The remarks on persuading nurses not to resign by analysing the job choice situation for resigned nurses

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Aim

We re-analysed two surveys conducted by the JNA; under which conditions did resigned nurses choose their next job and what were their reasons for not working again. We would like to provide hospital managers and hospital policy planners with resigned nurses' job choice situation and remarks on persuading nurses not to resign.

Method

One survey was conducted in November, 1992 by mailing questionnaires to 4,500 respondents chosen from 17,992 nurses listed on the research paper about their resignation issued by the nursing center in each prefecture in 1991 and 1992. We categorised them as married, married with dependents, and unmarried; and classified them according to the capacity where they worked, etc. then re-analysed the results.

Another survey was conducted by the nursing information center in 1991 concerning nurses' intentions of working in hospital again. We summed up representative free descriptions.

Results

For the reasons why they resigned, 62.4%, the highest percentage, cited they were not satisfied with their job. However, a higher percentage of nurses who had children under
school age said they quit because of child birth and child care. The findings indicated difficulties in continuing nursing when they had children.

As to the nurses' re-employment situation, the re-employment ratio of unmarried nurses as full-time workers was higher than those of married nurses with dependents.

As to a route for re-employment, 28.1%, the highest percentage, answered through friends and acquaintances. The next highest, among the married with dependents, 21.0%, said by an offer from a working place. Among the unmarried, 23.8% said through a situation want ad.

Regarding the first concern in selecting jobs, among the married with dependents, 25.1% did not want to work night shifts. Among the unmarried, 18.8% said the pay level.

In free description nurses described their working conditions, their low status in society and nursing systems as follows: It was difficult to continue working as a nurse because of the inadequate nursery school system for children; it was not easy to have a day off; low payment regardless of hard working; rigid and inflexible administration by nursing personnel, etc.

Tasks in the future

There are two patterns that are typical of nurses' resignations. The first one is caused by nurses' marriages and having children; nurses feel it is difficult to continue both their career and family life. The second pattern is job hopping by unmarried nurses wanting better payment. To encourage nurses not to resign, flexible administration such as a part-time or flexi-time system should be adopted and plenty of public nursery schools should be established.
Ways to encourage hospital nurses to stay in the profession

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The JNA periodically conducts a basic survey on hospital nursing by questioning nursing directors of the hospitals where at least one JNA member works throughout the country. The aim of the survey is to get basic data on the hospital nursing situation and nursing administration. This survey is conducted every four years; the first one was conducted in 1987 and the second one in 1991.

We re-added and re-analysed the 1987 and 1991 surveys. We made clear which measures were effective in which institutions by studying the responses from nursing directors in each hospital to the measures encouraging nurses to stay on and promoting new employment. We also made clear the difference in pay level and structure during four years from 1987 to 1991 by focusing on pay level improvement as a means to persuade nurses from resigning and to promote new employment.

1. Effective measures to encourage nurses to stay on

The survey required the respondents to select multiple answers which were effective to encourage nurses to stay on. Pay level improvement was the response which obtained the highest percentage among the hospitals.

When considering the responses according to the hospital organizational bodies, national, prefectural governmental, public, social insurance-organized and other organized hospitals regarded improved education and training as the most effective means. The hospitals set by medical juridical corporations and private organizations cited the most effective measure
was pay level improvement.

The hospitals adopting the two-day off working system and hospitals with in-house nurseries answered their system and facility were effective for encouraging nurses to stay on.

2. Effective measures to promote new employment

The survey required the respondents to select multiple answers which were effective in promoting new employment. Improved education and training was the response which obtained the highest percentage among the hospitals and scholarship loans were the second highest response.

When considering the responses according to the hospital organizational bodies, national and prefectural governmental hospitals evaluated their improved education and training provision of hospital practice for nursing students and chiefly emphasized their educational merits. The hospitals set up by medical juridical corporations and private organizations evaluated their scholarship loans and chiefly emphasized their economical merits. Public, social insurance-organized and other organized hospitals highly evaluated improved education and training, provision of hospital practice for nursing students and scholarship loans as a whole.

3. Pay level improvement and change in payment structure during 1987 to 1991

When considering pay level according to the hospital organizational bodies, private university hospitals and other organizational hospitals such as company hospitals maintained the highest pay level. Pay level difference among hospital organizational bodies decreased during the four years both in starting pay and in the pay model for nurses worked for a continuous 10-year period.

During the four years, the starting pay raise ratio went up remarkably high because of the serious shortage of nurses. The total amount of starting pay rose 17.0% and that of the pay model for nurses worked for a continuous 10-year period rose 10.9%. The rise in total amount of payment was estimated about 4% at starting pay and the latter half of 2% for the pay model for nurses worked for a continuous 10-year period in each year. The raise ratio of starting pay was higher than that for the pay model for nurses worked for a continuous 10-year period. This indicates hospital managers improved pay level by emphasising newly graduated nurses' employment.

The wage difference between ages (setting the 100 as a wage index for starting pay and changing in accordance with worker's age and service years) decreased due to the intensive
improvement of starting pay during the period. The starting pay for newly graduated nurses rose, whereas the wage for experienced nurses rose slowly. For experienced nurses the economical merit of continuing working was insignificant.

However, in the JNA 1992 survey, we found a tendency that each hospital gradually made a shift in pay level improvement by emphasising experienced nurses.