



Registered Nurse Workforce Survey - 2007

INSTRUCTIONS

Please read each question carefully and select the box or fill in the blank next to the item. If a question requires more than one response, (i.e., choose all that apply, special instructions will be provided).

Please provide information about your situation and your own opinions. There is no right or wrong answers to the questions.

Please complete **all questions** on the questionnaire and return your completed questionnaire in the enclosed postage paid envelope within the next 10 days.

****Please Note:** For your convenience, you may go to <http://www.surveymshare.com/survey/take/?sid=52038> and complete the online version of this survey

I. DEMOGRAPHICS

1. Age __ __

2. Year Born __ __ __ __

3. Gender

Male Female

4. Race/Ethnicity: (select one)

- | | |
|---|---|
| <input type="checkbox"/> African-American | <input type="checkbox"/> Chinese |
| <input type="checkbox"/> American Indian/Native Alaskan | <input type="checkbox"/> Filipino |
| <input type="checkbox"/> Caucasian | <input type="checkbox"/> Japanese |
| <input type="checkbox"/> Native Hawaiian | <input type="checkbox"/> Korean |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> Samoan |
| <input type="checkbox"/> Mixed (2 or more races) | <input type="checkbox"/> Other Pacific Islander |
| <input type="checkbox"/> Some Other Race | <input type="checkbox"/> Other Asian |

5. What is the Residential Zip Code of your current home address __ __ __ __ __

6. Where was your residential (home) address one year ago (i.e., 2006)?

- State of Hawaii
- Other state or US territory
- Foreign country

7. Where do you expect your residential (home) address to be one year from now (i.e., 2008)?

- State of Hawaii
- Other state or US territory
- Foreign country

II. EDUCATIONAL BACKGROUND

8. Where was the location of the **basic nursing education** program that prepared you to take the RN licensing examination (NCLEX)?

- Hawaii
- Other state or US territory
- Foreign country

9. Are you currently enrolled in a **nursing** education program leading to a degree?

- Not currently enrolled
- Baccalaureate Degree Program
- Master’s Degree Program
- Doctoral Program
- Other

10. Select all nursing educational programs completed and fill in year you graduated from each

Check	Type of Program	Year Graduated
<input type="checkbox"/>	Diploma in Nursing	_____
<input type="checkbox"/>	Associate degree, nursing	_____
<input type="checkbox"/>	Baccalaureate Degree, nursing	_____
<input type="checkbox"/>	Baccalaureate Degree, other	_____
<input type="checkbox"/>	Masters’ degree, nursing	_____
<input type="checkbox"/>	Masters’ degree, other	_____
<input type="checkbox"/>	Doctoral degree, nursing	_____
<input type="checkbox"/>	Doctoral degree, other	_____

11. Select all advanced practice educational programs completed and obtained Advanced Practice Registered Nurse recognition (APRN) through the Hawaii State Board of Nursing.

Check	Type of Advanced Program	Year obtained APRN license in Hawaii
<input type="checkbox"/>	Nurse practitioner	_____
<input type="checkbox"/>	Clinical nurse specialist	_____
<input type="checkbox"/>	Nurse midwife	_____
<input type="checkbox"/>	Nurse anesthetist	_____
<input type="checkbox"/>	Nurse educator	_____
<input type="checkbox"/>	Nurse administrator/ management	_____

III. EMPLOYMENT STATUS

12. Which of the following best describes your current primary work situation? (**select one**)
- Working in a nursing position requiring an RN license or a position enhanced by my nursing knowledge and license.
 - Working in a non-nursing job – looking for an RN position
 - Working in a non-nursing job – not looking for an RN position
 - Not employed – looking for an RN position
 - Not employed – looking for a non-nursing job
 - Not employed – not looking for a job
 - Not employed – retired
13. How many employers do you currently work for as an RN?
- One employer
 - Two employers
 - Three or more employers
 - None of the above

For the following questions, please use the following definitions:

1. **Principal Employment:** Employment where the greatest number of your RN working hours are spent.
2. **Secondary Employment:** Employment where the second greatest number of your RN working hours are spent.

14. Please identify the type of setting that most closely corresponds to your **nursing practice** positions:

	<u>Principal Employment</u> (Select one)	<u>Secondary Employment</u> (Select one)
Hospital	_____	_____
Long Term Care	_____	_____
Nursing Education	_____	_____
Home Health	_____	_____
Hospice	_____	_____
Public Health	_____	_____
Student Health/ School	_____	_____
Ambulatory Care	_____	_____
Physician’s office	_____	_____
Occupational Health	_____	_____
Agency Staff	_____	_____
Traveling Nurse	_____	_____
Insurance Company/ HMO	_____	_____
Self-Employed	_____	_____
Other	_____	_____
None of the above	_____	_____

15. Please choose the major activity that best describes your **nursing position**:

	<u>Principal Employment (Select one)</u>	<u>Secondary Employment (Select one)</u>
Patient Care	_____	_____
Teaching / Instruction	_____	_____
Administration	_____	_____
Quality Assurance	_____	_____
Case Management	_____	_____
Nursing Research	_____	_____
Other	_____	_____
None of the above	_____	_____

16. How long have you been employed as a **RN** by your current facility/ employer?

	<u>Principal Employment (Select one)</u>	<u>Secondary Employment (Select one)</u>
a) Less than 1 year	_____	_____
b) 1 - 3 years	_____	_____
c) More than 3 years, but less than 5 years	_____	_____
d) 5 or more years, but less than 10 years	_____	_____
e) 10 or more years	_____	_____
f) None of the above	_____	_____

17. On average, how many hours per week (**all nursing employment**) do you work as an RN?

- _____ 10 hours or less
- _____ more than 10 hours, but less than 20 hours
- _____ at least 20 hours, but less than 30 hours
- _____ at least 30 hours, but less than 40 hours
- _____ at least 40 hours, but less than 50 hours
- _____ 50 hours or more
- _____ N/A

18. How likely are you to leave your principal RN employment in the next 12 months?

- _____ Very unlikely
- _____ Somewhat unlikely
- _____ Somewhat likely
- _____ Very likely
- _____ N/A

19. If you chose 'very likely' or 'somewhat likely' that you will leave your principal RN employment in the next 12 months, what is the main reason? (**Select one**)

- _____ Retirement
- _____ Family / Personal Leave
- _____ Dissatisfaction with job
- _____ Dissatisfaction with salary
- _____ Returning to school
- _____ Military / family relocation
- _____ Relocation to mainland for better opportunities
- _____ Other
- _____ N/A

20. How many years do you intend to continue practicing as a nurse

Less than 1 year

1 - 3 years

More than 3 years, but less than 5 years

5 or more years, but less than 10 years

10 or more years, but less than 15 years

15 or more years, but less than 20 years

20 or more years

N/A