

## Nurses Who Left Survey 2021

### Survey Summary

#### PURPOSE

The West Virginia Center for Nursing in collaboration with the West Virginia RN Board and the West Virginia Nurses Association conducted a survey of nurses who did not renew their licenses in the years 2019 and 2020. The purpose of this survey was to identify trends among those nurses who did not renew their licenses to inform nursing workforce planners.

#### METHODOLOGY

This anonymous, online survey was open for responses from July 16, 2021, through August 16, 2021. Responses for this survey were solicited by the West Virginia RN Board (Board), West Virginia Center for Nursing, and the West Virginia Nurses Association. The Board identified 1,789 nurses who had not renewed their licenses during the period of interest. The Board sent an email with the survey link to all those nurses who had not renewed their license asking for their participation in the survey. Both the West Virginia Center for Nursing and the West Virginia Nurses Association promoted the survey on social media pages and within other nursing stakeholder groups. Survey settings limited duplicate responses.

#### QUALIFYING RESPONDENTS

To ensure that respondents met the inclusion criteria, respondents were asked the filtering question, “Are you a nurse who was licensed in West Virginia who has not renewed your license recently?” Respondents who answered, “Yes” were promoted to complete the survey while respondents who answered, “No” were directed to a disqualification page. A total of 9 respondents initially answered “Yes” to this question but later stated they held a current license. We eliminated these responses from the dataset. Of the 595 respondents, 382 indicated, “Yes”.

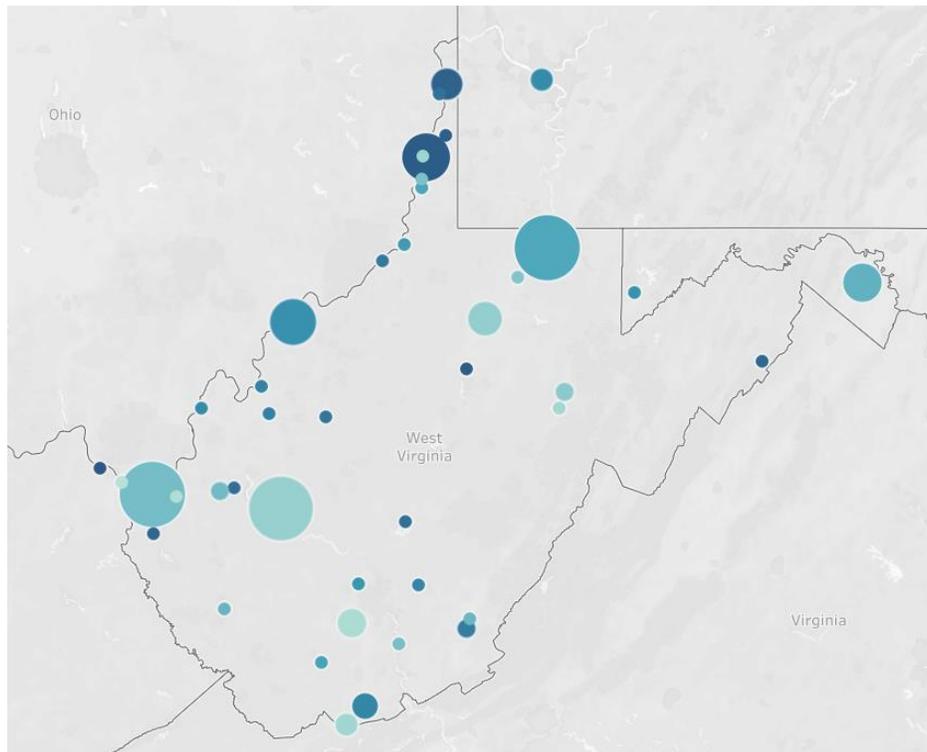
Qualifying respondents were asked to identify the last year they were a licensed nurse in West Virginia. To focus primarily on respondents who did not renew their licenses in the past two renewal cycles and gain insights into more recent trends, responses were further eliminated for those who indicated they last renewed their licenses outside of 2019 or 2020. A total of 106 respondents were eliminated who indicated the last year they renewed their license was outside of this period. An additional 48 respondents did not indicate a year of last renewal or indicated they were unsure of their last renewal

year. These respondents remained within the sample examined within the subsequent survey summary. Therefore, a total of 276 nurses, or 15.42% of possible respondents, were included in the final analysis.

## DEMOGRAPHICS

Qualifying respondents were asked to identify the city and state where they last worked as a nurse. Figure 1 illustrates a map of the locations indicated by qualifying respondents. The larger circles indicate a larger number of respondents indicated the same city while the smaller circles indicate a smaller number of respondents.

*Figure 1: Last Employment Location of Qualifying Respondents*



Qualifying respondents were also asked to identify the setting of their last employer and were given an array of options within a list. Most respondents indicated they were last employed at a hospital as indicated in Figure 2.

**FIGURE 2: LAST EMPLOYMENT SETTING OF QUALIFYING RESPONDENTS**

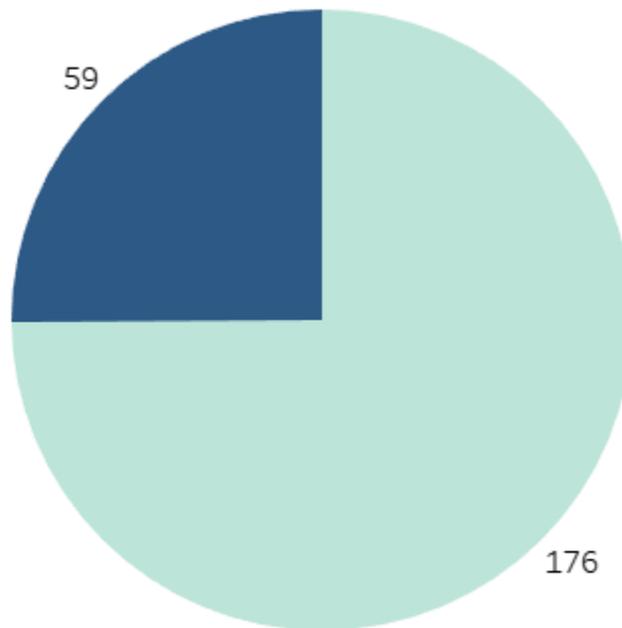
<b>EMPLOYMENT SETTING</b>	<b>COUNT</b>
HOSPITAL	119
AMBULATORY CARE	22
NURSING HOME/EXTENDED CARE	16
INSURANCE CLAIMS/BENEFITS	9
SCHOOL OF NURSING/EDUCATION	8
HOSPICE	8
HOME HEALTH	7
SCHOOL HEALTH	6
COMMUNITY HEALTH	5
BEHAVIORAL HEALTH/SUBSTANCE USE TREATMENT FACILITY	5
POLICY/PLANNING/REGULATORY/LICENSING AGENCY	4

OCCUPATIONAL HEALTH	3
DIALYSIS	2
PUBLIC HEALTH	1
MEDICAL SALES	1
MILITARY	1
OTHER	1
NOT INDICATED/UNKNOWN	58

#### QUALIFYING RESPONDENTS LEAVING WEST VIRGINIA

Respondents were asked a filtering question to place them into two broad categories: those nurses who have left West Virginia to gain licensure in another state and those nurses who left nursing. All qualifying respondents were asked, “When you did not renew your WV license, did you gain licensure in another state?” Those who responded, “Yes” were asked one set of questions and those responding, “No” were asked another set of questions for the remainder of the survey. Figure 3 below shows that 59 (25.1%) nurses indicated they did gain licensure in another state and 176 (74.89%) nurses did not. An additional 41 respondents did not complete the survey past this point.

*Figure 3: Qualifying Respondents Who Have Left West Virginia to be Licensed in Another State*



#### ADDITIONAL INFORMATION ON NURSES WHO LEFT WEST VIRGINIA

Qualifying respondents who indicated they left West Virginia to be licensed in another state were asked to rank the reasons why they left West Virginia to be licensed in another state. Figure 4 shows that most nurses rank compensation,

work conditions, and advancement opportunities high among the reasons they left and rank health and safety issues, other family obligations, and cultural, ethnic, or religious beliefs low.

**FIGURE 4: REASONS WHY NURSES LEFT WEST VIRGINIA FOR LICENSURE IN ANOTHER STATE, RANKED**

REASON FOR LEAVING	AVERAGE RANK	MEDIAN RANK	NUMBER OF RESPONDENTS WITHIN RANK
COMPENSATION	2.39	3	42
WORK CONDITIONS	3.37	3	39
ADVANCEMENT OPPROTUNITITES	3.56	3	41
MISTREATMENT BY OTHER HEALTHCARE PROFESSIONALS/MANAGEMENT	4.05	4	40
SCHEDULING	4.68	5	36
BENEFITS PACKAGE	5.44	6	37
LIFESTYLE	5.80	6	47
SPOUSE CAREER MOBILITY	6.18	7	32
PATIENT FACTORS	6.25	7	30
HEALTH AND SAFETY ISSUES	6.25	7	30
OTHER FAMILY OBLIGATIONS	6.45	8	36
CULTURAL, ETHNIC, OR RELIGIOUS BELIEFS	8.47	9	30

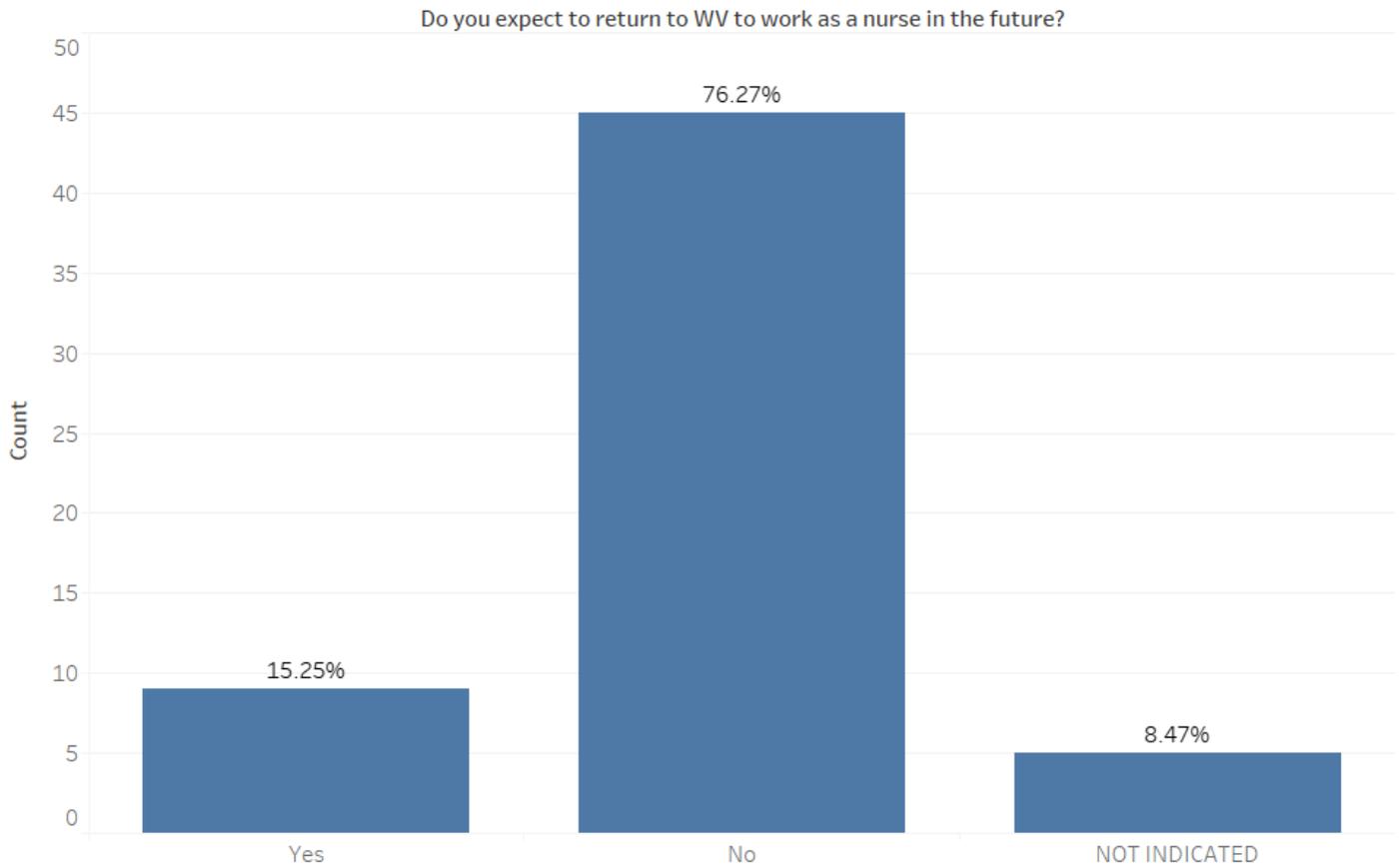
In addition to asking qualifying respondents who left West Virginia to be licensed in another state to rank the reasons they left, respondents were also asked to describe in their own words why they left West Virginia to capture any reasons not indicated on the ranking. Responses were then coded for common themes. Figure 5 outlines the reasons as described. Most respondents indicated relocation, the fact that they no longer needed a WV state specific license due to the multistate licensure compact being adopted in WV, and retirement.

**FIGURE 5: REASONS WHY NURSES WHO LEFT WEST VIRGINIA FOR LICENSURE IN ANOTHER STATE LEFT, EXPLAINED**

RELOCATION	14
NO LONGER NEEDED A WV STATE SPECIFIC LICENSE DUE TO MULTISTATE COMPACT BEING ADOPTED IN WV	11
RETIREMENT	6
COMPENSATION/BENEFITS	4
DISSATISFACTION WITH WORK ENVIRONMENT/POLICIES	2
DISABILITY/PHYSICAL AILMENTS	2
HEALTHCARE FACILITY CLOSURE	2
CAREER ADVANCEMENT IN <b>ANOTHER STATE</b>	1
CULTURE OF HOME HEALTH	1
ECONOMIC ENVIRONMENT	1
<b>EDUCATIONAL DEBT</b>	1
NURSING SHORTAGE	1
NOT INDICATED	13

And finally, qualifying respondents who indicated they left West Virginia to be licensed in another state were asked if they expected to return to West Virginia to work as a nurse in the future. Figure 6 illustrates the results from this question. Sixteen respondents (16.33%) indicate they do expect to return, 72 respondents (73.47%) indicate they do not plan to return, and 10 (10.20%) respondents did not respond to this question.

Figure 6: Qualifying Respondents Who Left WV Plans to Return to West Virginia in the Future



#### QUALIFYING RESPONDENTS LEAVING NURSING

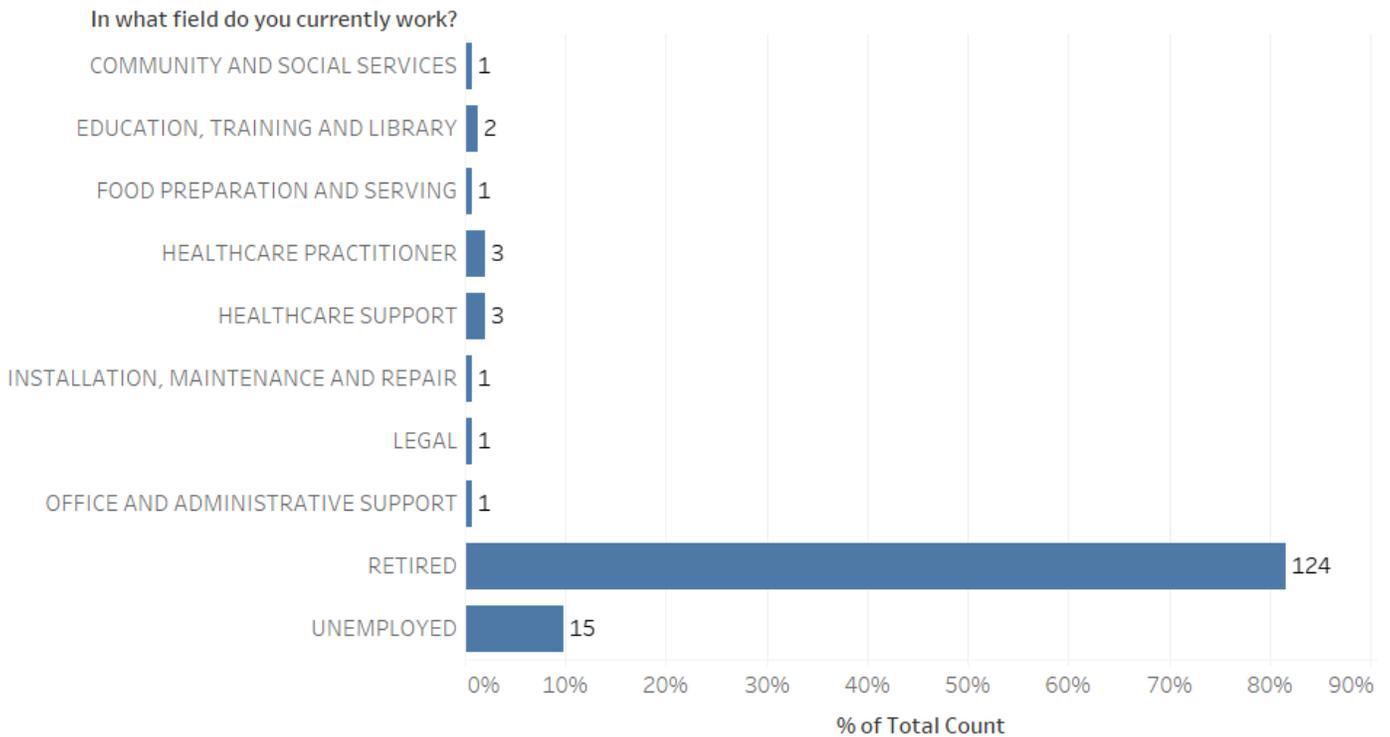
Those respondents who indicated they had not left West Virginia to gain licensure in another state (176) were asked questions to better understand why they left nursing. The first question was about their current employment. To allow respondents to indicate they were not employed, respondents were also given options for retired, unemployed, and disabled. A summary of these results can be found in Figure 7. The vast majority (79.75%) of nurses who did not renew their licenses were retired.

FIGURE 7: QUALIFYING NURSES WHO LEFT NURSING EMPLOYMENT LOCATIONS

WORK LOCATION	COUNT
RETIRED	126
UNEMPLOYED	10
DISABLED	7
WEST VIRGINIA	6
OHIO	4
PENNSYLVANIA	1
WASHINGTON	1
OKLAHOMA	1
INDIANA	1
OTHER	1
NOT INDICATED	17

Qualifying respondents who indicated they left nursing were asked in what field they currently work and were given an array of broad categories to choose from. Figure 8 illustrates a summary of these results. Most respondents indicated they were retired (81.57%). The majority of those who are not retired are working in some other type of healthcare practice or support role.

Figure 8: Qualifying Nurses Who Left Nursing Current Work Field



Nurses who left nursing were also asked to rank the reasons they left nursing among an array of choices. Figure 9 illustrates the results of this ranking. Most nurses left for retirement, followed by compensation and work conditions also being contributing factors. The bottom three reasons were spouse career mobility, lifestyle, and culture, ethnic, or religious beliefs.

FIGURE 9: REASONS WHY NURSES LEFT NURSING, RANKED

REASON FOR LEAVING	AVERAGE RANK	MEDIAN RANK	NUMBER OF RESPONDENTS
RETIREMENT	2.24	2	55
COMPENSATION	2.51	2	55
WORK CONDITIONS	2.76	2	76
SCHEDULING	4.07	4	70
MISTREATMENT BY OTHER HEALTHCARE PROFESSIONALS/MANAGEMENT ADVANCEMENT OPPORTUNITIES	4.26	4	82
BENEFITS PACKAGE	4.53	4	55
HEALTH AND SAFETY ISSUES	5.50	6	60
PATIENT FACTORS	5.99	7	73
OTHER FAMILY OBLIGATIONS	6.20	7	61
SPOUSE CAREER MOBILITY	7.07	9	74
LIFESTYLE	8.41	10	51
CULTURE, ETHNIC, OR RELIGIOUS BELIEFS	8.71	11	59

Nurses who left nursing were also asked to describe in their own words why they left the nursing workforce. Responses were then coded for common themes. In cases where multiple themes were present, multiple themes were coded. Figure 10 captures the common themes within the responses. In total, those indicating retirement (or retirement mixed with another theme) total 61.09% of all respondents. Disability and physical ailment (or disability and physical ailment with another theme) follows, accounting for 16.78% of all respondents. Together retirement and disability/physical ailments account for nearly two-thirds (61.08%) of all reasons why qualifying nurses have left the nursing workforce. It is also important to note that this question was an open field. There are some respondents who indicated retirement on other questions but did not indicate retirement within this field so there may be more nurses who are retired but who did not indicate retirement within their response to this question.

**FIGURE 10: QUALIFYING NURSES WHO LEFT NURSING, REASONS EXPLAINED**

REASON	COUNT	%
<b>RETIREMENT</b>	<b>67</b>	<b>44.97%</b>
RETIREMENT/DISSATISFACTION WITH WORK ENVIROMENT AND/OR POLICIES	11	7.38%
REITREMENT/DISABILITY/PHYSICAL AILMENT	6	4.03%
RETIREMENT/SCHEDULING	3	2.01%
RETIREMENT/RELOCATION	1	0.67%
RETIREMENT/PATIENT POPULATION ACUITY	1	0.67%
RETIREMENT/RESTRUCTURING OF HEALTHCARE FACILITY	1	0.67%
RETIREMENT/TECHNOLOGY	1	0.67%
RETIREMENT/CAREGIVING RESPONSIBILITITES	1	0.67%
RETIREMENT/COVID EXPOSURE	1	0.67%
<b>DISABILITY/PHYSICAL AILMENT</b>	<b>24</b>	<b>16.11%</b>
DISABILITY/PHYSICAL AILMENT/DISSATISFACTION WITH WORK ENVIROMENT AND/OR POLICIES	1	0.67%
DISSATISFACTION WITH WORK ENVIROMENT AND/OR POLICIES	7	4.70%
CAREGIVING RESPONSIBILITIES	6	4.03%
NO LONGER NEEDED A WV STATE SPECIFIC LICENSE DUE TO MULTISTATE COMPACT BEING ADOPTED IN WV	3	2.01%
COST OF LICENSURE	3	2.01%
COMPENSATION AND/OR BENEFITS/DISSATISFACTION WITH WORK ENVIROMENT AND/OR POLICIES	2	1.34%
COVID VACCINATION REQUIREMENT*	2	1.34%
COMPENSATION AND/OR BENEFITS	1	0.67%
COST OF LICENSE/CE REQUIREMENTS	1	0.67%
COVID EXPOSURE	1	0.67%
DISSATISFACTION WITH RENEWAL PROCESS	1	0.67%
HEALTHCARE FACILITY CLOSURE	1	0.67%
RESTRUCTURING OF HEALTHCARE FACILITY	1	0.67%
TRAVEL NURSING	1	0.67%
<i>*DURING THE TIME OF THIS SURVEY, NO HEALTHCARE FACILITITES IN WEST VIRGINIA HAD MADE ANNOUNCEMENTS ABOUT REQUIRING COVID VACCINATIONS</i>		

## DISCUSSION

In summary, the survey results show that most respondents to this survey who have not renewed their licenses are due to retirement (55.8%). A smaller percentage left the state to practice elsewhere (10.14%). These two groups account nearly two-thirds (65.98%) of all respondents. The remaining respondents were either employed in another field (3.26%), unemployed (3.99%), or disabled (1.89%). An additional 25% of respondents did not answer questions indicating their employment status. Although this survey only represents a small percentage of nurses who didn't renew their licenses during the years of 2019 and 2020, the results indicate trends that can be helpful to nursing workforce planners.

Most nurses who did not renew their licenses retired. As a baby boomer profession with over a third (38.04%) of registered nurses in WV over the age of 51, nursing workforce planners and employers should work together to identify how to avoid the loss of nurses to retirement when possible. While this survey did not ascertain whether nurses retired earlier than intended due to workplace environments or other stressors, workforce planners and employers should work to avoid the knowledge loss when nurses do retire early. Strategies such as flexible work environments, short shifts, "snowbird" positions, support roles and others have been successful in keeping nurses in the workforce while aging and avoiding knowledge and experience drain.

Among nurses who left WV to be licensed in another state, compensation and working conditions are ranked highly. Subsequent studies should focus on these two issues to better understand more specific concerns so that strategies can be implemented. Nursing employers in West Virginia may benefit from offering higher salaries, benefits, or other compensation now to maintain their current nursing workforce. Scholarships with service obligations have been shown to keep nurses working in WV. An examination of completers of the West Virginia Nursing Scholarship Program found that 87.7% of recipients since 2016 still maintain an active West Virginia nursing license as of August 2020 (West Virginia Nursing Scholarship Program Report, 2020). Tying service obligations to specific shortage designated areas or organizations may successfully address critical needs. Ensuring that issues with working conditions are promptly addressed will also be beneficial.

From these results emerges a concerning trend related to nursing faculty. The nursing faculty shortage continues to be a barrier to the expansion of nursing programs in West Virginia. Of the survey respondents, 8 indicated their prior place of employment was a school of nursing. This represents 4.4% of the entire nursing faculty population in WV. A 2020 Nursing Faculty Survey by the WV Center for Nursing revealed that non-competitive faculty salary rates, insufficient faculty lines and/or funded positions, and a shortage of qualified faculty ranked high among barriers identified to expanding nursing program enrollment among survey respondents. Workforce planners should consider additional strategies to support nursing faculty, for example nursing faculty loan repayment programs or tax credits for nursing faculty. They may also consider partnerships with nursing employers to expand the nursing educator workforce through sharing experienced nurses whose knowledge and skills can benefit nursing students

## LIMITATIONS

The limitations of this survey are several, including the relatively low response rate. Although trends are identified among survey respondents, trends may not be indicative of the entire population of nurses who did not renew their licenses in 2019 and 2020. It is also unclear if the nurses who indicated they retired did so earlier than expected. Further surveys on this topic should examine if nurses are retiring early, retiring on-time, or retiring later than expected.

COVID 19 risks did not seem to influence the decision by nurses not to renew their WV license in this 2019 and 2020 cohort of respondents. However, future surveys should look at the cumulative impact of continued COVID stressors on nurses in the workplace.

The ranking of choices related to why nurses did not renew their licenses added complexity to the analysis since respondents had the option of only ranking one choice or ranking all available choices. To simplify and provide more

clear results in the future, respondents should be asked to select their top reasons for not renewing their licenses to simplify the survey results.

## RECOMMENDATIONS

With these limitations in mind, we make the following recommendations:

1. This survey did not capture data on whether nurses retired before they had planned for any reason. Future surveys of those who retired should collect these data to support programs that will provide opportunities for experienced nurses to serve longer in the workforce. Nursing employers should understand the age breakdown of their nursing staff and consider the aging of their current nursing workforce in planning. Nursing employers may consider offering flexible scheduling and options for shorter shifts to those nearing retirement age or retirees who remain in the state to help sustain the workforce.
2. Loan repayment and scholarship programs with service obligations to the state have been shown to be effective in keeping nurses in the state to practice. Viewing these programs as enhancements to compensation packages may be effective in recruiting and retaining nurses in the state. Tying service obligations to specific shortage geographic areas, specific types of organizations, or other shortage definitions may encourage nurses to stay in WV to work.
3. Nursing employers can encourage a culture that values nursing staff to encourage service longevity.
4. Incentives for nurses who have left WV to return to work in WV may be considered, including tax credits or other financial incentives. However, nurses who left to work in other states represent only a small number of this sample. Further evaluation should be considered prior to implementing these types of programs.
5. With the current and ongoing nursing faculty shortage, the loss of 4.4% of nursing faculty during the years of 2019 and 2020 through not renewing licensure is concerning. Planners could consider ways to keep nursing faculty in the state and in the faculty role through programs like nursing faculty loan repayment programs, scholarships, and tax credits. Nursing education programs and nursing employers may also consider partnerships to leverage the experience, knowledge, and skills of nurses in the classroom and clinical settings.