



TO David Schildmeier, MNA
FROM Chris Anderson and Sarah Tower-Richardi
DATE April 26, 2022
SUBJECT Survey of the State of Nursing in Massachusetts

This document reports the findings from a survey of 462 Massachusetts registered nurses conducted March 30-April 7, 2022. Respondents were drawn from the BORN list of all licensed RNs in Massachusetts and were invited to participate in the survey via text message. As has historically been the case, most responding nurses are not members of the Massachusetts Nurses Association.

EXECUTIVE SUMMARY

Registered nurses across Massachusetts see rapidly deteriorating patient care in hospitals across the Commonwealth. Over four-fifths (83%) of nurses think the overall quality of health care has gotten worse in the state, with half (49%) thinking it has gotten *much* worse. This is a major increase from last year, when 55% said the quality of care had gotten worse, and just 19% said *much* worse.

Nearly 7-in-10 (69%) say understaffing is the biggest obstacle to providing quality care. The number of RNs saying they do not feel that they *have enough time to provide patients with the care and attention each one needs* has jumped to a record high of 71%, up from 60% last year. Among direct care nurses, 71% say their employer did a fair or poor job *providing the staffing levels needed to properly care for COVID patients*, a 12-point jump in negative ratings from last year.

Insufficient compensation has surged to the forefront of issues facing RNs. Nearly two-thirds (64%) of bedside nurses now say that *inadequate pay or benefits* is a major challenge – up from less than half (48%) last year, and less than one-third (27%) in 2019.

Direct care nurses are increasingly unhappy with their employers' pandemic response, and on a variety of measures, they give their employers' worse marks than in 2021. There's a 13-point jump in the number of nurses saying that their employers are doing a poor job *providing childcare options* (59% now, 46% in 2021). And over six-in-ten (62%) direct care nurses now believe their employers are doing a poor job *providing adequate time off to deal with the impact of working during COVID*, an eight-point increase from 2021.

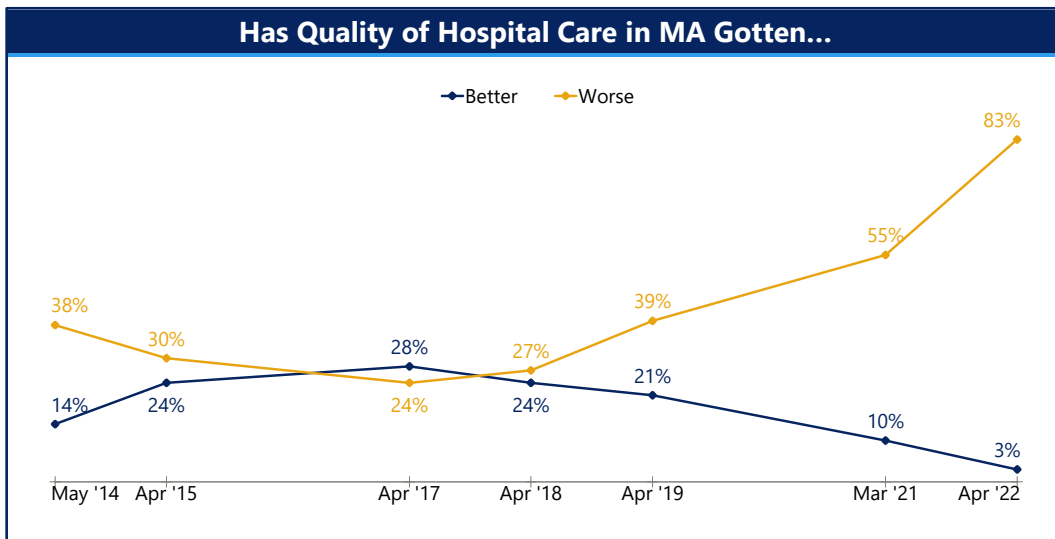
RNs are acutely feeling the emotional toll of COVID. Some of the largest negative ratings nurses give their employers are on *providing the emotional and psychological support nurses need to deal with the aftermath of the pandemic* (56% poor job) and *providing emotional support services*. Half of direct care nurses (51%) say their employers are doing a poor job providing emotional support services, a 13-point increase from 2021.

The pandemic, combined with insufficient pay and benefits, has negatively impacted nurses' desire to continue working in the health care field, with over half reporting they will leave nursing sooner than expected or pursue fewer hours. A full quarter (25%) of nurses plan to leave nursing in two years or less.

KEY FINDINGS

QUALITY OF HOSPITAL CARE

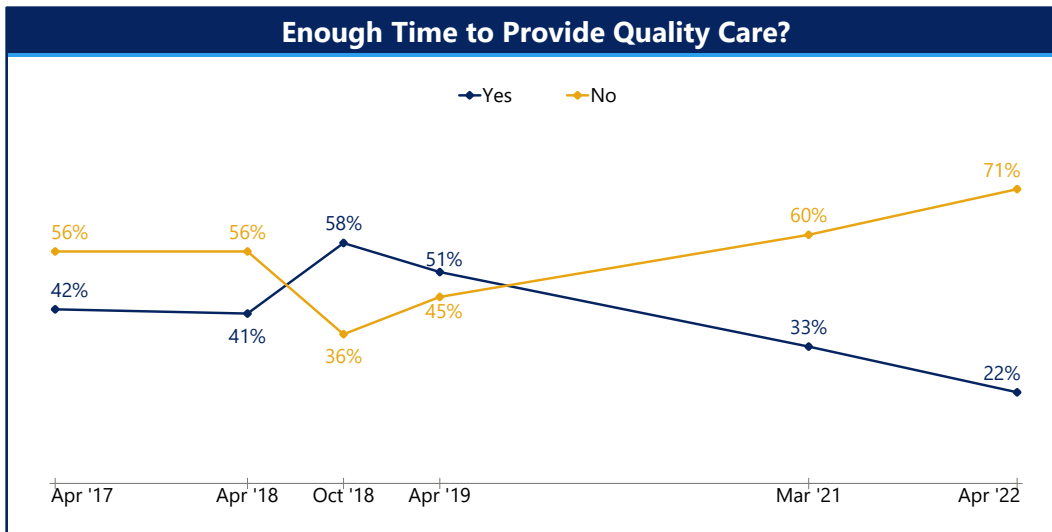
Nurses working in Massachusetts report a drastic decrease in the quality of health care over the past two years. Over eight-in-ten (83%) believe that the overall quality of health care has gotten worse in the past two years, with half (49%) saying it has gotten *much* worse. This represents a staggering 28-point increase from last year in the number who say that health care has gotten worse overall, and a 44-point increase since before the pandemic.



NURSES LACK TIME FOR PATIENT CARE

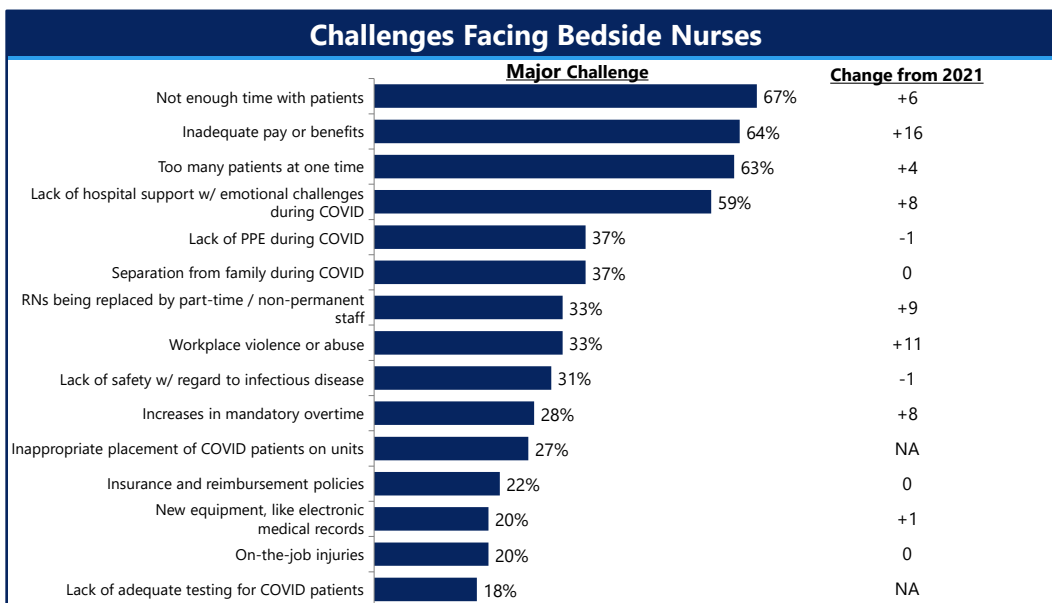
RNs continue to report that they do not have enough time to give their patients the care and attention each one needs. Seven-in-ten (71%) report having inadequate time with patients, an 11-point jump from last year.



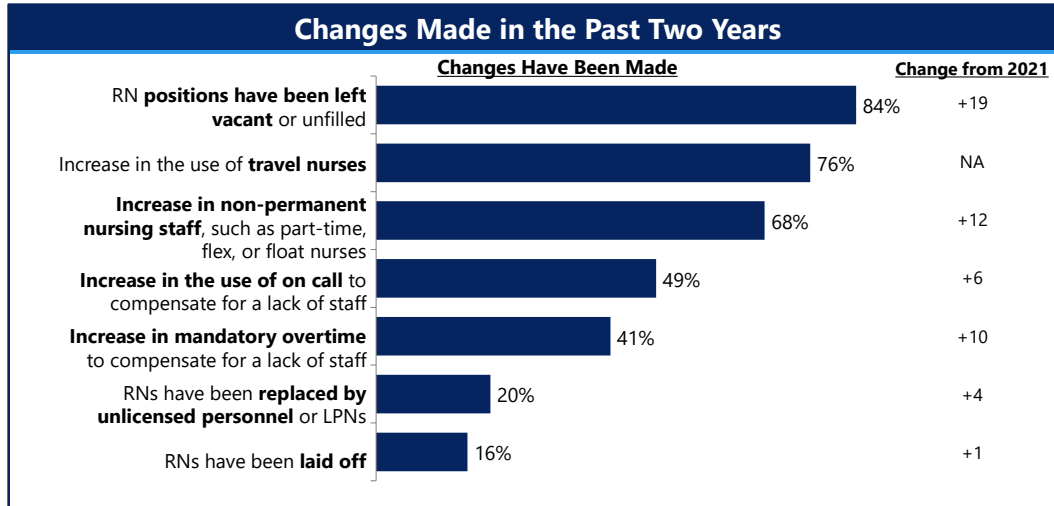


Among bedside nurses, two-thirds (67%) report *not enough time with patients* and over six-in-ten (63%) report having *too many patients at one time* are major challenges they face on the job.

Many challenges became more widespread over the last year, including *inadequate pay* (+16), *workplace violence* (+11), *use of non-permanent staff* (+9), *increased mandatory overtime* (+8), and *lack of emotional support* (+8).



Over the last two-years, most nurses have seen *RN positions being left vacant* (84%), *an increase in the use of travel nurses* (76%), and *an increase in non-permanent nursing staff* (68%). In 2019, just 50% of RNs saw positions left vacant. Nurses have also seen increased use of *mandatory overtime* (+10) and *use of on call* (+6).



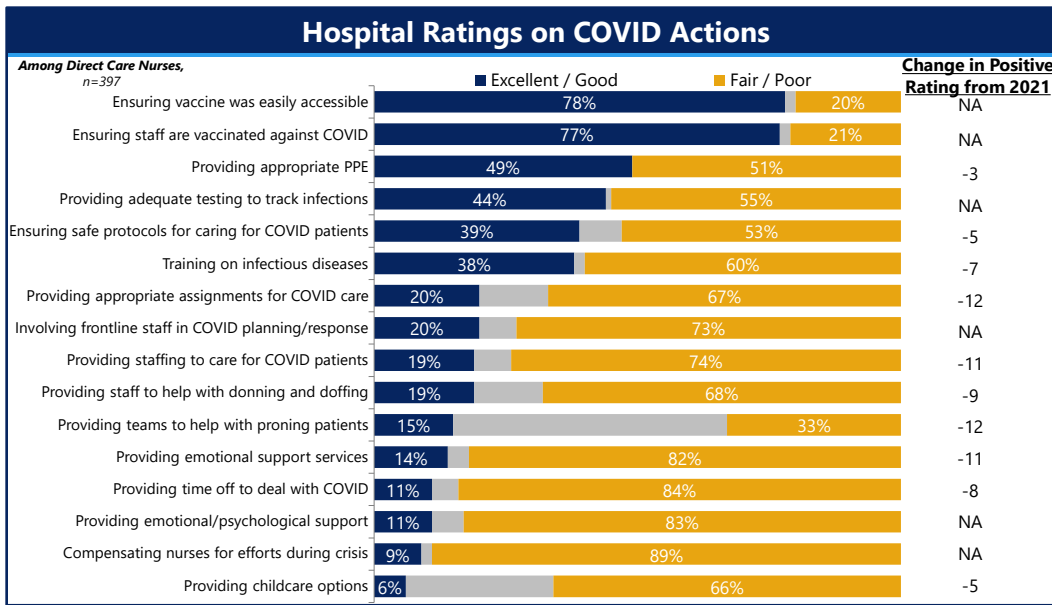
COVID CHALLENGES

Nurses generally give middling grades to their employer’s handling of the pandemic. Four-in-ten (43%) give their employer an A or B grade, while a three-in-ten (30%) give their employer a C.

Direct care nurses, also give their employers largely negative ratings for specific actions during the pandemic. With the exception of *ensuring the COVID vaccine was easily accessible to staff* and *providing adequate testing for staff to track infections*, RNs rated their employers’ COVID response in the negative. In particular, over eight-in-ten direct care nurses rated their employer either *fair* or *poor* for the job they did *compensating nurses for their efforts during the COVID crisis*, *providing adequate time off to deal with the impact of working during COVID*, *providing the emotional and psychological support nurses need to deal with the aftermath of the pandemic*, and *providing emotional support services*.

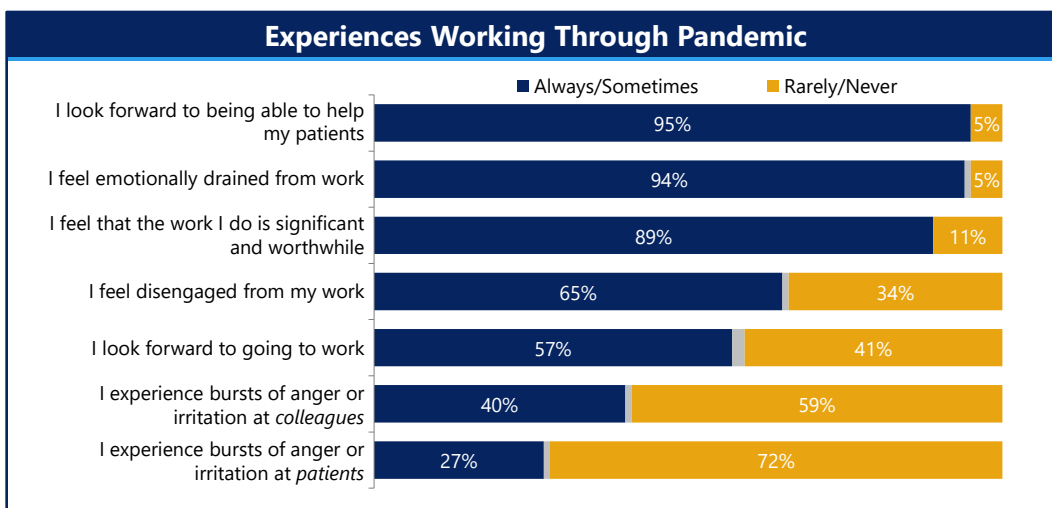
Direct care nurses also largely think their employers did a worse job on these indicators in 2022 than in 2021.





COVID'S EMOTIONAL TOLL

RNs feel positive about their role in caring for patients and feel that their efforts are worthwhile, but it is emotionally draining. Although 95% *always or sometimes* say that they *look forward to being able to help their patients* and 89% *always or sometimes* feel that *the work they do is significant and worthwhile*, a similar number (94%) also *always or sometimes* feel *emotionally drained from work*, and two-thirds (65%) feel *disengaged from work*



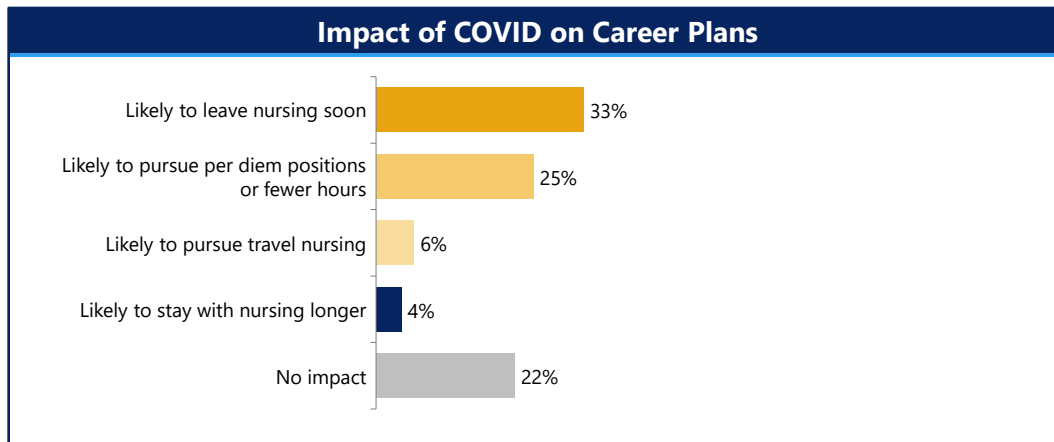
Among nurses who say that they will leave nursing sooner because of COVID, fully 99% say that they *always or sometimes* feel *emotionally drained from work* and eight-in-ten (83%) feel disengaged.



Nurses want more support from their employers; *time off to recuperate* (80%) and *financial support* (74%) are the top two benefits they would find most helpful. Nurses at direct care teaching hospitals (85%) and those under age 41 (86%) are most likely to want time off.

RETENTION

Over half of RNs report planning to leave nursing sooner than originally planned (33%) or reducing their hours (25%) as a result of their experience with the COVID pandemic. Fully a quarter (25%) of nurses think they will leave the field of nursing in two years or less.



Among RNs who say they will leave nursing in the next two years, about a third (31%) are planning to leave because of stress and burn out. Another three-in-ten (29%) plan to retire.

Salary increases are the number one benefit that employers could offer that would entice nurses who plan to leave the field to continue working. Seven-in-ten (69%) say that *salary increases* would persuade them to continue working as a nurse. Additionally, half say that having *enough ancillary staff* (53%) and *limits on the number of patients that can be seen at once* (49%) would also persuade them to continue on as a nurse.

PAY

There has been a large jump in the number of direct care nurses who say that *inadequate pay or benefits* is a *major* challenge. Almost two-thirds (64%) find this to be a major challenge, a 16-point jump from 2021.

And when forced to choose, there's a slight preference for *receiving higher than expected wage increases* (56%) than *having a set working schedule* (37%). But even still, nearly four-in-ten see having a set work schedule as more important.



METHODOLOGY

“The State of Nursing in Massachusetts” was commissioned by the Massachusetts Nurses Association and conducted March 30-April 7, 2022.

Respondents were randomly selected from a complete file of the 150,000 nurses registered with the Massachusetts Board of Registration in Nursing, and geographic quotas were used to ensure accurate representation across all regions of the state. Nurses were contacted through text and the survey was completed online on their phone or computer.

Screening questions were used to verify that respondents were registered nurses working in Massachusetts. Slight age and care setting (teaching hospital, community hospital, non-hospital care) weights were applied to ensure the data accurately matched demographic information available on the statewide list of nurses and the actual breakdown of healthcare facilities across the state.

A majority (62%) of RNs interviewed were not MNA members.

A total of 462 interviews with Massachusetts nurses were completed as part of this survey. Questions have a margin of error of ± 4 (at the 95% confidence level).

