

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

This document reports the findings from a survey of 510 Massachusetts registered nurses conducted February 27 - March 11, 2024. 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.

This survey of RNs has been conducted 12 times since 2003 and provides a rich portrait of how hospital care and the state of nursing in Massachusetts has evolved over the past two decades.

EXECUTIVE SUMMARY

Registered nurses across the Commonwealth continue to have a bleak outlook on the state of care in hospitals. They see an ongoing deterioration of conditions and don't think hospital management or lawmakers are listening to their concerns or doing enough to protect the quality of patient care.

Eight-in-ten nurses say that the quality of care at hospitals in Massachusetts has gotten worse in the past two years, with half (49%) saying care has gotten *much* worse.

Understaffing is widely seen as the biggest obstacle to delivering quality care, with six-in-ten (60%) registered nurses saying it is the biggest problem they face. *Not having enough time with patients* and *caring for too many patients at once* remain at the top of the list of major challenges facing bedside nurses, with two-thirds citing each challenge. Additionally, over a third (36%) of RNs are concerned that unsafe staffing conditions put their nursing license at risk during most of their shifts.

RNs continue to report being aware of other serious negative patient outcomes as a result of understaffing, including *nurses lacking time to properly comfort and assist patients and families* (80% aware), *nurses lacking time to educate patients and provide adequate discharge planning* (76%), *re-admission* (65%), *medical errors* (55%), and even *death* (26%).

Given the current conditions at hospitals, four-in-ten (39%) would not feel safe admitting a family member to the unit on which they work.

Nurses see the lack of regulation across the state as detrimental to patient care. Six-in-ten (61%) say that hospitals are not properly regulated to keep patients safe, and three-quarters (76%) do not think that lawmakers on Beacon Hill are responding to issues RNs have raised about unsafe staffing levels in hospitals.

Further, when nurses do report unsafe staffing levels and patient loads to hospital administrators, they are not responsive. Six-in-ten (62%) nurses say that administrators are not responsive to their feedback, including over a quarter (27%) saying that they are *not responsive at all*. Additionally, when nurses have an unsafe patient assignment, almost half (47%) say that management *rarely* or *never* adjusts their patient loads to meet patients' needs – up 20 points from 2019.

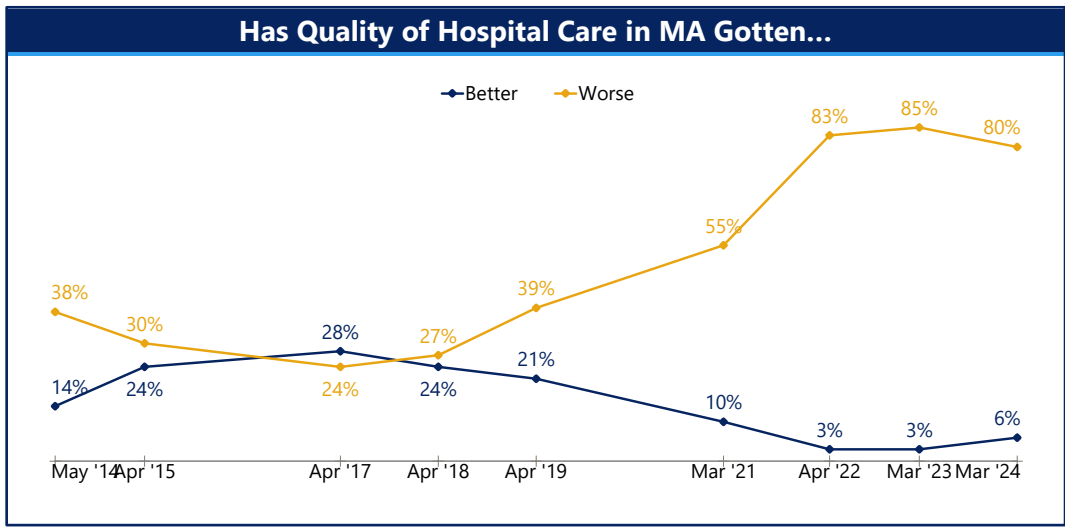
Adding to the difficult work environment, nurses in Massachusetts continue to experience high rates of violence and abuse in their workplace. Over two-thirds (68%) of RNs say they have personally encountered at least one instance of workplace violence or abuse within the past two years, and over six-in-ten (64%) say that it is a serious problem, similar to last year, but up 22 points from March 2021.

With the underlying stresses of understaffing and safety concerns, one-in-five (20%) nurses plan to leave nursing in two years or less, doubling since 2019.

KEY FINDINGS

QUALITY OF HOSPITAL CARE

Nurses working in Massachusetts continue to report a poor quality of care in hospitals. Eight-in-ten (80%) RNs say the overall quality of healthcare in Massachusetts hospitals has gotten worse in the past two years, with half (49%) saying it has gotten *much* worse. This is a 41-point increase from before the pandemic.

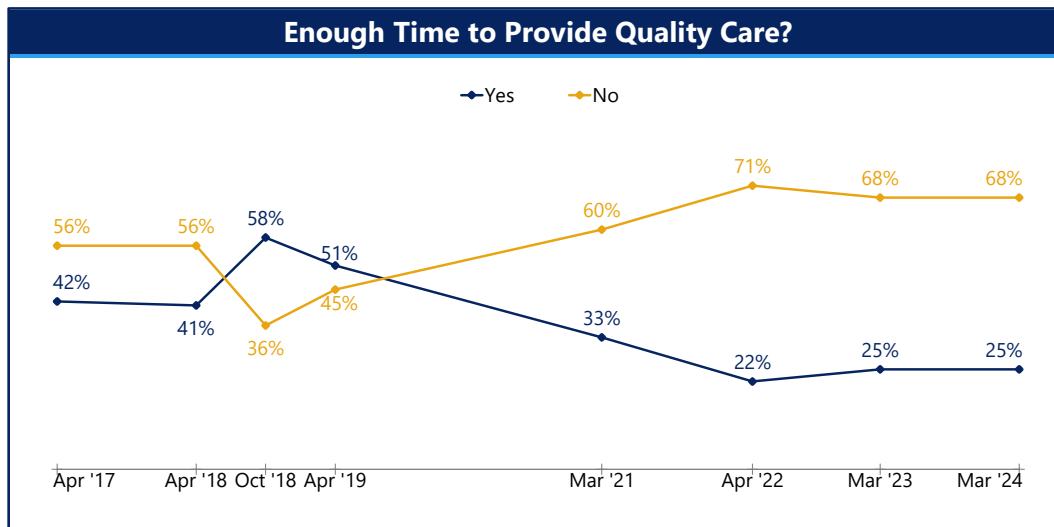


STAFFING AND PATIENT CARE

Massachusetts nurses continue to report that *understaffing* and *having to care for too many patients at once* are the biggest obstacles they face in delivering quality care to patients. Almost seven-in-ten (68%) nurses

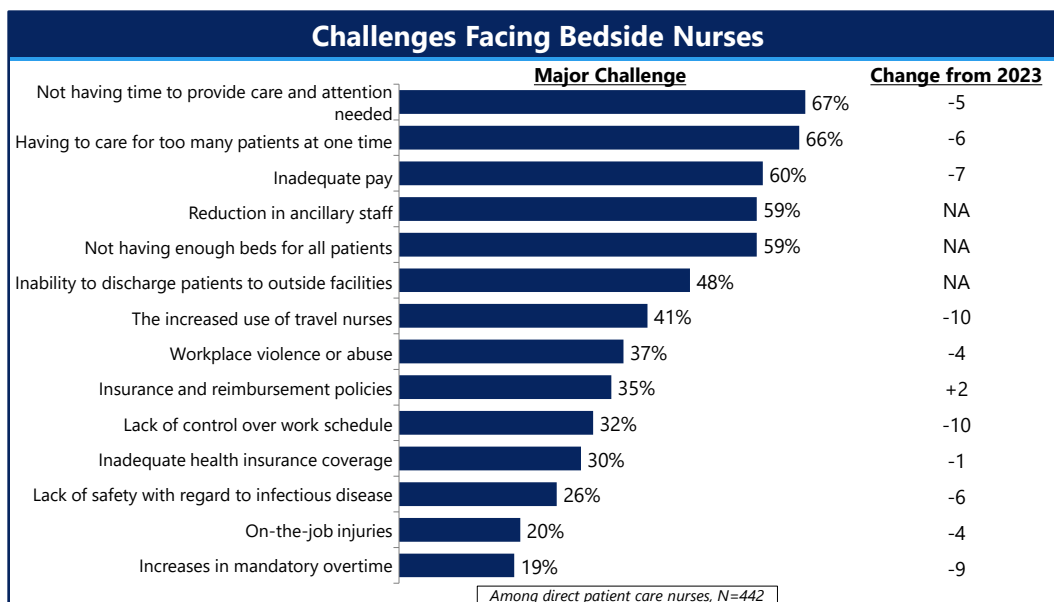


do not have enough time to provide their patients with the care and attention each one needs, the same as last year and a 23-point jump from prior to the pandemic.



Without prompting, six-in-ten (60%) nurses say that *understaffing* and *too many patients* are the biggest obstacle they face in delivering quality care. This is most acutely felt among direct care community hospital nurses, with three-quarters (75%) citing it as their biggest obstacle.

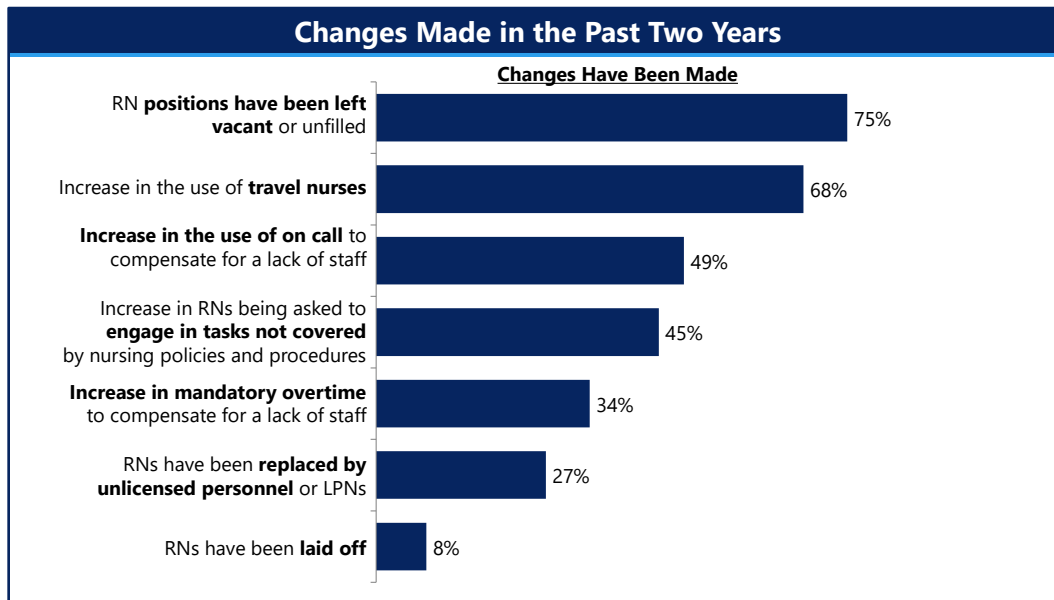
Bedside nurses also face a variety of other challenges related to understaffing and having to care for too many patients, including *not having time to provide each patient the care and attention they need* (67% major challenge), *having to care for too many patients at one time* (66%), *reduction in ancillary staff* (59%), and *not having enough beds for all patients* (59%). *Inadequate pay* is another major challenge for six-in-ten (60%) bedside nurses.



Nurses at direct care community hospitals and those who have been in the profession for five years or less feel these challenges more acutely. Almost eight-in-ten (78%) direct care community hospital nurses say *having to care for too many patients at one time* is a major challenge. *Not having time to provide each patient the care and attention they need* (75% major challenge) and *reduction in ancillary staff* (74%) are also major challenges to three-quarters of direct care community hospital nurses.

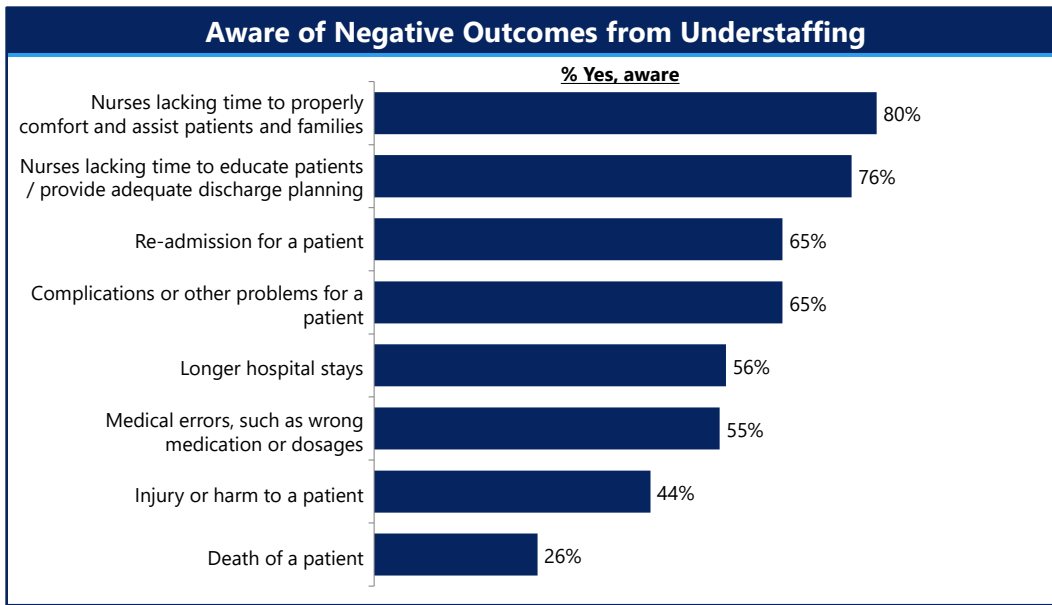
For those newer to the profession, *inadequate pay* (82% major challenge) and *having to care for too many patients at one time* (79%) are the top challenges.

In the past two years, nurses have seen many changes where they work. *RN positions left vacant or unfilled* (75%) and *increase in the use of travel nurses* (68%) are the top two changes, and both have decreased compared to last year: *RN positions left vacant or unfilled* (6-point decrease); *increase use of travel nurses* (9-point decrease).



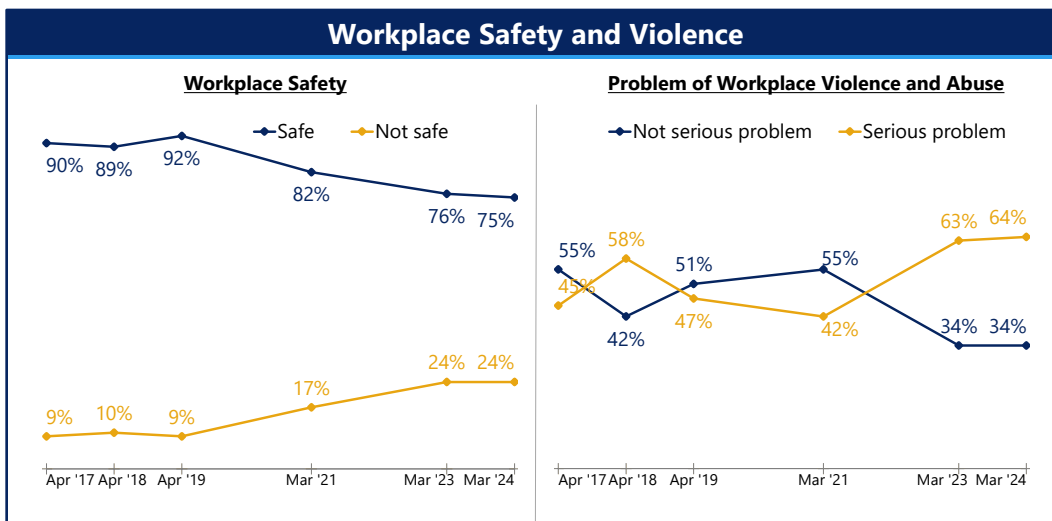
Nurses continue to be widely aware of a variety of negative outcomes that result from RNs having to care for too many patients at once. Over three-quarters of nurses are aware of *lacking time to properly comfort and assist patients and families* (80%) and *lacking time to educate patients and provide adequate discharge planning* (76%), while two-thirds of nurses are aware of *re-admission for a patient* (65%) and *complications or other problems* (65%). A quarter (26%) of nurses are even aware of *death of a patient* as a result of an RN's patient load.



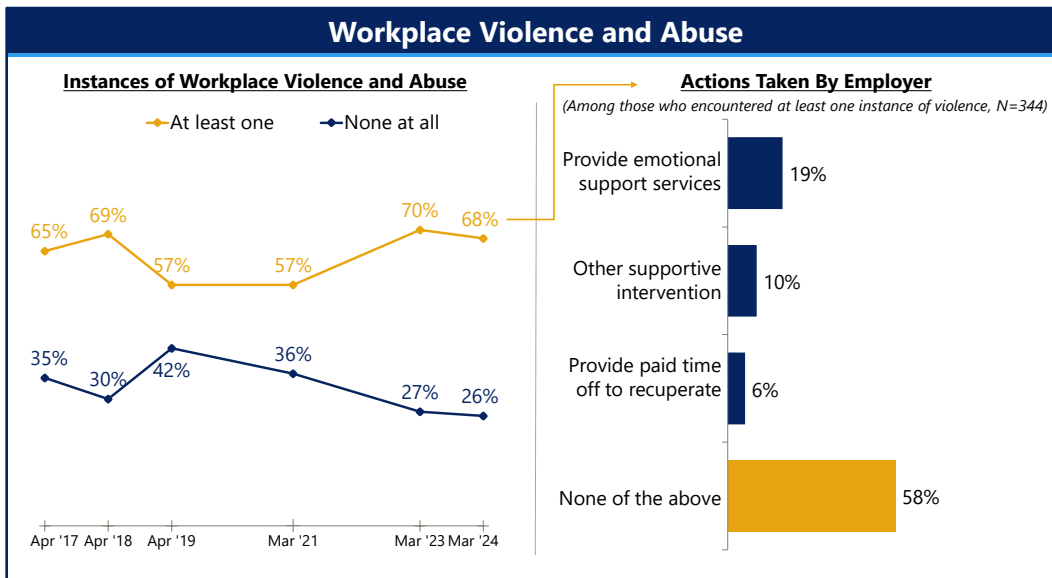


WORKPLACE VIOLENCE

Workplace violence and abuse continues to be a very serious problem for Massachusetts nurses. Six-in-ten (64%) say workplace violence and abuse is a serious problem, similar to last year and up 22 points from 2019. Additionally, a quarter of nurses (24%) do not feel safe in their workplace, including three-in-ten (31%) of those working in direct care at teaching and community hospitals. This is similar to last year, but up 15 points from prior to the pandemic.

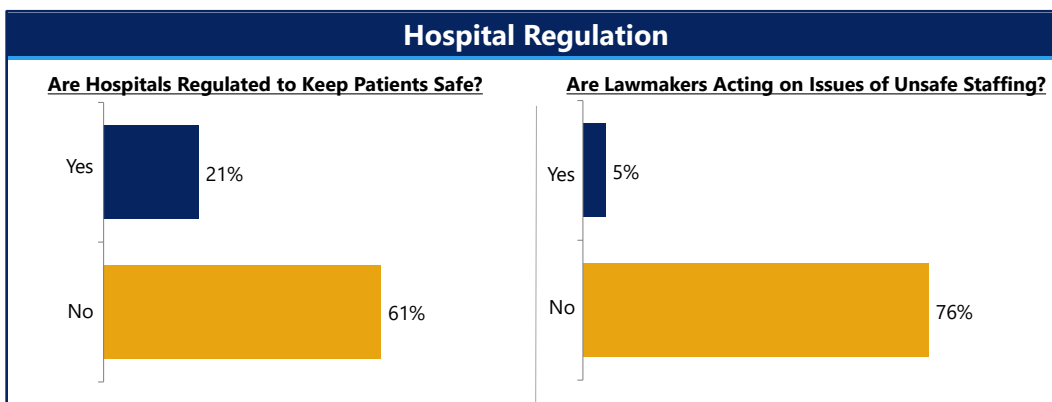


Seven-in-ten (68%) nurses have personally encountered at least one instance of workplace violence and abuse in the past two years. And among those, six-in-ten (58%) say their employer did not take any action to provide support.



REGULATION

Nurses in Massachusetts see the lack of regulation at hospitals as determinantal to patient care, with six-in-ten (61%) saying hospitals are not properly regulated to keep patients safe. Additionally, nurses do not feel heard—three-quarters (76%) say lawmakers on Beacon Hill are not hearing and acting on issues RNs have raised about unsafe staffing levels in hospitals.



There has been a large jump in nurses reporting that their administrators are *not* responsive to their feedback on patient loads. Six-in-ten (62%) report that hospital administrators are not responsive, an 18-point increase from 2019. Half (47%) say that management *never* or *rarely* adjusts their patient loads when they have an unsafe patient assignment, up 20 points from before the pandemic. At direct care



community hospitals this is higher, with six-in-ten (57%) nurses saying their patient loads are not adjusted when needed.

RETENTION

One-in-five (20%) RNs in the Commonwealth plan to leave nursing in two years or less, doubling since 2019 when 10% said the same. Four-in-ten (43%) nurses who plan to leave nursing in the next two years say they will *retire*, while almost as many (37%) are leaving because of *burnout / exhaustion / lack of support from employer* – an 11-point increase from last year.

Main Reason for Leaving Nursing	
Age / Retiring	43%
Burnout / Exhaustion / Stress	24
Lack of support from employer	13
Overworked / Understaffed	11
Healthcare has changed	9
Lack of pay	8
Prevented from providing quality care	8
Poor working conditions	7
Becoming an NP / Back to school	5
Lack of respect	4

Among those leaving nursing in two years or less, N=102

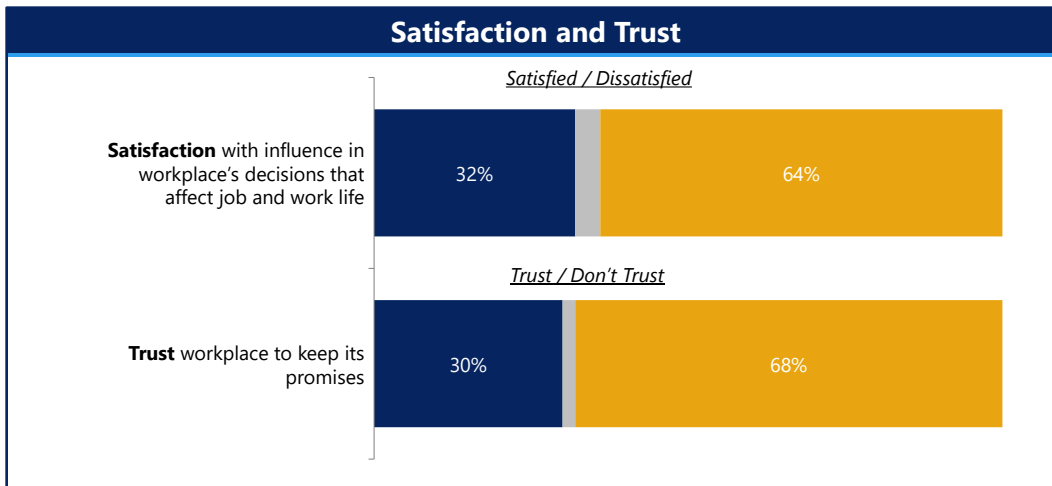
Among those planning to leave nursing in two years or less, the top benefit employers could offer as an enticement to stay would be *salary increases* (55%). This is followed by *limits on the number of patients that can be seen at once* (43%) and *enough ancillary staff* (37%).

Among those no longer working in a hospital setting, a quarter (26%) say that they left direct care in a hospital as a result of *understaffing*, *having to care for too many patients*, and *unsafe staffing situations*.

UNIONS

A majority of nurses are both dissatisfied with the *influence they have in their workplace's decisions that affect their job and work life* (64% dissatisfied) and don't trust their *workplace to keep its promises* (68% don't trust). Those working in direct care at teaching (74% dissatisfied; 75% don't trust) and community hospitals (71% dissatisfied; 73% don't trust), those not currently in a union but would vote for one (67% dissatisfied; 72% don't trust), and those who encounter unsafe staffing conditions most shifts (84% dissatisfied; 83% don't trust) are the most likely to feel they do not have influence in workplace decisions and do not trust their workplace to keep its promises.



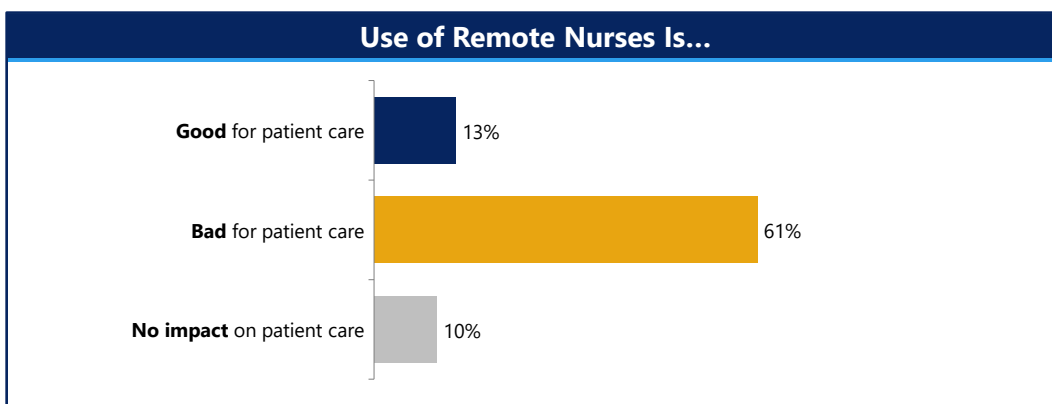


If given the chance, over half (56%) of nurses who are not currently in a union would vote for the union. About two-in-ten would actively vote against the union (21%) or are undecided (23%). *Better pay* (25%) and *better working conditions* (19%) are the top benefits RNs think a union provides.

CONTRACT NURSES

The majority of nurses (59%) do not have interest in trying a new model of work in which they would use an app-based platform to find shifts and would be considered independent contractors instead of employees. Just one-in-ten (9%) say this is something that they would definitely be interested in trying.

When it comes to the use of remote nurses, six-in-ten (61%) say that they are bad for patient care. Those working in direct care at teaching (65%) and community (64%) hospitals are most likely to say this is bad for care. Those in non-direct care settings are less likely to think this would be bad for patient care (49% bad for care), although half still think it would have a negative impact.



METHODOLOGY

“The State of Nursing in Massachusetts” was commissioned by the Massachusetts Nurses Association and conducted February 27 - March 11, 2024.

Respondents were randomly selected from a complete file of the 155,000 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 health care facilities across the state.

A majority (59%) of RNs interviewed were not MNA members.

A total of 510 interviews with Massachusetts nurses were completed as part of this survey. Questions have a margin of error of ± 4 (at the 95% confidence level).

