

Status of Nursing in Delaware

Presented by:

Dr. Lucille C. Gambardella

Chair, Dept of Nursing, Wesley College

Study completed by:

- Paula Smallwood, RN, Grad student
 - Shari Thomassen, RN, Grad student
 - Cheryl Watson, RN, Grad student

 - Mrs. Karen Panunto, MSN, RN
 - Dr. Bob Contino, EdD, RN
 - Dr. Lucille Gambardella, PhD, RN, CS
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Study partners

- Delaware Health Care Commission
 - Delaware Board of Nursing
 - Wesley College, Department of Nursing
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Study design

- ❑ Replication of study completed by Karen Panunto, MSN, RN in 2000
 - ❑ Quantitative and qualitative survey methodology
 - ❑ Self-reporting
 - ❑ Mailed questionnaire
 - ❑ SPSS analysis
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Results

- Approximately 10,100 surveys mailed
 - 7, 029 surveys returned
 - Return rate of 70%
 - Of 7, 029 returned, 5, 854 practice in DE
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Quantitative Results

□ Age

Missing data: 43

Age	Freq.	%
20-29	671	12
30-39	1375	24
40-49	1789	31
50-59	1485	26
60-69	442	8
70+	49	1
Total	5811	100

Quantitative cont.

□ Gender:

■ Female 6570 93.6%

■ Male 451 6.4%

Quantitative cont.

- 15% live in DE work elsewhere

 - 85% responding live and work in DE
 - 53% in New Castle county

 - 14% in Kent county

 - 19% in Sussex county
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Living status cont.

- Nurses working, but not living in DE
 - 12% Pennsylvania
 - 4% New Jersey
 - 0.5% Maryland
 - 3% other states
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Quantitative cont.

□ Race/Ethnicity

□ Missing: 29

R/E	Freq	%
White	5067	87
Black	452	8
Asian	134	2
Hisp	64	1
Multi	45	1
A. Ind/	20	0.3
Total	5825	100

Quantitative cont.

□ Yrs. In Nursing

□ Missing: 63

Years	Freq	%
<10	2045	35
11-20	1390	24
21-30	1386	24
31-40	746	13
>40	224	4
Total	5791	100

Quantitative cont.

□ Education

□ Missing: 14

Educ	Freq	%
BSN	2187	37
AD	1840	32
Dip	983	17
MSN	800	14
Doct	30	0.5
Total	5840	100

Quantitative cont.

<input type="checkbox"/> Employment status:		
<input type="checkbox"/> Nursing	5710	98%
<input type="checkbox"/> Non-nsg	27	0.5%
<input type="checkbox"/> Retired	29	0.5%
<input type="checkbox"/> Not looking	31	0.5%
<input type="checkbox"/> Seeking job		
<input type="checkbox"/> In nursing	24	0.4%

Quantitative cont.

□ Anticipated years of practice

□ Missing: 403

Yrs	Freq	%
0-9	1236	23
10-19	1827	34
20-29	1652	30
30-39	628	12
>40	108	2
Total	5451	100

Quantitative cont.

- Practice settings
- Top 6 noted
- Others included
 - Schools
 - Education
 - Occupational
 - clinics

	Freq	%
Hosp	3038	53
LTC	440	8
HH	245	4
Amb	176	3
MDoff	277	5
Other	407	7

Quantitative cont.

- Primary role

- Top 6, others
 - Case manager
 - Utilization review
 - Researcher
 - Consultant
 - QA/infection control

Role	Freq	%
Staff	3009	52
Mgr	708	12
APN	366	6
Fac/ad	247	4
Fac	204	4
Other	524	9

Quantitative cont

- Advanced practice
- Missing: 55

Spec	Freq	%
CNS	17	8
NP	82	38
CRNA	104	48
CNM	12	6
Total	215	100

Quantitative cont.

- Hourly wages
- >40 346 9%
- Missing: 1786

Wage	Freq	%
<10	2	0
10-15	23	1
15-20	130	3
20-25	710	18
25-30	1385	34
30-35	1065	26
35-40	407	10

Quantitative cont.

□ Yearly wage

□ Missing: 2457

<10K	7	0.2
10-20	74	2
20-30	142	4
30-40	294	9
40-50	659	19
50-60	939	28
60-70	633	19
>70	649	19

Quantitative summary

- ❑ Majority of nurses female and white (87%)
 - ❑ Median age of a nurse is 44.1 years
 - ❑ 64% of nurses do not intend to be practicing in the next 10-29 years
 - ❑ Majority of nurses earn between \$25-35/hour
 - ❑ 1,061 known licensed do not practice in DE
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Qualitative findings

- Clusters of positive and negative findings
 - Approximately 40% of respondents provided qualitative comments
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Qualitative Findings

□ Issues

- Salaries
 - Workload
 - Value of nursing
 - Working conditions
 - How nurses treat each other
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Salaries

- Largest area of discontent
 - Wages not equal to responsibility
 - Commentary:
 - “electricians make more”
 - “underpaid, overworked, not valued”
 - Compensation = staffing shortages
 - Salaries are inappropriate
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Nursing not valued

- Next largest area of concern
 - Contributions not recognized
 - Commentary:
 - “I feel more abused than appreciated”
 - “facilities don’t care about retention”
 - “we don’t receive the recognition we deserve”
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Working conditions

- ❑ Unsafe working conditions noted
 - ❑ Many nurses leaving profession
 - ❑ Commentary:
 - “nurse to patient ration is too high”
 - “I left the hospital because ratios were unsafe”
 - “there is too much liability in nursing”
 - “I took a \$10,000 pay cut for safety”
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Workload

- Too much documentation and paperwork
 - Burnout is high
 - Commentary:
 - “there is too much paper flowing”
 - “demands of paperwork are overwhelming”
 - “paperwork leads to burnout”
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Nurses treat each other poorly

- Not helpful to new nurses
 - Many nurses in nursing for the money not for helping people
 - Commentary:
 - “non-nurses do too many nursing tasks”
 - “nurses need to be supportive of one another and they are not”
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Qualitative cont.

- Positive commentary:
 - “it is great to be a nurse”
 - “I am sad to retire”
 - “I retire and keep coming back; I love nursing”
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Qualitative summary

- ❑ Nurses want a voice
 - ❑ Major issues need to be addressed and include salaries, workload, work environment, value of nursing, and professional relationships
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Comparison to 2000 study

- ❑ Number of males has increased from 4.5% to 6.4%
 - ❑ Largest number of nurses remains in the 40-49 age range but dropped from 36.3% to 31%
 - ❑ 20-29 year olds rose from 9.4% to 12%
 - ❑ 50-59 year olds rose from 21.8% to 26%
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Comparison cont.

- White, non-Hispanic decreased from 92.2% to 87%
 - Black grew from 5.7 to 8%
 - Hispanic grew from .4% to 1%
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Comparison cont.

- ❑ Those in nursing <10 years grew from 28% to 35%
 - ❑ Those in nursing from 11-20 and 21-30 years both declined: 31.6% to 24% and 25.7% to 24% respectively
 - ❑ Those in nursing 31-39 & 40+ years both increased 11.8% to 13% and 2.9% to 4% respectively
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Comparison cont.

- 50% of employed nurses work at least 40 hours/week, down from 2000 when 66% worked at least 40 hours/week
 - 53% work in hospital setting compared to 40% in 2000
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Comparison cont.

- ❑ 43% earned \$20-25/hour in 2000
(highest response rate)
 - ❑ 34% earned \$25-30/hours in 2005
(highest response rate)
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Comparison cont.

- In 2000, highest year's wage > \$50,000/year for 27% of nurses
 - In 2005, highest year's wage > \$50,000 for 66% of nurses
 - Indicates 39% increase
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Recommendations

- ❑ Aggressive programs to recruit and retain nurses
 - ❑ Address nursing faculty shortage
 - ❑ Better collaboration for clinical site availability
 - ❑ Tap into nurses licensed in DE but not working in DE
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Recommendations cont.

- Address salary issues
 - Evaluate work environments and develop action plans for improvement
 - Positive public relations
 - Develop a Center of Nursing Practice and Research
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