

# **2005 Survey of Licensed Registered Nurses in Nevada**

**Prepared by:**

**John Packham, PhD  
University of Nevada School of Medicine**

**Tabor Griswold, MS  
University of Nevada School of Medicine**

**Jake Burkey, MS  
Washington State University**

**Chris Lake, PhD  
Nevada Hospital Association**

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# 2005 Survey of Licensed Registered Nurses in Nevada

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# CHAPTER ONE

## INTRODUCTION

### 1. Overview and Purpose of the 2005 Survey

The *2005 Survey of Licensed Registered Nurses in Nevada* provides current information on the registered nurse population and workforce in Nevada. Utilizing data based on a representative survey of RNs with an active license to practice nursing from the Nevada State Board of Nursing, this study represents the first comprehensive, statewide assessment of the nature and composition of the RN population and RN workforce in Nevada.

An accurate understanding of the RN workforce in Nevada is a major issue of public policy concern for several reasons. Nevada continues to face a chronic shortage of registered nurses – the largest health profession in the state – across all regions of the state and across a wide-range of health care settings. The shortage exhibits a qualitative dimension characterized by shortages of nursing personnel with the skills and experience needed to care for patients with higher levels of acuity and requiring more specialized care. Efforts to address the nursing shortage were advanced in 2001 when the Nevada State Legislature supported the doubling of student enrollment in state nursing programs. As such, assessing the state’s overall progress in addressing the nursing shortage, as well as predicting the future nursing workforce needs of employers, requires accurate data on the nature and composition of the RN workforce in Nevada.

In response to growing concern among policymakers and health care leaders about the lack of objective information on the characteristics of the registered nurse workforce in Nevada, the Medical Education Council of Nevada (MECON) undertook a statewide survey of licensed registered nurses in Nevada during the Spring of 2005. The primary purpose of the survey is to generate current and accurate data on Nevada’s RN population and workforce, including data on:

- The demographic make up of the state’s RN workforce, including the race/ethnicity, age, and gender composition of registered nurses;
- the level of education and certification of Nevada’s RNs;
- the current employment status and job characteristics of state RNs;
- estimates of the number and percent of RNs who no longer provide direct patient care and their reasons for leaving jobs where they provide direct care;
- RN’s satisfaction with their current job and with nursing as a career, and
- the capacity of the state’s nursing workforce to a bioterrorist attack or mass casualty event.

Another important aim of the 2005 RN survey is to establish baseline data to document changes and trends in the RN workforce through the next decade. Again, health care leaders and state policymakers have not only lacked basic data on the RN workforce, they have also lacked basic information how the RN workforce in Nevada has changed over the last couple of decades and how that same population is projected to change in the future. Thus, this report represents an important step in remedying gaps in the data and our understanding of the RN workforce in Nevada and provides detailed data on three major regions of the state: (1) southern Nevada (Clark County); (2) northern Nevada (Carson City, and Douglas and Washoe Counties); and (3) rural and frontier Nevada (Churchill, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and White Pine Counties).

The data and estimates presented in this report are based on a survey of the RN population in Nevada utilizing a complete list of licensed RNs obtained from the Nevada State Board of Nursing. On January 27, 2005, the RN survey was randomly distributed to a sample of 2,000 individuals in the RN population in the three previously mentioned regions of the state in proportion to the number of RNs residing in each region. A copy of the study’s questionnaire and a complete description of the study methodology, including follow-ups and the on-availability of completing the survey, are contained in Chapter 3 of the report. An additional 475 questionnaires were randomly distributed to licensees with out-of-state residences. The survey yielded an overall response rate of 43.4%. The response rate varied considerably by region of the state: 40.5% responded from southern Nevada; 52.5% responded from northern Nevada; 64.0% responded from rural and frontier Nevada; and 36.2% responded from residences outside of Nevada. Table 1 highlights the interstate nature of health care delivery and RN employment. Of the 1,017 individuals who responded to the 2005 survey, 756 individuals live and work in Nevada (74.3%) 19 work in Nevada, yet live outside of the state (1.9%); 90 live in Nevada, yet worked outside of the state or do not work (8.9%); and 152 live and work outside of Nevada (14.9%).

**Table 1 – Survey Responses of Nevada RN Population by Region of Residence and Employment – 2005**

Region of Employment	Region of Residence				Total Responses
	Nevada		Outside of Nevada		
	Sample Response Number	Percent	Sample Response Number	Percent	
Nevada	756	74.3%	19	1.9%	775
Outside of Nevada	90	8.9%	152	14.9%	242
<b>Nevada – Total</b>	<b>846</b>	<b>83.2%</b>	<b>171</b>	<b>16.8%</b>	<b>1,017</b>

**Note:** The number for those employed “Outside of Nevada” includes those residing in Nevada who are not working and live in Nevada.



For the purposes of this report, 865 or 85.8% of 1,017 licensed RNs who responded to the survey are located in Nevada. Registered nurses were considered to be located in Nevada if (1) their place of employment was in Nevada or (2) regardless of employment status, they were residents of Nevada. As such, there are a small, but significant number of individuals in our sample who reside in Nevada and work across state lines, or reside in another state and are part of the Nevada RN workforce. Table 2 highlights the small, yet nonetheless segment of the state’s RN population who work or reside in a different region of the state. Over 99.0% of the RN workforce in urban Nevada lives and works in the same region. In contrast, nearly 1 in 5 of licensed RNs residing in rural and frontier Nevada work in another region. Table 2 also highlights small but significant proportion of survey respondents who (1) live out of state but work in Nevada and (2) those who live in Nevada yet work out of state. Together, these segments represent 4.0% of the states workforce.

**Table 2 – Detailed Survey Responses of RN Population “Located in Nevada” by Region of Residence and Employment – 2005**

Region of Residence	Region of Employment									
	Southern Urban		Northern Urban		Rural and Frontier		Out of State		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Southern Urban	453	90.4%	0	0.0%	1	1.7%	9	50.0%	463	53.5%
Northern Urban	1	0.2%	243	84.4%	1	1.7%	8	44.4%	253	28.8%
Rural and Frontier	0	0.0%	11	3.8%	46	79.3%	1	5.6%	58	7.2%
Out of State	8	1.6%	10	3.5%	1	1.7%	0	0.0%	19	2.2%
Not Working	39	7.8%	24	8.3%	9	15.5%	0	0.0%	72	8.3%
<b>Total</b>	<b>501</b>	<b>100.0%</b>	<b>288</b>	<b>100.0%</b>	<b>59</b>	<b>100.0%</b>	<b>18</b>	<b>100.0%</b>	<b>865</b>	<b>100.0%</b>

The 2005 RN survey has been coordinated by Dr. John Packham, PhD, from the University of Nevada School of Medicine. Coauthors include Tabor Griswold, MS, University of Nevada School of Medicine; Jake Burkey, MS, Washington State University; and Christopher Lake, PhD, Nevada Hospital Association. This project is financially supported in part by the Nevada State Health Division, Nevada Hospital Association, and the Health Resources and Services Administration (HRSA) through a cooperative agreement (1U3MRC03898-01-00) and the Nevada Rural Hospital Flexibility Program funded through a HRSA grant (H.54RH00015-06-00). The project has been endorsed by the Nursing Institute of Nevada (NIN), which is comprised of a wide-range of statewide nursing education and workforce stakeholders.

## **2. Organization of the 2005 Report**

The *2005 Survey of Licensed Registered Nurses in Nevada* contains two sections: (1) *The RN Population in Nevada* – a narrative description of the major findings and conclusions of the survey; and (2) *Methodology and Questionnaire* – a discussion of the survey’s methodology, sampling design, and questionnaire. This report contains the principle findings of the survey undertaken during the Spring of 2005. During the Spring of 2006, a revised edition of the report will be released which will include a set of tables providing a more fine grained analysis of the survey findings.

Our ambition is to replicate this survey at regular intervals, e.g., preferable every two years or minimally every four years. The two year interval would help tracking changes in the southern region workforce issues, which are of considerable importance to the state as a whole for policy implications. As such, we are interested in receiving feedback on what information was useful, what was not, and what types of questions remain unanswered. For more information on the survey and this report, to request a hard copy of the report, or for information on the release of the revised version of the report in the Spring of 2006, please contact Tabor Griswold at the University of Nevada School of Medicine at 775-784-4841 or [mgriswol@unr.edu](mailto:mgriswol@unr.edu).

## **3. Acknowledgments**

We are indebted to a number of individuals and organizations who contributed time and resources to the survey. First, the Nevada State Board of Nursing (NSBN) provided the licensure list of RNs from which the study sample was drawn and NSBN staff contributed to the development of the questionnaire used in the survey. Staff and student interns at the Nevada Hospital Association and the Center for Education and Health Services Outreach at the University of Nevada School of Medicine assisted with the mailing and distribution of surveys, as well as data collection and data entry tasks. We would also like to acknowledge the members of the Washoe Medical Center Shared Governance Committee who served as the pilot group for the survey and who provided vital feedback on the questionnaire.

## CHAPTER TWO

### REGISTERED NURSE POPULATION IN NEVADA – 2005

#### 1. The Number and Geographic Distribution of the Licensed Registered Nurses in Nevada

On December 1, 2004, 20,494 individuals had current licenses from the Nevada State Board of Nursing to practice as registered nurses in Nevada. Of these, 14,858 or 72.5% of the RN population were residents of Nevada, while 5,636 or 27.5% lived outside of the state. Among the state's resident RN population, 10,159 or 68.4% were residents of southern Nevada (Clark County); 3,837 or 25.8% were residents of northern Nevada (Carson City, Douglas and Washoe Counties); and 862 or 5.8% lived in rural and frontier Nevada (the remaining 13 counties of the state).

Tables 3 and 4 highlight the number and geographic distribution of licensed RNs in Nevada, respectively, in 1999 and 2004. They also underscore the growth in the number of licensed RNs per 100,000 population during that five year period. According to the Nevada State Board of Nursing, there were 11,730 licensed RNs in Nevada in 1999 or 648 licensed RNs per 100,000 resident population. RN-to-population ratios were higher in northern Nevada and lower in southern and rural regions of the state. While the number of licensed RNs in Nevada and in each region of the state has grown steadily state over the last five years, that growth has not kept pace with state population growth.

**Table 3 – Licensed RNs per 100,000 Resident Population in Nevada – 1999**

Region of Residence	Licensed RNs	Estimated Population – 1999	Licensed RNs per 100,000 Population
Southern Nevada	7,707	1,217,155	633
Northern Nevada	3,224	407,464	791
Rural and Frontier	799	184,634	433
Nevada – Total	11,730	1,809,253	648

Table 4 reveals that the licensed RN population in Nevada grew by 3,128 or 26.7% between 1999 and 2004. However, the licensed RN-to-population ratio in Nevada declined by 5.2% from 648 RNs per 100,000 population in 1999 to 616 RNs per 100,000 population in 2004. This trend – substantial increases in licensed RNs coupled with a net decline in licensed RNs per capita – has taken place in all regions of the state. These tables also reveal that the number of licensed RNS per capita dropped in each region of the state declined from 1999 to 2004.

**Table 4 – Licensed RNs per 100,000 Resident Population in Nevada – 2004**

Region of Residence	Licensed RNs	Estimated Population – 2004	Licensed RNs per 100,000 Population
Southern Nevada	10,159	1,715,337	592
Northern Nevada	3,837	487,402	787
Rural and Frontier	862	208,029	414
Nevada – Total	14,858	2,410,768	616

While the growth of the number of licensed RNs is a result of increased enrollment in state nursing programs, survey results reveal the considerable degree to which state employers are reliant on RNs from other states. Only 25.8% of respondents received their initial RN license from the Nevada State Board of Nursing. In fact, a greater percentage of the state’s RN population obtained their initial license from a state east of the Mississippi (34.8%) than Nevada. Excluding Nevada, 37.8% of the RN population received their initial license from a state west of the Mississippi, including 12.9% who received initial licensure in California. Less than one percent of the study sample obtained their initial RN license in another country.

## **2. Employment Characteristics of the Registered Nurse Population in Nevada**

Among the Nevada RN population, 88.8% are employed in nursing, either full-time (self-reported 35 or more hours per week) or part-time (self-reported less than 35 hours per week) in nursing positions for which they are trained and educated. Only 2.9% of the RN population is employed in non-nursing work and 8.3% of the RN population is not employed or retired. As Table 5 indicates, 89.4% of the RN population in southern Nevada is employed in nursing, as compared to 89.2% in northern Nevada and 81.4% in rural and frontier areas. A slightly lower percentage of the RN population in southern Nevada is employed in non-nursing positions (3.7%), as compared to rural and frontier Nevada (4.1%) and northern Nevada (3.7%). Rural areas are characterized by a higher percentage of RNs who are either not employed or retired (14.5%) than their southern (6.9%) and northern (7.1%) counterparts. In general, across Nevada, 88.8% of licensed RNs in Nevada are estimated to be employed in nursing positions for which they are trained and educated. Nationally, 81.7 percent of the RN population in 2000 was employed in nursing.

In 2005, there are an estimated 13,207 RNs in Nevada who are employed full-time or part-time in nursing. Across regions of the state, there are an estimated 9,083 RNs employed in nursing in southern Nevada, as compared to 3,422 RNs employed in nursing in northern Nevada and 701 RNs employed in nursing in rural and frontier areas.

Table 5 displays the number and geographic distribution of employed RNs per 100,000 population. According to estimates derived from the 2005 RN survey, there are approximately 548 RNs per 100,000 population in Nevada. This figure represents an improvement over the 520 RNs per 100,000 population reported for Nevada in 2000 in the National Sample Survey of Registered Nurses. This improvement reflects both successful efforts to recruit RNs to Nevada and the impact of increased enrollment in state RN education programs. However, the statewide figure of 548 RNs per 100,000 population remains well below the national average of 782 per 100,000 population and the regional average of 654 RNs per 100,000 reported for 2000.

**Table 5 – Estimated Number of RNs Employed in Nursing per 100,000 Population in Nevada – 2005**

Region	RNs Employed in Nursing						Number of RNs per 100,000 Population
	Full-time		Part-Time		Total		
	Number	Percent	Number	Percent	Number	Percent	
<b>Southern Nevada</b>	7,769	85.5%	1,315	14.5%	9,083	89.4%	530
<b>Northern Nevada</b>	2,709	79.2%	713	20.8%	3,422	89.2%	702
<b>Rural and Frontier</b>	636	77.1%	161	22.9%	701	81.4%	337
<b>Nevada – Total</b>	<b>11,018</b>	<b>82.8%</b>	<b>2,188</b>	<b>17.2%</b>	<b>13,207</b>	<b>88.8%</b>	<b>548</b>

The 2005 survey reveals substantial differences across regions of Nevada in the number of employed RNs per capita. Southern Nevada has an estimated 530 RNs per 100,000 population despite significant progress in recruiting licensed RNs to the region and despite a comparatively high percentage of the RN population that is employed in nursing (almost 90%). Rural and frontier regions have fewer RNs per capita – 337 per 100,000 population – reflecting their employment in urban areas of the state. These differences are also partly explained by the greater opportunities for RN employment in acute and specialty care settings in urban areas. However, the low number of RNs per capita in rural regions underscores the difficulties rural employers face in recruiting and retaining registered nurses in the face of fierce competition from urban areas of Nevada and neighboring states with their own nursing shortages. Finally, while northern Nevada fares comparatively better than southern and rural areas with an estimated 702 RNs per 100,000 population, all regions of the state are, again, well below the national average of 782 per 100,000 population reported for 2000.

Table 6 presents data on the distribution of registered nurses by employment setting in Nevada in 2005. It also provides comparative data for Nevada and the United States, for year 2000, utilizing data from the National Sample Survey of Registered Nurses. In 2005, 58.6% of the employed RN population in Nevada was employed in the hospital sector, 14.1% were employed in ambulatory care settings, and 6.6% were employed in public or community health care

settings. Smaller percentages were employed in home health care (3.9%), nursing homes and extend care facilities (3.0%), and nursing education programs (1.8%). An interesting development was the appearance of RNs working in the prison and correctional system (1.6%).

**Table 6 – Estimated Distribution of Employed RNs in Nevada by Place of Employment – 2000 and 2005**

Employment Setting	Nevada – 2005			Nevada – 2000*	US – 2000*
	Survey Response (N)	Number	Percent		
Hospitals	463	8,013	58.6%	64.8%	59.1%
Ambulatory Care	111	1,913	14.1%	12.2%	9.5%
Community/Public Health	52	851	6.6%	9.9%	12.8%
Home Health Care	31	529	3.9%	—	—
Nursing Homes	24	398	3.0%	3.5%	6.9%
School Health Services	19	344	2.4%	1.5%	3.8%
Nursing Education Programs	14	252	1.8%	1.5%	2.1%
Prisons/Corrections Facilities	13	200	1.6%	—	—
Other	63	1,070	8.0%	6.6%	5.8%
<b>Total</b>	<b>790</b>	<b>13,570</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

Notes: The figures presented in this table are based on the 91.3% of Nevada nursing population survey respondents who supplied employment data. Data for Nevada and the US in 2000 are from the National Sample Survey of Registered Nurses.

Data presented in Table 6 suggest a declining percentage of RNs who are employed in hospital settings and a relative growth in proportion of the RN population employed in ambulatory care and other outpatient settings since 2000. While the absolute number of registered nurses employed by Nevada hospitals continues to grow, survey data suggests that Nevada RN employment trends mirror the general national trend of a declining proportion of RNs employed in hospital work versus ambulatory and other outpatient settings.

Table 7 provides information on the occupational distribution of the RN population. In 2005, an estimated 65.2% of the Nevada RN population was employed in direct patient care in both inpatient and outpatient settings, 11.1% were employed in administration and management, and 23.7% were employed in other occupations, including case management and utilization review (5.7%), nurse educator positions (3.3%), school nurse positions (2.3%), nurse practitioner positions (2.2%) and public health nurse (1.8%).

**Table 7 – Estimated Distribution of Employed RNs in Nevada by Primary Job Classification – 2005**

Primary Job Classification	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Direct Patient Care	6,104	65.8%	2,172	62.0%	567	72.0%	8,843	65.2%
Administration	1,024	11.0%	440	12.5%	47	6.0%	1,511	11.1%
Other	2,151	23.2%	892	25.5%	173	22.0%	3,216	23.7%
<b>Total</b>	<b>9,278</b>	<b>100.0%</b>	<b>3,504</b>	<b>100.0%</b>	<b>787</b>	<b>100.0%</b>	<b>13,570</b>	<b>100.0%</b>

Note: The figures presented in this table are based on the 91.0% of Nevada nursing population survey respondents who supplied employment data.

### 3. Age Characteristics of the Registered Nurse Population in Nevada

Table 8 highlights the age distribution and average age of the RN population in Nevada statewide and by region of the state. Statewide, 64.8% of the RN population is 46 years old or older. The average age of the licensed RN population in Nevada is 49.1 years. While the aging of the RN population in Nevada is evidenced across each region of the state, southern Nevada has a slightly younger RN profile than northern and rural regions of the state.

**Table 8 – Estimated Age Distribution of the RN Population in Nevada – 2005**

Age Cohort	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
20 to 34 Years	1,414	14.3%	376	9.9%	73	8.8%	1,863	12.4%
35 to 45 Years	2,131	21.6%	843	22.3%	175	21.1%	3,149	21.8%
46 to 55 Years	3,625	36.7%	1,309	34.6%	292	35.1%	5,227	35.9%
56 to 65 Years	2,052	20.8%	1,037	27.4%	219	26.3%	3,308	23.4%
66 Years or Older	657	6.7%	220	5.8%	73	8.8%	951	6.5%
<b>Total</b>	<b>9,880</b>	<b>100.0%</b>	<b>3,785</b>	<b>100.0%</b>	<b>833</b>	<b>100.0%</b>	<b>14,498</b>	<b>100.0%</b>
<b>Average Age (Years)</b>	<b>48.5</b>		<b>49.7</b>		<b>50.7</b>		<b>49.1</b>	

Note: The figures presented in this table are based on the 97.7% of Nevada nursing population survey respondents who supplied information on their age.

The average age of the RN population in southern Nevada is 48.5 years as compared to 49.7 in northern Nevada and 50.7 years in rural and frontier counties. By comparison, in 2000, the average age of the RN for the entire US population was 45.2 years. The aging of the RN population is also evidenced by data on the year RNs in Nevada obtained their initial license. Survey results indicate that approximately 3 of 5 licensed RNs (61.3%) of the state’s RN population obtained their initial license prior to 1990. In general, the aging of Nevada’s RN population reflects fewer students and young nurses entering the RN population and large segments of the state’s RN population moving in their 50s and 60s, if not exiting from the RN population altogether.

#### 4. Educational Preparation of Registered Nurses in Nevada

Table 9 summarizes survey results on the highest level of educational preparation in the RN population in Nevada. The basic educational preparation for the largest proportion of RNs in Nevada is the associate degree. In 2005, 38.7% of the state’s RN population received their basic nursing education in an associate degree program, followed by 37.0% who attended bachelor’s degree programs and 14.8% from diploma programs. The Percent of RNs with a masters or doctoral degree is 8.3% and 0.8% respectively.

**Table 9 – Estimated Distribution of the RN Population in Nevada by Highest Level of Nursing Education – 2005**

Highest Level of Nursing Education	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Diploma	1,594	15.7%	506	13.2%	131	15.3%	2,231	14.8%
Associate Degree	3,685	36.4%	1,504	39.3%	497	57.6%	5,686	38.7%
Bachelors Degree	3,805	37.6%	1,504	39.3%	190	22.0%	5,498	37.0%
Masters Degree	956	9.4%	272	7.1%	44	5.1%	1,272	8.3%
Doctoral Degree	80	0.8%	39	1.0%	0	0.0%	119	0.8%
<b>Total</b>	<b>10,119</b>	<b>100.0%</b>	<b>3,824</b>	<b>100.0%</b>	<b>862</b>	<b>100.0%</b>	<b>14,805</b>	<b>100.0%</b>

Notes: The figures presented in this table are based on the 99.7% of Nevada nursing population survey respondents who supplied information on education. Any estimates less than 20 should be viewed with caution. Numbers and percentages may not total 100% due to rounding.

Urban areas of the state are characterized by higher percentages of the RN population with bachelor’s degrees than those with associate degree preparation in nursing. Approximately 37% of RNs in urban counties of the state possess bachelor’s degrees as compared to only 22% in rural counties – indeed, associate degree programs continue to prepare the lion’s share of RNs



for rural and frontier employers. Underscoring the state’s reliance on RNs from other states, results from the 2005 Nevada RN Survey indicate that approximately 1 of 4 licensed RNs in Nevada (25.7%) obtained their highest level of RN preparation from nursing programs in Nevada. Survey results on educational preparation also highlight the aging of the state’s RN workforce. Among RNs currently employed in Nevada, the average number of years between 2005 and the year they completed their highest level of nursing diploma or degree is 20.7 years.

## 5. Gender, Racial, and Ethnic Distribution of the Registered Nurse Population in Nevada

The 2005 Nevada RN Survey include questions on the racial and ethnic background of RNs, as well as the gender distribution of the state’s RN population and workforce. The survey revealed that 94.3% of the state’s RN population are female and 5.7% are male. As Table 10 indicates, the gender distribution did not vary significantly by region of the state, though rural and frontier regions of the state has double the percentages of male RNs versus urban regions. The gender distribution of the state’s RN population is similar to figures reported for both Nevada and the US – 94.6% female, 5.4% male – in the 2000 National Sample Survey of Registered Nurses.

**Table 10 – Estimated Gender Distribution of the RN Population in Nevada – 2005**

Gender	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Female	9,601	94.9%	3,591	94.2%	774	89.8%	13,966	94.3%
Male	518	5.1%	220	5.8%	88	10.2%	826	5.7%
Total	10,119	100.0%	3,811	100.0%	862	100.0%	14,792	100.0%

Notes: The figures presented in this table are based on the 99.5% of Nevada nursing population survey respondents who supplied information on gender.

Table 11 highlights the racial distribution of the state’s RN population in 2005 against the racial distribution of the Nevada and US RN population reported in the 2000 National Sample Survey of Registered Nurses. An estimated 80.1% of the state’s RN workforce is white. Of the 18.4% of the RN population that come from minority backgrounds, 10.0% are Asian, 3.5% are black or African American, 1.3% are Native Hawaiian, and less than 1% are American Indian or Native Alaskan. Data presented in Table 11 suggest a significant growth in the Asian RN population in Nevada and an associated decline in the percentage of white RNs. Across regions of the state, southern Nevada possesses the largest percentage of non-white or minority-population RNs (25.2% of the RN population), followed by rural and frontier areas (12.1%) and northern Nevada (8.9%). In general, the diversity of the Nevada RN population is coming to mirror the rapid racial and ethnic diversification of the state’s population that has taken place over the last two

decades.

**Table 11 – Estimated Distribution of the RN Population in Nevada by Racial Background – 2000 and 2005**

Racial Background	Nevada – 2005		Nevada – 2000	US – 2000
	Number	Percent		
White	11,912	81.8%	84.2%	85.8%
Asian	1,373	9.4%	6.1%	3.8%
Black	549	3.8%	4.3%	5.2%
Native Hawaiian/Pacific Islander	214	1.5%	0.2%	0.3%
American Indian/Alaskan Native	76	0.5%	0.4%	0.5%
Other or Not Known	442	3.0%	4.8%	4.4%
<b>Total</b>	<b>14,566</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

**Notes:** The figures presented in this table are based on the 98.0% of Nevada nursing population survey respondents who supplied data on racial and ethnic background. Data for Nevada and the US in 2000 are from the National Sample Survey of Registered Nurses.

In addition to data on the racial background, the survey generated data on the Hispanic or Latino ancestry and cultural competency – as measured by the self-reported ability to speak Spanish as a second language – of the Nevada RN workforce in 2005. Only 3.9% of the RN population in Nevada claim Hispanic or Latino ancestry – well below the double-digit figures reported for the population in Census and Nevada State Demographer’s Office statistics. An estimated 5.1% of the RN population in southern Nevada claims Hispanic ancestry, as compared to 2.5% of the RN population in northern Nevada and 2.7% of the RN population in rural areas of the state. An estimated 6.8% of the state’s RN population possessed a self-reported ability to speak Spanish as a second language. An estimated 7.7% of the RN population in southern Nevada reports the ability to speak Spanish as a second language, as compared to 6.3% of the RN population in northern Nevada and 4.1% of the RN population in rural areas of the state.

## **6. Job and Career Satisfaction of Registered Nurses in Nevada**

Table 12 provides data on self-reported measures of job satisfaction in the Nevada RN workforce and variation across regions of the state utilizing a four-point job satisfaction scale. It also provides comparative data on job satisfaction between hospital and non-hospital based RNs. The survey indicates that Nevada nurses are generally satisfied with their current job position. However, the large group of “Somewhat Satisfied” nurses should be considered marginally satisfied or dissatisfied. Only the “Very Satisfied” category can be viewed as unequivocally satisfied respondents.

In general, results from the 2005 Nevada RN survey indicate that approximately 87% of the overall RN population in Nevada is either “Somewhat Satisfied” or “Very Satisfied” with the their current principal job. Conversely, slightly less that 13% of the RN population expressed dissatisfaction with their current job. Job dissatisfaction varied by region of the state and by place of employment. Job dissatisfaction was higher among southern Nevada RNs than other regions of the state. An estimated 16.0% of southern Nevada RNs expressed dissatisfaction with their current job as compared to 8.6% in northern Nevada and 9.0% in rural and frontier areas of the state.

**Table 12 – Self-Reported Job Satisfaction among the RN Workforce in Nevada – 2005**

Level of Job Satisfaction	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Very Dissatisfied	359	3.8%	91	2.5%	73	8.9%	522	4.0%
Somewhat Dissatisfied	1,115	11.8%	220	6.2%	15	1.8%	1,350	9.8%
Somewhat Satisfied	4,582	48.4%	1,737	48.6%	438	53.6%	6,757	48.5%
Very Satisfied	3,406	36.0%	1,530	42.8%	292	35.7%	5,228	37.7%
<b>Total</b>	<b>9,462</b>	<b>100.0%</b>	<b>3,578</b>	<b>100.0%</b>	<b>818</b>	<b>100.0%</b>	<b>13,858</b>	<b>100.0%</b>

**Notes: The figures presented in this table are based on the 93.5% of Nevada nursing population survey respondents who supplied data on job satisfaction.**

Table 13 examines self-reported job satisfaction among hospital-based versus non-hospital-based registered nurses in Nevada. While both categories exhibit high levels of self-report job satisfaction, hospital nurses have slightly lower levels of job satisfaction than their non-hospital counterparts. Over 90% of RNs employed in non-hospital settings reported being “Somewhat Satisfied” or “Very Satisfied” with their present job as compared to 83.8% of RNs employed in hospitals. Nearly half of non-hospital employed RNs were “Very Satisfied” with their current job (47.5%), as compared to only 29.8% of hospital-based RNs.

**Table 13 – Self-Reported Job Satisfaction among Hospital-Based versus Non-Hospital RNs in Nevada – 2005**

Level of Job Satisfaction	Hospital RNs		Non-Hospital RNs		Nevada	
	Number	Percent	Number	Percent	Number	Percent
Very Dissatisfied	361	4.6%	155	3.0%	522	4.0%
Somewhat Dissatisfied	910	11.7%	326	6.4%	1,253	9.6%
Somewhat Satisfied	4,174	53.5%	2,250	43.8%	6,509	49.7%
Very Satisfied	2,353	30.2%	2,405	46.8%	4,821	36.8%
<b>Total</b>	<b>7,798</b>	<b>100.0%</b>	<b>5,136</b>	<b>100.0%</b>	<b>12,934</b>	<b>100.0%</b>

Notes: The figures presented in this table are based on the 88.2% of Nevada nursing population survey respondents who supplied data on job satisfaction and are working in nursing.

Tables 14 and 15 provide data on self-reported job satisfaction among, respectively, hospital and non-hospital RNs by region of the state. These data indicate lower levels of job satisfaction among southern urban registered nurses than their northern and rural counterparts regardless of place of employment.

**Table 14 – Self-Reported Job Satisfaction among Hospital-Based RNs by Region in Nevada – 2005**

Level of Job Satisfaction	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Very Dissatisfied	246	4.6%	65	3.2%	65	14.3%	376	4.6%
Somewhat Dissatisfied	813	15.2%	131	6.5%	0	0.0%	944	11.6%
Somewhat Satisfied	2,836	53.2%	1,125	55.8%	237	52.4%	4,198	54.0%
Very Satisfied	1,437	27.0%	693	34.4%	151	33.3%	2,281	29.8%
<b>Total</b>	<b>5,332</b>	<b>100.0%</b>	<b>2,014</b>	<b>100.0%</b>	<b>452</b>	<b>100.0%</b>	<b>7,798</b>	<b>100.0%</b>

Notes: The figures presented in this table are based on the 60.7% of Nevada nursing population survey respondents who supplied data on job satisfaction, are working in nursing and are hospital based.

**Table 15 – Self-Reported Job Satisfaction among Non-Hospital RNs  
by Region in Nevada – 2005**

Level of Job Satisfaction	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Very Dissatisfied	144	4.1%	25	1.9%	0	0.0%	168	2.9%
Somewhat Dissatisfied	246	7.0%	74	5.7%	11	3.7%	331	6.2%
Somewhat Satisfied	1,438	40.9%	553	41.0%	188	63.0%	2,178	43.1%
Very Satisfied	1,684	48.0%	675	51.4%	99	33.3%	2,459	47.7%
<b>Total</b>	<b>3,512</b>	<b>100.0%</b>	<b>1,326</b>	<b>100.0%</b>	<b>298</b>	<b>100.0%</b>	<b>5,136</b>	<b>100.0%</b>

Notes: The figures presented in this table are based on the 39.3% of Nevada nursing population survey respondents who supplied data on job satisfaction, are working in nursing and are not hospital based.

Tables 16 through 19 provide data on self-reported career satisfaction in the Nevada RN population, as well as detailed data on career satisfaction by place of employment (hospital versus non-hospital nurses) and by region. In many respects, levels of career satisfaction mirror job satisfaction trends. Career satisfaction was slightly higher in rural areas of the state than urban counties. For example, nearly half of rural and frontier RNs report being “Very Satisfied” with nursing as a career. As was also the case with job satisfaction, non-hospital employed RNs expressed slightly greater levels of career satisfaction than their hospital-based counterparts. In general, the high levels of job and career satisfaction reported by survey respondents contrast sharply with the dissatisfaction widely reported in state and local media accounts.

**Table 16 – Self-Reported Career Satisfaction among the RN  
Population in Nevada – 2005**

Level of Career Satisfaction	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Very Dissatisfied	598	6.0%	104	2.8%	44	4.0%	745	4.0%
Somewhat Dissatisfied	1,135	11.5%	259	7.0%	81	9.8%	1,453	9.8%
Somewhat Satisfied	4,362	44.2%	1,309	35.4%	343	48.5%	6,008	48.5%
Very Satisfied	3,785	38.3%	2,022	54.7%	373	37.7%	6,201	37.7%
<b>Total</b>	<b>9,880</b>	<b>100.0%</b>	<b>3,694</b>	<b>100.0%</b>	<b>838</b>	<b>100.0%</b>	<b>14,407</b>	<b>100.0%</b>

Notes: The figures presented in this table are based on the 96.9% of Nevada nursing population survey respondents who supplied data on career satisfaction.

**Table 17 – Self-Reported Career Satisfaction among Hospital-Based versus Non-Hospital RNs in Nevada – 2005**

Level of Career Satisfaction	Hospital Based RNs		Non-Hospital Based RNs		Nevada	
	Number	Percent	Number	Percent	Number	Percent
Very Dissatisfied	387	4.9%	222	4.3%	608	3.8%
Somewhat Dissatisfied	756	10.0%	392	7.6%	1,149	8.9%
Somewhat Satisfied	3,277	42.9%	2,048	39.9%	5,325	48.6%
Very Satisfied	3,378	42.3%	2,474	48.2%	5,852	38.6%
<b>Total</b>	<b>7,798</b>	<b>100.0%</b>	<b>5,136</b>	<b>100.0%</b>	<b>12,934</b>	<b>100.0%</b>

Notes: The figures presented in this table are based on the 88.4% of Nevada nursing population survey respondents who supplied data on career satisfaction and employment.

**Table 18 – Self-Reported Career Satisfaction among Hospital-Based RNs by Region in Nevada – 2005**

Level of Career Satisfaction	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Very Dissatisfied	285	5.3%	67	3.3%	43	9.5%	395	4.9%
Somewhat Dissatisfied	702	13.2%	107	5.3%	0	0.0%	809	10.0%
Somewhat Satisfied	2,486	46.6%	712	35.3%	215	47.6%	3,413	42.9%
Very Satisfied	1,860	34.9%	1,128	56.0%	194	42.9%	3,181	42.3%
<b>Total</b>	<b>5,332</b>	<b>100.0%</b>	<b>2,014</b>	<b>100.0%</b>	<b>452</b>	<b>100.0%</b>	<b>7,798</b>	<b>100.0%</b>

Notes: The figures presented in this table are based on the 59.1% of Nevada nursing population survey respondents who supplied data on career satisfaction and employment, and who are hospital based.

**Table 19 – Self-Reported Career Satisfaction among Non-Hospital RNs  
by Region in Nevada – 2005**

Level of Career Satisfaction	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Very Dissatisfied	231	6.6%	25	1.9%	0	0.0%	256	4.3%
Somewhat Dissatisfied	315	9.0%	86	6.5%	11	3.8%	413	7.6%
Somewhat Satisfied	1,415	41.3%	504	38.0%	115	38.5%	2,069	39.9%
Very Satisfied	1,514	43.1%	712	53.7%	172	57.7%	2,398	48.2%
<b>Total</b>	<b>3,512</b>	<b>100.0%</b>	<b>1,326</b>	<b>100.0%</b>	<b>298</b>	<b>100.0%</b>	<b>5,136</b>	<b>100.0%</b>

Notes: The figures presented in this table are based on the 39.3% of Nevada nursing population survey respondents who supplied data on career satisfaction and employment, and who are not hospital based.

**7. Registered Nurses Not Employed in Direct Patient Care**

Table 20 provides data on the segment of the Nevada RN population who no longer provide direct patient care or who have never provided direct patient care during their career. According to survey responses, 28.0% of the Nevada RN population indicated that they do not or no longer provide direct patient care.

**Table 20 – Estimated Distribution of the Nevada RN Population in Nevada  
Who Do Not Provide Direct Patient Care by Length of Time Since  
Providing Direct Patient Care – 2005**

Years Since Direct Patient Care Delivery	Southern Nevada		Northern Nevada		Rural and Frontier		Nevada	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Less than 1 year	857	31.9%	298	25.3%	88	35.0%	1,242	29.8%
1-2 Years	239	8.9%	104	8.0%	73	30.0%	416	10.3%
3-4 Years	478	17.8%	194	17.2%	29	10.0%	702	16.9%
More than 5 years	1,036	38.5%	557	48.3%	44	20.0%	1,637	40.5%
Never worked as an RN	80	3.0%	13	1.1%	15	5.0%	107	2.5%
<b>Total</b>	<b>2,690</b>	<b>100.0%</b>	<b>1,166</b>	<b>100.0%</b>	<b>249</b>	<b>100.0%</b>	<b>4,104</b>	<b>100.0%</b>

An estimated 40.5% indicated that it has been more than five years since they provided direct patient care and less than 3% indicated that they never have provided direct patient care. Another 29.8 % indicated that it has been less than one year since they held a position in which they provided direct care to patients and 26.8% indicated that it has been 1 to 5 years since they worked in a position where they provided direct patient care

Those who indicated that they do not currently provide direct patient care were asked to select one or more reasons why they do not provide direct patient care. In order, the top five reasons given by RNs for not or no longer providing direct patient care are: (1) current job is more rewarding professionally (24.0%); (2) hours are more convenient in other position (22.8%); (3) better salary in other position or profession (17.0%); (4) concern about safety in health care environment (10.8%); and (5) disability or illness (7.9%).

### 8. Registered Nurses’ Willingness and Ability to Respond to Disasters and Mass Casualty Events in Nevada

A final set of questions in the 2005 Nevada RN Survey dealt with the willingness and ability of the Nevada RN population to respond to disasters and mass casualty events. Table 21 lists the percent of the Nevada RN population willing to provide patient care during a mass casualty event by type of event. Responses range from 75.5% or 11,220 RNs who indicated they would provide patient care during a natural disaster to 40.7% or 6,048 RNs who would provide care during a radiologic incident. Importantly, a slightly more than one in five licensed RNs in Nevada indicated that they would not be able to provide care in a mass casualty event.

**Table 21 – Estimated Distribution of the Nevada RN Population Willing to Provide Patient Care During Mass Casualty Events by Type of Event– 2005**

Mass Casualty Event	RN Survey Population	
	Number	Percent
Natural Disaster	11,220	75.5%
Explosive Event	8,342	56.2%
Chemical Incident	7,173	48.3%
Biologic Incident	6,867	46.2%
Contagious Epidemic	6,487	43.7%
Radiologic Incident	6,048	40.7%
Unable to Commit Time during Any Event	3,214	21.6%



Survey results indicate a significant portion of the RNs in the state of Nevada could be mobilized from their stated commitment. Survey respondents were next asked to indicate how much time they would be able to commit during a disaster or mass casualty event in another community. Table 22 ranks responses given by the RN population in Nevada. The majority of Nevada RN population indicated they could commit some amount of time during a mass casualty event or disaster in another community – indeed, survey results suggest 42.0% of the RN population is willing to commit a week or more to providing care during such an event. However, more than one third (34.0%) of the sample indicated that they were not able to commit time to providing patient care during a disaster or mass casualty event.

**Table 22 – Estimated Distribution of the Nevada RN Population Willing to Provide Patient Care During Mass Casualty Events by Amount of Time Willing to Provide Care – 2005**

Amount of Time Willing to Provide Care During a Mass Casualty Event	RN Survey Population	
	Number	Percent
1 Week or Less	3,576	24.1%
1 to 3 Weeks	3,530	23.8%
1 to 2 Months	1,803	12.1%
6 Months or Less	240	1.6%
More than 6 Months	661	4.5%
Not Able to Commit Any Time	5,047	34.0%

Tables 23 through 28 provide estimates on the number and distribution of the RN population willing to commit time to providing care during six major types of mass casualty events. In general, there was an inverse relationship between the percent of the RN population willing to provide care during any given type of mass casualty event and the actual amount of time they were willing to provide care. Approximately one-third of the RN population was willing to commit a week or less across each type of mass casualty event. Similarly, a little more than one-half of the RN population was able to commit to providing care for 1 to 3 weeks or less across each type of mass casualty event. Across each of the six types of mass casualty events, the percent of the RN population unwilling to provide any amount of care ranged from 11.9% (contagious epidemic) to 17.3% (both natural disaster and explosive incident).

Regardless of ability to commit time to providing care, respondents were asked to identify factors that negatively influence their ability to provide care during a mass casualty event. The top five responses given in order of importance were: (1) financial issues (43.0%); (2)

commuting distances or issues (33.7%); (3) family members who are affected by the incident (32.3%); (4) personal safety concerns (30.0%); and (5) child care issues (24.4%).

**Table 23 – Estimated Distribution of the Nevada RN Population Willing to Provide Patient Care During a Natural Disaster by Amount of Time Willing to Commit – 2005**

Amount of Time to Commit During a Natural Disaster	RN Survey Population	
	Number	Percent
1 Week or Less	2,598	30.4%
1 to 3 Weeks	2,541	29.7%
1 to 2 Months	1,305	15.3%
6 Months or Less	170	2.0%
More than 6 Months	454	5.3%
Not Able to Commit Any Time	1,475	17.3%

**Table 24 – Estimated Distribution of the Nevada RN Population Willing to Provide Patient Care During an Explosive Event by Amount of Time Willing to Commit – 2005**

Amount of Time to Commit During an Explosive Incident	RN Survey Population	
	Number	Percent
1 Week or Less	1,586	33.4%
1 to 3 Weeks	1,113	23.4%
1 to 2 Months	835	17.6%
6 Months or Less	118	2.5%
More than 6 Months	321	6.7%
Not Able to Commit Any Time	776	17.3%

**Table 25 – Estimated Distribution of the Nevada RN Population Willing to Provide Patient Care During a Chemical Incident by Amount of Time Willing to Commit – 2005**

Amount of Time to Commit During a Chemical Incident	RN Survey Population	
	Number	Percent
1 Week or Less	1,153	32.9%
1 to 3 Weeks	849	24.2%
1 to 2 Months	667	19.0%
6 Months or Less	87	2.5%
More than 6 Months	247	7.0%
Not Able to Commit Any Time	500	14.3%

**Table 26 – Estimated Distribution of the Nevada RN Population Willing to Provide Patient Care During Biologic Incident by Amount of Time Willing to Commit – 2005**

Amount of Time to Commit During a Biologic Incident	RN Survey Population	
	Number	Percent
1 Week or Less	1,055	32.8%
1 to 3 Weeks	785	24.4%
1 to 2 Months	653	20.3%
6 Months or Less	83	2.6%
More than 6 Months	229	7.1%
Not Able to Commit Any Time	410	12.7%

**Table 27 – Estimated Distribution of the Nevada RN Population Willing to Provide Patient Care During a Contagious Epidemic Event by Amount of Time Willing to Commit – 2005**

Amount of Time to Commit During a Contagious Epidemic Event	RN Survey Population	
	Number	Percent
1 Week or Less	918	32.0%
1 to 3 Weeks	715	24.9%
1 to 2 Months	590	20.5%
6 Months or Less	79	2.7%
More than 6 Months	230	8.0%
Not Able to Commit Any Time	341	11.9%

**Table 28 – Estimated Distribution of the Nevada RN Population Willing to Provide Patient Care During Radiologic Event by Amount of Time Willing to Commit – 2005**

Amount of Time to Commit During a Radiologic Incident	RN Survey Population	
	Number	Percent
1 Week or Less	801	32.0%
1 to 3 Weeks	563	22.5%
1 to 2 Months	514	20.5%
6 Months or Less	80	3.2%
More than 6 Months	208	8.3%
Not Able to Commit Any Time	336	13.4%

Finally, respondents to the 2005 Nevada RN Survey were asked to indicate their level of knowledge of how to treat eight biological threats to public health and safety. Responses to the RN population’s knowledge on how to treat casualties of each threat are listed in Table 29. These data indicate wide variation within the RN population in their self-reported ability to treat various biological incidents or diseases.

**Table 29 – Self-Reported Ability of the Nevada RN Population to Treat Casualties of Biological Incidents – 2005**

Type of Biological Incident	Ability to Treat Casualties of Biological Incidents –			
	Agree	Agree Somewhat	Disagree Somewhat	Strongly Disagree
<b>Anthrax</b>	13.6%	35.0%	19.2%	32.2%
<b>Avian Flu</b>	10.1%	27.7%	21.6%	40.5%
<b>Brucellosis</b>	8.8%	23.9%	22.0%	45.4%
<b>E. Coli</b>	32.9%	38.0%	10.6%	18.6%
<b>Plague</b>	12.4%	32.7%	20.0%	34.9%
<b>Salmonella</b>	30.0%	37.9%	11.2%	20.8%
<b>Smallpox</b>	19.0%	35.1%	17.6%	28.0%
<b>Tularemia</b>	7.4%	23.3%	23.1%	46.1%
<b>Viral Hemorrhagic Fever</b>	10.1%	23.7%	22.6%	43.6%



### III. METHODOLOGY AND QUESTIONNAIRE

The Nevada Registered Nursing Survey of 2005 is the culmination of two years of work at the University of Nevada School of Medicine (UNSOM). In response to concerns among policy makers about the lack of objective information on the characteristics of the nursing workforce in Nevada, the Medical Education Council of Nevada (MECON) within UNSOM undertook a statewide survey of licensed registered nurses. The project was financially supported in part by the Nevada State Health Division, the Nevada Hospital Association, Federal Office of Rural Health Policy, Health Resources and Services Administration, The Nevada Rural Hospital Flexibility Program and endorsed by the Nevada Institute for Nursing, The Nevada State Board of Nursing, and Washoe Medical Center.

The primary contributors are John Packham, PhD and Mary Tabor Griswold, MS, of the University of Nevada School of Medicine; Jake Burkey, MS, of Washington State University; and Christopher Lake, PhD, of the Nevada Hospital Association. During the fall of 2004, a four-page questionnaire was developed by Dr. Packham with the input of state and local nursing and survey experts. The questionnaire (which is contained at the end of this chapter) was designed to elicit information on general RN workforce characteristics in the State of Nevada. Study objectives included the collection of data on: education and certification; employment and job characteristics; and social and demographic characteristics of the Nevada RN population. Additionally, information was sought for additional nursing and health care issues in Nevada: opinions about the most recent nursing position; overall nursing career satisfaction; work hours and description of employment; reasons for not providing direct patient care; and the capacity to respond to bioterrorist threats.

**Table 30 – Distribution of the Nevada Licensed RN Population on December 1, 2004 by Region of Residence**

Region of Residence	RNs with an Active License in the State of Nevada on December 1, 2004			Number of RNs Sampled in Survey (n)
	Total Number (N)	Percent of Total	Percent of Total who Reside in Nevada	
Urban South	10,149	49.5%	66.2%	1,325
Urban North	3,788	18.4%	28.1%	558
Rural and Frontier	989	4.8%	5.6%	112
Out of State	5,648	27.5%	—	475
<b>Total</b>	<b>20,494</b>	<b>100.0%</b>	<b>100.0%</b>	<b>2,470</b>

The questionnaire pilot survey was administered to 20 hospital-based RNs at Washoe Medical Center on January 5<sup>th</sup>, 2005. Developing the sample survey size was determined by the skewed population distribution with two major population centers and a large rural sector. The study

utilized a stratified random sample of three regions of the state in proportion to the number of RNs with an active license in each region: (1) Urban South (Clark County), (2) Urban North (Carson City, Douglas and Washoe Counties), and (3) Rural and Frontier Counties (Churchill, Elko, Eureka, Esmeralda, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and White Pine). Table 30 details the distribution of the licensed RN population by region on December 1, 2004.

The sample was drawn from a complete and unduplicated list of RNs with an active license from the Nevada State Board of Nursing on December 1, 2004. As out of state licensed Registered Nurses were a quarter of the data base, a fourth selection was made of these state licensees. The population distribution in Nevada is disproportionately urban. To accommodate the disproportion, the population percentages were estimated for the three regions and the sample size was drawn for each section using these percentages. In the future the rural sample will be increased in size to provide more reliable estimates for this group of the RN population. The sample survey questionnaire was mailed on January 27, 2005. A follow-up postcard was mailed on February 23, 2005 with a final questionnaire mailing on April 13, 2005. The sample survey includes all data collected as of July 11, 2005.

Respondents were given the option of completing and returning the hard copy of the questionnaire or completing the survey on-line. Two thousand questionnaires were distributed to RNs residing in Nevada with the ambition of obtaining a minimum response rate of 1,014. This figure ensured that parameters associated with the subject matter being studied achieve statistical significance, while minimizing the overall cost of survey administration through identifying a lower bound for realization of the primary goal. This figure ensured that the study met the goal for acceptable precision of at least 95%, with a sampling error no greater than 3 percent.

Survey response issues were addressed in constructing this estimate, by using Don Dillman's Tailored Design Method (TDM), we have shown that we have made a legitimate and systematic effort to reduce non-response as much as possible. The survey is multi-modal design, in accordance with the TDM suggested by Dillman. Of the total mailing, 5.5 percent of all questionnaires sent to registered nurses were returned, with 5.0 percent being from instate. Since the June cut off, two surveys were received but not included in the final analysis.

Of the desired 1,014 in-state responses, 858 were received, for an overall Nevada response rate of 84.6 percent of the total target. The lower number of surveys received from Clark County was a primary contributory factor. In order to keep the administrative costs down for the survey, personal contact via telephone calls was not included nor was any form of special mail notification used (certified, priority, or registered). The data presented in this report uses the quadrant formulation previously developed. Estimates were developed through the application of percentages derived from survey response data computed on the basis of the percentage of licensed RNs for any given region. In summary, this report presents statistically significant estimates at both the state and regional level of analysis ( $p < 0.05$ ). Table 31 provides a detailed account of the number and proportion of survey responses.



**Table 31 – Distribution of the Nevada Licensed RN Population on December 1, 2004 and Distribution of Survey Respondents by Region of Residence and Employment**

Region of Residence	RNs with an Active License in the State of Nevada on December 1, 2004					Nevada Workforce Distribution (includes those not working)
	Total Number (N)	Percent of Total RN Population	Percent of RN Population Residing in Nevada	Number of RNs Sampled in Survey (n)	Nevada Workforce Respondents to Survey (n)	
Urban South	10,149	49.5%	66.2%	1,325	510	59.0%
Urban North	4,312	21.0%	28.1%	558	296	34.2%
Rural and Frontier	861	4.2%	5.6%	112	59	6.8%
Out of State	5,172	25.2%	—	475	—	—
<b>Total</b>	<b>20,494</b>	<b>100.0%</b>	<b>100.0%</b>	<b>2,470</b>	<b>865</b>	<b>100.0%</b>

Label: Respondent ID Number and  
On-line Passcode Here

**Medical Education Council of Nevada (MECON)**  
**Survey of Licensed Registered Nurses in the State of Nevada – 2005**

**Please provide responses to the following questions on your nursing education and certification.**

1. In what year did you graduate from your basic nursing education?
2. In which state did you obtain your basic nursing education? *List two letter postal code – foreign graduates enter “FG”:*
3. In which state was your first RN license issued? *List two letter postal code:*
4. In what year was your first RN license issued?
5. What is your highest level of nursing education? *(Check one box only)*  
 Diploma       Associate Degree       Bachelor’s Degree       Master’s Degree       Doctorate
6. What year did you complete your highest level of nursing diploma or degree?
7. What additional certification have you been granted by the Nevada State Board of Nursing? *(Check all that apply)*  
 None       APN       CRNA       EMS-RN
8. Please list the number of states other than Nevada in which you are licensed to practice as a registered nurse.    
*(Enter a “0” if you do not hold RN licensure in any state other than Nevada.)*
9. Which of the following best describes your current employment status? *(Check one)*

<input type="checkbox"/> 35 or more hours per week in nursing	<input type="checkbox"/> Not employed, and seeking employment in nursing
<input type="checkbox"/> Less than 35 hours per week in nursing	<input type="checkbox"/> Not employed, and seeking employment outside of nursing
<input type="checkbox"/> Employed, but not in nursing	<input type="checkbox"/> Temporarily not working and not looking for a job
	<input type="checkbox"/> Retired or with no plans to return to work

**The next set of questions deals with your current employment situation. If you are not working or are retired, please skip to Question 15.**

10. Which of the following best corresponds to the position title for your principal nursing position? *(Check one)*

<input type="checkbox"/> Direct Patient Care	<input type="checkbox"/> Nurse Educator	<input type="checkbox"/> Public Health Nurse
<input type="checkbox"/> Administration/Management	<input type="checkbox"/> Infection Control	<input type="checkbox"/> Self Employed
<input type="checkbox"/> Quality Assurance/Risk Manager	<input type="checkbox"/> School Nurse	<input type="checkbox"/> Nurse Practitioner
<input type="checkbox"/> Researcher/Consultant	<input type="checkbox"/> Case Manager/Utilization Review	
<input type="checkbox"/> Other <i>(Please list):</i> _____		

11. Which of the following best corresponds to the employment setting of your principal nursing position? (Check one)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> 99 = None – not active in nursing    | <input type="checkbox"/> 01 = Hospital              | <input type="checkbox"/> 02 = Risk management    |
| <input type="checkbox"/> 03 = Ambulatory care setting         | <input type="checkbox"/> 04 = Home health care      | <input type="checkbox"/> 05 = Nursing home       |
| <input type="checkbox"/> 06 = Public/community health setting | <input type="checkbox"/> 07 = School health service | <input type="checkbox"/> 08 = Utilization review |
| <input type="checkbox"/> 09 = Nursing education program       | <input type="checkbox"/> 10 = Traveling/temp agency |  |
| <input type="checkbox"/> 11 = Other (Please list): _____      |   |  |

12. If you are employed in a hospital, which of the following best describes your primary unit or work setting? (Check one) If you are not employed in a hospital, please skip to question 13.

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> 01 = Inpatient unit             | <input type="checkbox"/> 02 = Outpatient unit                        | <input type="checkbox"/> 03 = Both inpatient and outpatient units |
| <input type="checkbox"/> 04 = Administration             | <input type="checkbox"/> 05 = Procedural area (e.g., lab, radiology) |   |
| <input type="checkbox"/> 06 = Other (Please list): _____ |  |   |

13. Please complete the following information for the principal job in which you are currently employed –

a. What is the city, state and zip code of your principal job? City: \_\_\_\_\_

State:   Zip Code:

b. In a typical work week, what is the number of regularly scheduled hours per week you work on your principal job?

List number of hours:

c. In a typical work week, what is the number of overtime hours per week you work on your principal job?

List number of hours:

d. Do you provide any direct patient care on your principal job?

Yes  No

e. Of the following choices, please check the one which best describes your principal job.

Full-time – salaried  Full-time – hourly  Part-time  Per Diem

Other (Please describe): \_\_\_\_\_

14. If you are employed in a second position or job, please complete the following information for this second job –

a. What is the city, state and zip code of your second job? City: \_\_\_\_\_

State:   Zip Code:

b. In a typical work week, what is the number of regularly scheduled hours per week you work on your second job?

List number of hours:

c. In a typical work week, what is the number of overtime hours per week you work on your second job?

List number of hours:

d. Do you provide any direct patient care on your second job?

Yes  No

e. Of the following choices, please check the one which best describes your second job.

Full-time – salaried  Full-time – hourly  Part-time  Per Diem

Other (Please describe): \_\_\_\_\_

**Please answer the next two questions if you do not provide direct patient care in your principal job. If you provide direct patient care in your principal job, please skip to Question 17.**

15. How long has it been since you last worked for pay as a registered nurse providing direct patient care?

- Less than a year       1-2 Years       3-5 Years       More than five years  
 I have never worked as an RN providing direct patient care.

16. What is the reason(s) you are not working in a nursing position providing direct patient care? (Check all that apply)

- Difficult to find a nursing position       Taking care of home and family  
 Better salary in other position or profession       Concern about safety in health care environment  
 Inability to practice nursing on a professional level       Hours more convenient in other position  
 Find current job more rewarding professionally       My nursing skills are out-of-date  
 Disability or illness       Other (Please specify): \_\_\_\_\_

**Since one of the main goals of this survey is to improve our understanding of job and career satisfaction among licensed RNs, it would be helpful if you would answer the following questions.**

17. How satisfied are you with nursing as a career?

- Very Dissatisfied       Dissatisfied       Somewhat satisfied       Very Satisfied

18. How satisfied are you with your current principal job?

- Very Dissatisfied       Dissatisfied       Somewhat satisfied       Very Satisfied

19. How much longer do you plan to remain in nursing?

- 0 to 5 years       6 to 10 years       11 to 15 years       16+ years

**One of the purposes of this survey is to learn more about the capacity of the state's nursing workforce to respond to a bioterrorist attack or mass casualty event. Please complete the following four sets of questions.**

20. Would you be willing and able to provide patient care during the following mass casualty events? (Check all that apply)

- Natural disaster       Biological incident       I would not be able to provide patient care during  
 Explosive incident       Contagious epidemic      a mass casualty event  
 Chemical incident       Radiological incident

21. Based on your current work and family schedules, how much time would you be able to commit to providing patient care in another community or state during a disaster or mass casualty event?

- 1 week       6 months  
 1-3 weeks       More than 6 months  
 1-2 months       I would not be able to provide any time during a disaster

22. Which of the following would negatively influence your ability or desire to provide patient care in another community or state during a disaster or mass casualty event? (Check all that apply)

- Child care issues       Injury or death to rescue workers  
 Financial issues       Family members who are affected by the incident

- Personal safety concerns                       Rate of spread of contagious agent  
 Nothing would stop me                       Commuting distances or issues  
 Other (Please list or describe): \_\_\_\_\_

23. I know how to treat casualties of a biological incident involving –

	Agree	Agree Somewhat	Disagree Somewhat	Disagree
a. Anthrax	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Avian flu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Brucellosis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. E. coli	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Plague	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Salmonella	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Smallpox	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Tularemia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Viral hemorrhagic fever (VHF)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Finally, a major goal of employers of nursing and nursing educators is to increase diversity within the nursing profession and understand the demographic characteristics of the nursing workforce. It would be helpful if you could provide answers to the remaining questions**

24. What is your current state of residence and zip code residence? State:   Zip Code:

25. What is your year of birth?

26. What is your gender?  Male  Female

27. Are you of Hispanic or Latino heritage?  Yes  No

28. Do you speak Spanish as a second language?  Yes  No

29. What is your racial background? (Check one)

- White                       Black                       American Indian/Alaska Native  
 Asian                       Native Hawaiian/Pacific Islander                       Other: \_\_\_\_\_

**Thank you for taking the time out of your busy schedule to complete this survey. If you have any questions about this survey and/or would like to receive a copy of the final report after the first of the year, please do not hesitate to contact the project coordinator, Dr. John Packham, at (775)784-1235 or [jfp@unr.edu](mailto:jfp@unr.edu).**