 20 to 89! More than half are over age 50.

**Education/certification**

Close to 40% of survey respondents
have a bachelor’s degree in nursing; 25% hold a master’s degree in nursing, and 6% have a doctorate in nursing. Approximately 18% report being currently in school, while 13% plan to return to school within the next 6 months. Two-thirds of those who are either currently in school or have plans to return report they will be working toward a graduate degree in nursing, while 18% are pursuing or plan to pursue an undergraduate degree.

Only 18% of managers report being certified in nursing leadership; many of those hold certification from the American Nurses Credentialing Center (42%), followed by certification from the American Organization of Nurse Executives (17%). Nearly half of clinicians (48%) report being certified in their specialty.

Thank you!
Thank you to all who completed the survey. Watch for more results in part 2, which will explore nurse lifestyle factors, healthy work environments, staffing trends, and the future of nursing.

Meaghan O’Keeffe is a freelance writer and clinical editor based in Framingham, Massachusetts.
In June 2017, American Nurse Today conducted a survey to measure trends in nursing. With almost 6,000 respondents, we collected valuable data related to workforce demographics, salary and benefits, and job satisfaction.

But the work of nursing has many more complex facets than can be reflected in these straightforward measurements. That’s why we also asked how nurses perceive various issues and challenges facing the profession. How do they experience issues such as bullying and incivility? What kind of healthy lifestyle changes have they been successful at implementing? What challenges do they face in their practices? How have electronic health records (EHRs) affected how they do their jobs?

Part 2 of the survey results explore these factors. You can read Part 1 of the results at americannursetoday.com/?p=36508.

**Lifestyle**
How you take care of yourself has an effect on how you perform on your job. We asked nurses what they do to make sure they stay healthy and rested.

**Self-care and healthy lifestyle changes**
When we asked nurses what lifestyle changes they’ve implemented at work and at home, 73% of respondents say they’ve improved their nutrition, 66% report having increased their activity, and 56% report having reduced their stress. Other significant measures are improved sleep (41%) and taking more breaks (35%).
Sleep
Nurses were asked how many hours of sleep they get on average. Most of the respondents say that they get 6 (32%) or 7 (34%) hours of sleep a night. Only 15% report getting 8 hours, while 12% say they sleep only 5 hours.

Bullying and incivility

Bullying
Repeated, unwanted harmful actions intended to humiliate, offend, and cause distress in the recipient.

![Bullying Pie Chart]

- Never: 24.57%
- Rarely: 33.47%
- Sometimes: 27.47%
- Often: 10.17%
- Very often: 4.32%

Note that the incidences of incivility that occur sometimes, often, or very often, are significantly higher than reports of bullying frequency, indicating that incivility is an important factor in workplace culture.

Incivility
Rude and discourteous actions, such as demeaning others, gossiping, or using nonverbal insults (eye-rolling, deep sighing, finger pointing).

![Incivility Pie Chart]

- Never: 7.46%
- Rarely: 24.33%
- Sometimes: 38.96%
- Often: 18.85%
- Very often: 10.4%

Addressing bullying in the workplace
When asked if they had intervened in the past year when witnessing bullying in the workplace, 63% of respondents say yes.

In an open-response question, respondents were asked to share a time when they or someone else intervened in a bullying situation. Common themes included:
- an “older” nurse helping a new nurse who was being intimidated
- speaking up for self or someone else who was targeted, whether a physician or nurse colleague
- going up the chain of command and involving management
- stopping verbal abuse, including abuse from patients.

Organizational support in promoting a healthy work environment
Nurses were asked to rate their organization based on support provided to reduce bullying and incivility. The rating was on a scale
of 1 to 5 (1 being not supportive and 5 being completely supportive).

About 36% of respondents rate their organization as 3 (somewhat supportive), 14% rate their organization as 4, and 17% feel their organization is completely supportive (a score of 5). About 23% of respondents give their organization a score of 2, and 10% say their organization isn’t supportive at all.

**Workload trends**
Nurses were asked how their workload had changed in the past 12 months. Around 62% say their workload had increased, while 31% report it hadn’t changed.

**Acuity-based staffing**
Acuity-based staffing is a method of determining appropriate nurse–patient ratios based on patient characteristics. Although level of patient acuity and nursing tasks required to meet patient needs play an important role in determining nurse–patient ratios, the acuity-based model also incorporates more comprehensive factors that reflect “the full scope of nursing practice and the time needed to maintain standards of practice.” These factors include assessment, implementation, patient education, and coordination of care.

Only 16% of managers say they use an acuity-based staffing system; 5% plan to implement such a system within the next 6 months.

**Nursing challenges**
In an open-response question, nurses were asked to identify the top three challenges faced in their practice. Respondents offered a variety of answers, but several unifying themes appeared, including:

- documentation, including redundant or duplicate documentation, and the time taken away from patient care
- nurse turnover and recruitment of new staff
- communication with nursing and interdisciplinary colleagues
- understaffing.

**How will nursing evolve over the next decade?**
When nurses were asked how they see nursing changing within the next 10 years, many respondents cite concerns about a worsening nursing shortage. Others are concerned that they’ll be expected to do more with fewer resources and that their workload will increase. Many say they expect to spend less time with patients as other demands increase and that patients’
conditions will continue to become more complex with a higher number of comorbidities. On a more positive note, many respondents note that they expect to see more sophisticated technology trends and telehealth playing an increased role in health care. They also expect to see a greater prevalence of higher education degrees and more nurse involvement in policy and leadership. Some respondents say they anticipate that nurses will have greater autonomy.

Positive employer action
Nurses were asked to identify positive actions their employers have taken to improve patient care. The most common responses include:

- listening to staff input
- improving nurse–patient ratios
- implementing EHRs
- developing safety measures and evidence-based practice protocols
- using nurse practitioners for more expedient triage
- improving communication, including huddles, bedside rounding, and patient handoff
- implementing more staff education.

Some nurses mention having achieved Magnet® recognition as a positive action; others say shared governance and increased staff involvement have been beneficial. Some respondents have seen an increase in nurse hires.

EHR trends
Nearly all (92%) of respondents say their organization uses EHRs, and more than two-thirds (67%) of those who use EHRs also report that the system incorporates standardized nursing terminology.

EHRs: What works
When asked what they like best about their EHRs, many report convenience and legibility (of medical orders and of communications). Others feel their EHRs allow them to easily retrieve information and gain access to patient history and medications “at their fingertips.” Some say their EHRs improve interdisciplinary communication and continuity of care. Other benefits of EHRs include:

- ability to collect data and run reports
- real-time charting
- standardized charting
- safer medication administration
- templates with checkboxes
- charting by exception
- access to all patient information (nurse notes, physician notes, laboratory reports, radiology, etc.) in one place.

EHRs: Needs improvement
When asked what aspects of their EHRs nurses would like to see improved, a frequent answer was reducing duplicate charting. Many nurses also echo a desire for interoperability, or the ability to sync patient data from other hospitals and
Your voice:
How do you see nursing changing in the next 10 years?

This question provoked a lot of thoughtful responses. Many respondents see technology making a big impact on nursing’s future, especially with regard to direct patient care. Some see technology taking nurses away from the bedside, while others see it as a positive force. Other respondents weighed in with positive or negative comments on topics ranging from staffing to roles and responsibilities.

• “I believe the world of technology will continue to change our current practice, making it more efficient [and] evidence-based.”
• “I anticipate nurses will need to contribute more as leaders in the delivery of care, expanding their scope to care for the increased needs of the population.”
• “Adaptability, flexibility, and an ability to partner with those outside of nursing will become increasingly critical to the success of the profession.”
• “NPs will become the GPs [general practitioners] of the future.”
• “I worry increased technology will push us farther away from direct patient care.”
• “To meet staffing demands, artificial intelligence will become part of...patient care.”
• “I see telehealth becoming a big part of nursing.”
• “I think the role of nurses will expand to fill the need for healthcare providers, especially in rural communities.”
• “More interprofessional/team interactions; less isolated.”
• “I think that the focus will shift to local clinic and primary support to focus on prevention and save the hospital for only the acute or surgical procedures.”
• “There will be a push for more RNs to enter with a BSN and later obtain a DNP. APNs will become prime leaders in healthcare.”
• “Silos will be broken down, and more communication will be occurring among all specialties.”
• “More telecommunication, improved information access, and electronic data collection.”
• “Computers have changed nursing and not for the better. I hope technology can help the nurse make it back to the bedside.”
• “Less hospital and acute care, more public health and alternative medicine/integrative health”
• “Continued shortages with hands on nursing, leading to creative coverage and training options”
• “I am afraid that more and more responsibility will be laid upon the hospital nursing staff, which may affect patient care.”
• “Nurses will play the biggest role in caring for the sick of this nation.”

healthcare facilities. Respondents also say they’d like to see:
• designs that are more conducive to workflow
• data extraction for practical use (outcomes, trends, practice changes, etc.)
• simplicity and navigability—fewer steps, easier to navigate
• designs tailored to specialties that have unique workflows (such as the operating room)
• more staff nurse involvement to improve functionality
• standardization of care plans and terminology
• speed and streamlined design to make use less tedious
• voice-recognition charting.

Survey trends: Why they matter
Nurses make an enormous impact on patient care delivery. To retain employees and keep nurses in the profession, those in nursing leadership must understand what nurses need to do their jobs to the best of their ability. The American Nurse Today 2017 Nursing Trends and Salary Survey provides insight into what nurses value and the beginnings of a road map for positive changes that can be made to improve work conditions and influence job satisfaction.

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