Factors that contribute to nursing job satisfaction at Valley Hospital

Christopher Jones
University of Nevada Las Vegas

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Factors that Contribute to Nursing Job Satisfaction at Valley Hospital

By

Christopher Jones

Professional Paper for the requirements towards a Masters Degree in Education

Fall 2004
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Introduction

The United States is in the midst of a nursing shortage and it is expected to get even worse in the coming years due to several trends. These trends include the aging of the workforce where many nurses will be retiring in the next few years, the low enrollment in nursing schools, nurses leaving the profession for other fields of work and the lack of interest that many people are showing towards a career in nursing.

This shortage began back in the mid 1980’s and is expected to last another decade unless something is done quickly. The possible lack of trained personnel to properly staff facilities and treat the medical conditions of the sick and injured should be a top concern to those in power. This is an area of special interest in the Las Vegas Valley with the opening of three new acute care facilities within the next two years. With there already being a shortage, something must be done proactively to ensure that there will be enough nurses to staff these new facilities.

The basis of my study is to determine which factors contribute to nursing job satisfaction with a special focus on the role that the nursing shortage plays in satisfaction. The nursing shortage is operationalized as the nurses’ perception of
whether there was proper staffing (enough nurses in the profession) on their work unit. To describe this affect I performed a survey of the nurses at Valley Hospital here in Las Vegas. I will discuss this in more detail further along in this paper.

**Literature Review**

There have been many studies done in the past in regards to the nursing shortage. These studies mainly covered the shortage of nurses, job dissatisfaction and job satisfaction. I will be using previous studies as the main part of the literature review. Some of these studies were performed directly in regards to nursing while others pertained to jobs in industry outside of nursing. Along with these previous studies, I will be discussing some initiatives that are currently taking place to address this issue.

**Nursing Shortage**

There have been numerous studies done and data collected on the shortage of nurses in the last century. The US Bureau of Labor Statistics did research concluding that there will be a need for one million new and replacement nurses by the year 2010 (Bureau of Labor Statistics, 2002-2003). This number alone is staggering when looking at one of the major reasons that there is a shortage. There are fewer and fewer individuals joining the nursing profession. There was a decrease in first-time test
takers for the NCLEX-RN exam of thirty-one percent between the years 1995 and 2002. There were a total of 66,286 examinees that sat for their nursing boards in 2002, compared to 96,438 in 1995 (American Association of Colleges of Nursing, 2003). This is a difference of 30,152 fewer students taking their boards for the first time. With the prediction from the US Bureau of Labor Statistics of needing one million new nurses in the next seven years, at this rate the nation will fall short by over 500,000 nurses.

Right now in the United States there is thought to be a need for 126,000 nurses (American Hospital Association, 2003). In the year 2000, there were approximately 2.7 million practicing nurses (Division of Nursing). So, if the Bureau of Labor Statistics is correct, then we will need to replace over one third of the current nurses in the next seven years. I do not believe that we will even come close to making this happen. There was another study performed by the Health Resources and Services Administration (Health Resources and Service Administration, 2002). This study estimated that in 2002, there were thirty states that had a shortage of nurses and that over the next two decades the number of states would rise to forty-four. This study did not list the states that were already short or which ones that they were predicting to join the crowd in the next decade.
Research has also shown that there are many reasons for these shortages across the nation. One of the major reasons for the shortage of nursing professionals is the aging of the workforce. The average nurse today is forty-three years old and forty percent of all nurses will be over the age of fifty by the year 2010 (American Hospital Association, 2003). This is the oldest average age ever recorded for registered nurses. This clearly shows that the younger generation is not getting into the nursing profession, but instead they are possibly going into the fields of technology and computers. With the aging of the nursing workforce, there must be major push to get younger individuals more interested in healthcare in general. There are initiatives out there currently to try and address the aging of the nursing workforce which will be addressed later.

**Job Satisfaction**

Job satisfaction has been widely studied and discussed within several disciplines including psychology, management, sociology and nursing. There does not seem to be one universal definition of job satisfaction. Though a bit dated, I believe that the definition given by Locke back in 1969 explains job satisfaction very well. Locke (1969) views job satisfaction as an evaluation that the employee makes of the job and the environment surrounding the job. Locke goes further to say that this evaluation depends on two components. These are what the
employee actually experiences at work and what values or desires for rewards the employee brings to the workplace. The presence or absences of these two factors are what determine one’s job satisfaction.

Other studies have been done in the past that have shown how autonomy and the power to make decisions contributed highly to job satisfaction. A study by Bucknall and Thomas in 1996 concluded that “moderate levels of challenge result in high satisfaction levels whereas too much or too little challenge results in diminished satisfaction” (Bucknall & Thomas, 1996). Another area that has been researched and has been shown to have an impact on job satisfaction is the concept of empowerment. This can be obtained by an employee when they have been given the opportunity to improve their competence, through sharing the control and power of their organizations. Empowerment makes the employee feel as though what they express and feel really matters to the organization (Morrison, Jones and Fuller, 1997).

**Nursing Job Satisfaction**

My main focus of the literature review had to do with job satisfaction as it pertains to the nursing field. This area was of particular interest to me because of how it has been related to turnover and it has a significant correlation with the intent of nurses to leave the field of nursing (Price & Mueller, 1986). In their study, Price and Mueller found that job satisfaction
was the most important variable in regards with the intent of healthcare professionals to leave their professions.

There have been several studies done in regards to job satisfaction among nurses. A study done by Irvine and Evans in 1995 found that job satisfaction had more to do with work content and work environment than that of economic or individual difference variables (Irvine & Evans, 1995). Many have thought or assumed that the economic value from nursing would be a satisfier, but the study done by Irvine and Evans proved to be different.

A study was conducted by Morrison, Jones, and Fuller in 1997 that examined the relation between empowerment and leadership style and the effect that they had on job satisfaction with nurses (Morrison, Jones & Fuller, 1997). They did their research on licensed and non-licensed personnel to see if there was a difference. They found that transformational leadership accounted for four times as much variance in job satisfaction as empowerment in non-licensed personnel, compared with an equal amount of variance between leadership style and empowerment in licensed personnel in nursing. In regards to job satisfaction alone, they found that the main reason for this difference was possibly the work itself. The licensed professionals probably took more pride in their work and felt more important in their positions compared to the non-licensed
personnel. These individuals may not have felt that they contribute to the overall goals of the facility as much as the licensed nurses. The licensed nurses also felt as though they had more autonomy and decision making power in their positions than the non-licensed personnel.

In regards to nurses being satisfied or dissatisfied with their jobs or careers, I believe that all you need to look at is the current nursing atmosphere here in Las Vegas. At most of the acute care facilities here in Las Vegas the nurses will be covered by a collective bargaining agreement. The American Nurses Association Union with its 100,000 members joined the AFL-CIO. This is a group of sixty-four of the countries most powerful labor unions. They did this with the hope of gaining more collective bargaining power and influence on legislative issues (Bellandi, 2001). According to Bellandi, “the move to join the AFL-CIO comes at a time when nurses around the country are clamoring for higher wages, better benefits, improved staffing and better working conditions in the midst of what some say is a national nursing shortage.” If the study that was done in 2001 by the American Association of Colleges and Nursing truly showed how more than forty percent of nurses were not satisfied with their careers, then something must be done to find out what satisfies and dissatisfies these professionals and
these things need to be changed to keep these individuals in the field of nursing.

An aspect of the dissatisfaction of many nurses can be seen because they are working so short staffed and so many hours currently. Many of the professionals seem to be getting “burned out” in their current positions. A survey done in 2001, by the American Association of Colleges of Nursing showed that more than forty percent of nurses were not satisfied with their careers (American Association of Colleges of Nursing, 2003). I am sure that this number is very high compared to other professions. Many of the reasons that have been given in the past for job dissatisfaction from nurses are the feelings of being overworked, understaffed, working mandatory overtime, not being appreciated and not being given the time to care for their patients in the proper manner. These are all very valid reasons for not being satisfied and these are the areas that need to be addressed. But it could be that many of these reasons that nurses have given are only because of the current shortage and the anxiety of what is being projected to become even worse.

Another study was performed by the Federation of Nurses and Health Professionals (FNHP, 2001). They conducted a national telephone survey with a group of 700 registered nurses that provided direct patient care at that time in a hospital, clinic or other healthcare facility. They found that fifty-three
percent of these registered nurses were either only somewhat satisfied or not satisfied by the degree to which they had a voice in the decision making process. They also found that forty-seven percent were only somewhat satisfied or not satisfied by the support and respect that they receive from upper management. With studies like these, it is no wonder that individuals are not coming into the profession while others are leaving it.

In a 2001 study, Fletcher studied hospital registered nurses for job satisfaction and dissatisfaction (Fletcher 2001). She surveyed registered nurses in ten Michigan hospitals in order to address work-related stresses among the group. She used the Health Profession Stress Inventory to measure stress in the group and found that the mean professional stress of the group was 57.31 with a standard deviation of 15.75. This showed that sometimes the nurses felt as though their jobs were too stressful. At the end of the survey, Fletcher left a blank page for the respondents to voice in their own words how they felt about working in a hospital as a registered nurse. By leaving this blank area for the respondents, Fletcher was able to get answers to questions that she did not ask. This information gathered from the blank areas showed Fletcher that the respondents were willing to give their ideas for improvements and showed even more how stressed that these individuals felt.
Through my research in the area of job satisfaction, I have found there to be nine factors that determine a person’s satisfaction with their job or career. All of these factors certainly mold into the nursing profession. These include (1) extrinsic rewards; (2) their co-workers; (3) professional opportunity; (4) praise and recognition; (5) satisfaction with their schedule; (6) benefits; (7) the ability to make decisions and be heard; (8) task variety; and (9) their physical workspace. I used these nine factors in my survey and added one (proper staffing: enough nurses in the profession) to determine the Valley Hospital nurses perceptions of what makes them satisfied with their profession.

**Data Collection**

I determined that in the interest of time and money, that I would use a convenience sample of nurses at Valley Hospital here in Las Vegas. There are a total of 461 Registered Nurses employed by Valley Hospital that could be used for purposes of my survey. In this survey, I attended the nursing staff meetings in all areas of the hospital in April of 2004. My hope was to gets results from as many of these individuals as possible to make my results more valid. The survey itself (Appendix A) consisted of ten factors that have been shown through previous research to contribute to job satisfaction. The participants were asked to rank from 1-10 the importance of each factor to
themselves in regards to what contributes to their job satisfaction. There was also a page at the end of the survey to obtain demographical information of each of the participants for further study.

The survey was completely voluntary and the managers or supervisors were asked to leave the meetings during the completion of the survey. I asked these individuals to leave the meeting so that the staff nurses would not feel intimidated by their presence. In all of the meetings, I handed out a total of 164 surveys. I do know that in each of the meetings there were several nurses that chose not to fill out the survey due to reasons given to me like "we’ve done this before", I don’t have the time right now" and some did not feel comfortable or believe that the survey would remain confidential for them individually. Even with these individuals not filling out their surveys I still received 55 % (90) of surveys back with information on them that I could use.

**Protection of Human Subjects**

Every study that relates to human subjects is required to have approval by the Institutional Review Board (IRB) as part of the process of protecting subjects and dealing with confidentiality issues. I was granted an IRB exemption through the Office for the Protection of Research Subjects at the University of Nevada at Las Vegas. No further action or IRB
oversight was required as long as the study stayed the same as proposed.

**Findings**

The purpose of this section is to present the results of the survey. This section is organized into two parts. Demographic statistics are presented in the first part of the section. These variables include age, gender, ethnic origin, years of service, employment status and the primary care setting that the nurse works. There is also a table showing the demographics that were looked at. The second section is made up of the overall results of each of the ten variables that the nurses ranked in terms of importance for their job satisfaction.

**Age**

Age in the survey ranged from 23 to 64 years. The mean age for the sample of 90 was 43 years with a standard deviation of 10.75. Of those that responded to their age, 34% (31) were under the age of 40 and 63% (57) were 40 years or older. Two of the surveyed individual failed to list their age.

**Gender**

The majority of the nurses surveyed were women. Of the 90 responses 94% (85) were filled out by women and 6% (5) were filled out by male nurses.
**Ethnic Origin**

The majority of the nurses in this survey reported themselves as being White or Caucasian. This number was 51% (46) of the 90 respondents. The remaining responses were made up of 3% (3) African-Americans, 6% (5) Hispanics, 27% (24) Asians, 2% (2) Indians and 6% (5) Filipinos. There were five respondents that did not list their ethnic origin.

**Years of Service**

The respondents in the study reported their years of service ranging from one month to 40 years, with the mean years of service being 18.4 with a standard deviation of 11.41.

**Employment Status**

The majority of the surveyed nurses were employed full-time at the facility. Of the 90 respondents 90% (81) were employed full-time while the others that equaled 10% (9) were employed either as part-time or per diem employees.

**Care Setting**

For purposes of statistical analysis, I grouped the care setting into two groups: intensive care and non-intensive care. Of the respondents in this survey 27% (24) reported currently working in an intensive care setting such as the Surgical Intensive Care Unit, the Medical Intensive Care Unit and the Neonatal Intensive Care Unit. The other 73% (66) of the
individuals reported working in a non-intensive care setting such as the Medical and Surgical units.

**Table of Demographic Information**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td>Average of 43 years old</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td>94% Women</td>
</tr>
<tr>
<td></td>
<td>6% Men</td>
</tr>
<tr>
<td><strong>Ethnic Origin</strong></td>
<td>51% White/Caucasian</td>
</tr>
<tr>
<td></td>
<td>27% Asian</td>
</tr>
<tr>
<td></td>
<td>6% Hispanic</td>
</tr>
<tr>
<td></td>
<td>6% Filipino</td>
</tr>
<tr>
<td></td>
<td>3% African-American</td>
</tr>
<tr>
<td></td>
<td>2% Indian</td>
</tr>
<tr>
<td><strong>Years of service</strong></td>
<td>Average of 18.4 years</td>
</tr>
<tr>
<td><strong>Employment status</strong></td>
<td>90% Full-time</td>
</tr>
<tr>
<td></td>
<td>10% Part-time / Per Diem</td>
</tr>
<tr>
<td><strong>Care Setting</strong></td>
<td>73% Non-intensive care</td>
</tr>
<tr>
<td></td>
<td>27% Intensive care</td>
</tr>
</tbody>
</table>

**Overall Measure of Job Satisfaction**

The survey was made up of ten variables that lead to job satisfaction. Each variable was scored on a ten point scale ranging from 1=most important to the nurses job satisfaction to 10=least important to the nurses job satisfaction. The following is each variables score distribution in the order that they were asked in the survey:
1. **Professional Opportunity (advancement, etc.):**
   The participants in the survey rated their opportunity for advancement with a mean score of 6.4 with a standard deviation of 2.65.

2. **Praise and Recognition (feedback, encouragement, etc.)**
   The participants in the survey rated praise and recognition with a mean score of 6.3 with a standard deviation of 2.49.

3. **Ability to make decisions and be heard:**
   The participants in the survey rated their ability to make decisions and be heard with a mean score of 5.5 with a standard deviation of 2.67.

4. **Time to adequately care for their patients:**
   The respondents to the survey rated their time to adequately care for their patients with a mean score of 3.4 with a standard deviation of 2.55.

5. **Extrinsic Rewards (salaries, benefits, etc.):**
   The respondents in the survey rated extrinsic rewards with a mean score of 3.6 with a standard deviation of 2.67.

6. **Co-workers (nursing peers and physicians):**
   The respondents in the survey rated their co-workers with a mean score of 4.9 with a standard deviation of 2.43.
7. **Proper Staffing (enough nurses in the profession):**
   The respondents to the survey rated the variable of proper staffing with a mean score of 3.5 with a standard deviation of 2.46.

8. **Schedule (hours worked, flexibility, etc.):**
   The respondents in the survey rated their schedule with a mean score of 5.2 with a standard deviation of 2.81.

9. **Task Variety (floating to other areas, changing tasks):**
   The respondents to the survey rated task variety with a mean score of 7.7 with a standard deviation of 2.63.

10. **Facility (physical condition, equipment, etc.):**
    The respondents to the survey rated the facility with a mean score of 6.7 with a standard deviation of 2.68.

**Ranking of the Variables**

Below is a ranking of the variables from least important to job satisfaction to most important to all of the nurses in regards of what is important to their job satisfaction. The second column of the information below shows the percentage of respondents to the survey that ranked the variable in the top two areas of importance to themselves.
<table>
<thead>
<tr>
<th>Variable</th>
<th>Score</th>
<th>% ranked 1 or 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Task Variety</td>
<td>7.8</td>
<td>(Least)</td>
</tr>
<tr>
<td>Facility</td>
<td>6.8</td>
<td>9%</td>
</tr>
<tr>
<td>Professional Opp.</td>
<td>6.5</td>
<td>11%</td>
</tr>
<tr>
<td>Praise and Recognition</td>
<td>6.3</td>
<td>10%</td>
</tr>
<tr>
<td>Decision Making</td>
<td>5.6</td>
<td>18%</td>
</tr>
<tr>
<td>Schedule</td>
<td>5.2</td>
<td>23%</td>
</tr>
<tr>
<td>Co-workers</td>
<td>4.9</td>
<td>16%</td>
</tr>
<tr>
<td>Extrinsic Rewards</td>
<td>3.6</td>
<td>46%</td>
</tr>
<tr>
<td>Proper Staffing</td>
<td>3.5</td>
<td>44%</td>
</tr>
<tr>
<td>Time to Care for Patient</td>
<td>3.4</td>
<td>(Most)</td>
</tr>
</tbody>
</table>

**Care Setting Analysis**

I felt it necessary to expand my analysis and look into the possibility of there being a difference between the perceptions of nurses from the two main areas that these nurses work (intensive care setting and non-intensive care setting) (Appendix D). Most of the results show numerous similarities between these two groups. Some of the similarities are that they both have an average age of just over 42 years of age with about 17-19 years in the profession of nursing. The similarities extend into their perceptions of what are important to them in regards to job satisfaction. Both groups ranked most of the variables in the same fashion. The interesting results were that both groups ranked the same three variables in there top three of importance, but in reverse order.

The nurses that worked in an intensive care setting ranked the variable of extrinsic rewards as the most important with an average score of 2.3 with a standard deviation of 2.11. They
also ranked the variables of time to adequately care for your patient (3.0 with a standard deviation of 1.89) and the variable of proper staffing (3.5 with a standard deviation of 2.15) as the second and third most important to their job satisfaction.

The nurses that worked mainly in a non-intensive care setting ranked these same three variables as important, but in the reverse order. They ranked the variable of proper staffing as the most important with an average score of 3.4 with a standard deviation of 2.59. They then ranked the variable of time to adequately care for your patient (3.6 with a standard deviation of 2.78) and extrinsic rewards (4.1 with a standard deviation of 2.71) as the next two most important variables in regards to their job satisfaction.

The results between the two groups go along pretty well with how things work in a hospital. The intensive care nurses tend to earn more money due to the nature of their work and they also have better staffing ratios compared to the non-intensive care nurses again because of the nature of the work. In the intensive care setting the nurses have a patient to nurse ratio of 2:1, while the non-intensive care nurses have a patient to nurse ration of more like 6:1. The intensive care nurse may not feel the pain of a nursing shortage as much as the others due to these ratios. But these nurses still recognize the need for proper staffing, but it is not as important to them as the
extrinsic rewards that come with their specialty of being able to work in an intensive care setting.

The important thing to recognize from these two groups is that even though they ranked their top three in the opposite order, they both still ranked the variables of proper staffing, time to adequately care for your patient and extrinsic rewards as the three most important variables in what is important to their job satisfaction.

Summary of the Results

This sample of nurses was overwhelmingly female, employed full-time and over 40 years of age. In regards to their measurement of what is important to them for job satisfaction three variables definitely stood out among the rest. Having the time to adequately care for their patients (3.4) was the most important variable listed in regards to their job satisfaction. This was very closely followed by proper staffing (3.5) and extrinsic rewards (3.6). These top three variables as pointed out by the nurses are all equally important. My intention of doing this survey was to see if the shortage of nurses was important to the job satisfaction of the nurses surveyed. With the score of 3.5 for proper staffing coming in second only behind the variable of time to adequately care for your patient (3.4) it is clear to see that the shortage of nurses in the profession does play a significant role in job satisfaction of
the nurses surveyed. Without enough nurses in the profession, these nurses feel overworked and that they do not have adequate time to care for their patients.

I found it interesting that the nurses that were surveyed did not feel that being praised and recognized for their efforts by their superiors was as important for their perception of job satisfaction (like previous research had shown). Also, these nurses did not agree with the previous research by Bucknall & Thomas that their ability to make decisions and be heard was as important as the other variables on the survey. The nurses that were surveyed made it clear that the shortage of nurses definitely makes an impact on their perception of satisfaction with their jobs. To try and help with this problem (nursing shortage), there are several initiatives currently in place to try and get more individuals into the nursing profession.

**Current Initiatives**

There are several initiatives taking place across the nation at this time in regards to the nursing shortage. One of these is the Nurse Reinvestment Act that was signed by President George W. Bush on August 1, 2002 (Nurse Reinvestment Act, 2002). This Act is allowing more scholarships to attract more students into the nursing profession. It also has a Faculty Loan Cancellation Program that hopefully will bring in more faculty to teach the nursing students. It will relieve the loans that
many nurses have outstanding if they will agree to teach in the nursing schools. This Act will also allot money for public service announcements promoting the importance and prestige of the nursing profession. Another major movement is called “Nursing’s Agenda for the Future” (Nursing’s Agenda for the Future, 2002). This is an agenda focusing on ten key components ranging from leadership and planning to diversity in the workforce. It is aimed at making the nursing profession more attractive as a career to younger individuals. It is looking at making the work environments better and also at better ways to recruit and retain nurses. This is a major undertaking and may take up to ten years to meet its goals. Unfortunately, ten years is too long of a timeframe to make a large impact on the need of getting more individuals into the nursing profession.

Another initiative that is presently being worked on is a media campaign from forty different groups of healthcare workers called “Nurses for a Healthier Tomorrow” (Nurses for a Healthier Tomorrow, 2003). This group is trying to raise interest in middle and high school aged individuals. They are going out to schools and doing career fairs and trying to recruit kids at an early age. They are trying to get these younger kids before they get interested and set their minds to doing something else for the rest of their lives. There are several other groups working on similar types of initiatives and also looking at the
leadership in education, practice and the research side of nursing. These initiatives by the government and certain groups can truly help, but they seem to only address the younger population that is not enrolling into the nursing programs. If it is true that job dissatisfaction is a major contributor to the shortage of nurses and especially with current nurses, then something else must be done.

**Limitations of the survey**

One of the major limitations to this survey was the small sample size of nurses. Of the 461 nurses employed at Valley Hospital, I was only able to distribute 36% (164) surveys at the staff meetings. Of these distributed surveys I was only able to get 55% (90) of them filled out and returned to myself. This is only 20% (90) of the total population of the nurses at the facility. The survey would have been more valid with a larger sample size. Because of this small sample size, the sample may not be representative of all the Valley Hospital nurses.

Another limitation to the research was that I did not do data analysis between the different age groups or the different ethnic groups. Another area that would have been beneficial to look into is the difference between the satisfaction differences between the salary ranges, but there was not a question on the survey asking about their individual pay. All of the further study that could have been done could have given a clearer
picture of what needs to be done to attract and retain nurses in the future.

**Conclusion**

It is easy to see from the research that there have been many studies done previously on the nursing shortage and the reasons for it. The facts of the shortage range from the aging of the workforce to what seems to be a disinterest in getting into the profession of nursing. There seemed to be very little research that dealt directly with the correlation of how the shortage of nurses impacts the perception of job satisfaction for those nurses in the profession. This survey asked the nurses directly how important each variable was to themselves in terms of their job satisfaction. The nurses that were surveyed ranked proper staffing – enough nurses in the profession as the second most important variable towards their job satisfaction. This was only ranked below time to adequately care for their patients as the most important variable in terms of their job satisfaction. From these results it is easy to feel that if there were enough nurses in the profession, then nurses would have enough time to adequately care for their patients. These two variables are very closely related.

The statistics presented earlier in terms of the shortage of nurses according to the Bureau of Labor Statistics, the American Health Association and the American Association of
Colleges of Nursing are quite staggering to say the least. They are even more staggering when considering that Americans are getting older. Along with these individuals getting older, there usually comes a need for more medical care from trained professionals. There must be enough nursing professionals to ensure that these individuals are taken care of properly. I do believe that some of the initiatives that are taking place will do some good, but they may just take too long to prepare the country for the growing need for nurses. More work must be done to attract new individuals towards a career in nursing and to also retain those currently working in the field.
References


Appendix A

Dear Registered Nurse,

You have been invited to participate in this research study that seeks to understand the factors that affect nurse’s perceptions of job satisfaction. I am Chris Jones, a Masters Degree student at the University of Nevada at Las Vegas and also the Director of Radiology here at Valley Hospital. I have selected the nursing staff here at Valley to be my model for my professional paper. You have been chosen because you work at Valley Hospital and are also a nurse. Participation in this study is voluntary and if you choose not to participate, simply discard the survey.

The purpose of this survey is to determine what factors are important to your perception of job satisfaction. The survey will require approximately five minutes to complete. Your individual answers will be kept completely confidential and will only be used for the purpose of my professional paper. Once you have completed the survey you can return it back to myself immediately after its completion before exiting your staff meeting or simply return it back to my office in the Radiology Department here at Valley Hospital.

I would like to thank you in advance for your time and participation in this survey.

Thanks again,

Chris Jones
The Registered Nurse Survey

Dear nurse,

Below is a list of 10 factors that have been shown through previous research to determine a person’s satisfaction with their job. Please rank these 10 factors in order of importance to you in regards to your satisfaction with the nursing profession in whole.

1 = most important to you   10 = least important to you

_____ Professional opportunity (advancement, etc.)
_____ Praise and recognition (feedback, encouragement, etc.)
_____ Ability to make decisions and be heard
_____ Time to adequately care for your patients
_____ Extrinsic rewards (salaries, benefits, etc.)
_____ Co-workers (nursing peers and physicians)
_____ Proper staffing (enough nurses in the profession)
_____ Schedule (hours worked, flexibility, etc.)
_____ Task variety (floating to other areas, changing tasks, etc.)
_____ Facility (physical conditions, equipment, etc.)

Please continue to the next page
Please answer or indicate with an (X) the following questions about yourself.

1. Are you male____ or female ____?
2. What is your age _____?
3. What is your ethnic origin ____________________?
4. Are you a Registered Nurse? ____________________?
5. How many years have you been a nurse _____?
6. Are you employed Full-time _____
   Part-time _____
   Per Diem _____
   Agency/Traveler _____
7. What is the primary area that you work in ____________________?
   (medical, surgical, OB, oncology, emergency, ICU, etc.)

Thank you for your participation