

*I do love nursing, but it is a stressful, demanding, little understood job.*

—45-year-old Registered Nurse from Greater Minnesota.

*I am trying to come to terms with disappointment that I feel that my 25 years as a loyal employee meant nothing to the employer and that my skills were disregarded in the face of personal ambitions. I hope other nurses are not dealing with this same disappointment.*

— 53 year-old Registered Nurse from Greater Minnesota.

*Working for a public health agency in a rural area has been great in that we nurses are able to work like a team, not to mention the wonderful flexibility of the hours.*

—27 year-old Public Health Nurse from Greater Minnesota.

*I am given a great deal of autonomy and independent decision making power. This is very important to me.*

—44 year-old Registered Nurse from the Duluth area.

# In Their Own Voices: Registered Nurses' Observations on the Nursing Profession

September 2003

*Nursing is a very non-glamorous career.*

—45-year-old Nurse Manager from the Duluth area.

*I am most frustrated by the increasing amount of paperwork and the decreasing amount of time I have to actually take care of patients and residents.*

—45-year-old Assistant Director of Nursing from Greater Minnesota.

## Addendum to Findings from the Minnesota Registered Nurse Workforce Survey

January 2003

*...great professional. Not only has the educational preparation helped me with personal and family problems it has allowed me the security to know I will always have a job. That is very important to a single mom.*

— 43 year-old Registered Nurse from the Rochester area.



## Background

In January 2003, the report *Findings from the Minnesota Registered Nurse Workforce Survey* was published by the Minnesota Department of Health's Office of Rural Health and Primary Care. The January 2003 report did not include an analysis of the open-ended comments that some registered nurses completing the survey included along with their multiple choice survey answers. In the final section of the survey, respondents were given the opportunity to write in their own words any additional comments they felt would add to the information collected in this survey.

Copies of the full report, the survey instrument, and data from the survey are available online at: [www.health.state.mn.us/divs/chs/workdata.htm](http://www.health.state.mn.us/divs/chs/workdata.htm)

This report addendum is intended to add depth to the objective results reported in *Findings from the Minnesota Registered Nurse Workforce Survey*.

Close to 750 RNs (32.8 percent) of those who responded to the survey provided written comments in the open space provided in Section G of the survey. The instructions for that section asked respondents to add any additional information that they felt would aid in our understanding of the RN workforce in Minnesota. The comments, which ranged from a few sentences to several paragraphs, addressed a variety of nursing workforce issues.

In digesting these comments, it is important to consider whether respondents providing comments were different in some way from those not providing comments. An analysis of key survey variables reveals no real differences between those who gave comments and those who did not. For example, there was virtually no difference in union membership, employment location, job classification, hourly wage, job tenure, and hospital- or nursing-home-based practice between the two groups. A few minor differences in the two groups occurred in terms of average age (those who commented were, on average, one year older than those that did not) and how they responded to wage related questions in the job satisfaction portion of the survey. For example, when asked to respond to the statement: "My present salary is satisfactory," RNs who provided comments were slightly less likely to agree with the statement than those who did not make any comments. Overall, the differences

between the two groups in terms of job satisfaction were very small.

In order to provide some standardization for the wide-ranging comments, comments were reviewed in detail and sorted into ten categories, as follows:

1. Wages and compensation
2. Scheduling and staff shortages
3. Regulations
4. Quality of care
5. Responsibilities
6. Respect
7. Administration
8. Education
9. Physical health
10. Voice

## Findings

Forty percent of the comments made related to issues of wages and compensation, although these comments were frequently mentioned along with comments about respect by management and by the public at large. Scheduling and staffing shortage issues (33%), and "respect for nurses" (25%) comments followed in frequency. Comments related to RNs having a "voice" (or having some authority or control) in nursing at their practice site were lowest in frequency (5%). The comments, by and large, reflected dissatisfaction with the nursing profession and concern about the quality of care their patients are receiving.

Many of the issues that were brought up as problems (compensation, scheduling, staff shortages, regulations) were seen as having direct effects on the quality of patient care, as well as effects on the nurses' own physical and mental health. Although most comments reflected what nurses perceived as problems or were unhappy about, several wrote of the profession being "a calling," and spoke passionately about their commitment to the field. Many respondents expressed thanks for the opportunity to articulate their views.

Following are excerpts from the written comments.

### *On Wages and Compensation*

"I feel that the pay and health benefits for the nursing profession have been below other professions for years. Considering the responsibility and care that nursing has provided for many years, we have not been recognized for this. To me, it is a

deep personal commitment of caring and loving, and treating others as I would like to be treated or see my loved ones treated. It is ageless and timeless.”

“I make less as a nurse with 25 years of experience than a new graduate just entering the work force with a computer degree.”

“I am fairly satisfied with my wage and benefits at the hospital I work at, although I don’t feel like I’m where I should be yet after working almost 29 years of weekends and holidays.”

“I personally am very dissatisfied with the profession of nursing. We work so hard...yet our pay does not compensate what we do.”

“There need to be faster and better increases in wages for nurses.”

### ***On Scheduling and Staff Shortages***

"After a year of fighting the nursing shortage, I decided to become part of it."

“The physical aspects of the job are very demanding—long shifts, night shifts.”

“As an LPN for 11 years, I was not happy about losing my hours of seniority when I became an RN. I’ve been an employee for 26 years working every other weekend and holidays, and I can’t get time off when I want it.”

### ***On Regulations***

“The paperwork in a nursing home is overwhelming.”

"Nurses feel they could do an even better job if they had more time to spend with the patient and less paper work to do."

“Federally mandated rules and regulations take away the time that could and should be spent with the patient.”

“The highest frustration for me, before I left my job in August 1999, was the amount of paperwork we were required to do. Even with computers, I felt more like a glorified secretary than a nurse.”

“State regulations for documentation requirements prevent us from doing the important work of caring for people. The required paperwork is not reasonable or rational.”

“The state and federal government must put the emphasis on patient care – not on the reams of paper work. If they want both, they better up the funding. Because it is impossible to have it both ways.”

### ***On Quality of Care***

“A difficult part of my job is floating to pediatrics where I do not have the skills and I miss having boundaries and exactness to do a better job.”

“Safety is an issue. Additional workloads are placed upon nurses who have maximum workloads already. Nurses can be in only one place at one time. Delegation is used to take the place of nursing care where it should be done by an actual nurse and instead it is not. “

### ***On Responsibilities***

“Bottom line concerns and general mismanagement of resources have contributed to a climate where nurses are not as well paid as they could be for the level of responsibility they carry.”

“I wish that the general public understood the large amount of skill, knowledge, intelligence, and responsibility that nurses have in the hospital setting, and more specifically in the ICU setting.”

“Many positions, once filled (secretaries, assistant director of nursing) no longer exist. I, as an RN, assume these added responsibilities besides being responsible for my job descriptions. Answering phones, overwhelming paperwork, filing, appointment scheduling, etc., takes away from patient care.”

“I feel [that] the general public has no idea how much responsibility nurses have.”

### ***On Respect***

“I personally am very dissatisfied with the profession of nursing. We work so hard, back-breaking labor, and we get no respect.”

“I’m so glad I’m no longer a nurse. Too often other nurses are vindictive and petty toward each other [and] not supportive.”

“I wouldn’t tell my worst enemy to go into nursing. The chronic short staffing, coupled with life and death responsibilities, is killing. Added to this, there is little respect from any quarter.”

“Some physicians still look at nurses as their servants and not as highly-skilled professionals.”

### ***On Administration***

“Administration at the hospital fights us every contract on wages and benefits.... I feel rushed, under appreciated by doctors, and underpaid.”

“I have never felt as though administration is capable of caring about who we are as people.”

“I loved the work in labor and delivery, but administration was awful—no respect, no communication, staffing was awful, peer work was nil.”

### ***On Education***

“I’d like to see the nurses [who are] being trained learn patient care and assessment instead of a lot of the meaningless stuff they are doing. Nurses do not come out of training ready to work on the floor. They need a lot of basics!”

“Nursing schools need to do better in recruiting and training new students.”

“I would like to see all RNs need to get a BSN to practice.”

“I feel nursing assistants coming into the field are inadequate. They need to have much better training and be more responsible.”

“Nurses could use more skills in understanding the ‘business of health care.’ With this knowledge, they could better help shape the destiny of nursing, instead of responding/reacting to it!”

### ***On Physical Health***

“I am not happy as a nurse. The stress level is very high!”

“We work so hard, back-breaking labor, and we get no respect.... For the hard mental and physical work we do, the pay just isn’t there.”

“As I got older, the physical work was becoming too demanding on the body – shoulder, neck, and back pain from lifting patients, pushing carts on carpeting, etc.”

### ***On Having a Voice***

“I never recommend others to go into nursing as a career. All the responsibility, none of the authority, poor compensation for the level of responsibility.”

“Our surgeons have too much influence on our administration and they are not employees of our hospital. But because they bring the business to our hospital, the administration gives them power over the nurses....”

“I think that a strong nursing union for all RNs in each state is the only thing that can bring change.”

### ***Generally***

“Knowing what I know, I discourage anyone to become a nurse at this time. You’re treated poorly, have too many patients to care for. You’re spread thin. You get no respect. You’re treated like a maid/waitress, and your salary is poor despite a four-year degree. Something needs to be done to save this profession.”

“I would go into nursing again if I were young. It was right for me.”

“I strongly discouraged my daughter from becoming a nurse, but it is in her blood and she is enrolled at the UM in Minneapolis in the nursing program. Go figure. It’s a calling with special people, the need to be nurses.”

“I love nursing. I feel [that] nurses work very, very hard. I would choose another profession had I to do it all over again. I strongly discourage others from going into this field. It beats you up too much.”

“Nursing has been an outstanding profession for me. I love acute care hospital nursing. I am very satisfied with my work environment and pay. It has been a deeply satisfying and rewarding career for me.”

“Nursing is a noble profession.”

*For more information on health workforce issues, contact the Health Workforce Analysis Program in the Office of Rural Health & Primary Care at 651-282-6336 or visit the Web site at: [www.health.state.mn.us/divs/orh\\_home.htm](http://www.health.state.mn.us/divs/orh_home.htm)*