

1995 Survey of Hospital Nursing

Outline of the Survey

The Survey of Hospitals Nursing has been conducted every four years since 1987 to collect basic data on actual conditions and management of nursing at hospitals in Japan. The third survey was conducted in October, 1995, targeting nursing managers at 5,736 hospitals where at least one member of the Japanese Nursing Association was working as of July, 1995. Responses were received from nursing managers at 3,026 hospitals (52.8%).

Notes :

1. The terms "public health nurses," "nurses" and "assistant nurses" include male public health nurses, male nurses and male assistant nurses, respectively. "Nursing staffers" are persons qualified as a public health nurse, midwife, nurse or assistant nurse. "Nursing works" include "nursing assistants" or "care staffers" without any of these qualifications, as well as nursing staffers.
2. Hospitals are classified into the following categories, which are used for analysis here. "Special hospitals" are certified by the Health and Welfare Minister as hospitals with the ability to provide sophisticated medical services and to develop advanced medical technologies. They mainly consist of hospitals attached to the medical departments of universities and hospitals of national advanced medical centers. "General hospitals" exclude special hospitals. "Ordinary hospitals" are hospitals where more than 70% of beds are for ordinary patients and exclude special hospitals and general hospitals. "Hospitals mainly for psychiatric disorders" are hospitals where over 70% of beds are for psychiatric patients. "Hospitals mainly for geriatric disorders" are hospitals where over 70%

of beds are for geriatric patients. "Other hospitals" are hospitals which fall under none of the above categories.

Summary of Survey Findings

I. Overview of hospitals

Regarding the founding organization, 8.7% of the facilities surveyed were established by the national government, 21.6% by local governments, 6.7% by public organizations such as the Japanese Red Cross Society and Saiseikai, 3.5% by social insurance organizations, 38.8% by medical corporations, 8.2% by private and 12.7% by schools or other corporations.

Regarding number of beds, 5.1% of the facilities had 20 to 49 beds, 16.7% had 50 to 99 beds, 30.3% had 100 to 199 beds, 17.1% had 200 to 299 beds, 19.4% had 300 to 499 beds, 9.4% had 500 to 899 beds and 2.0% had 900 beds or more. Hospitals with less than 200 beds accounted for over 50%.

Regarding facility classification, 2.2% were special hospitals, 27.7% were general hospitals, 44.2% were ordinary hospitals, 6.9% were hospitals, mainly for psychiatric disorders, 5.9% were hospitals mainly for geriatric disorders and 13.0% were other hospitals.

II. Placement of nursing workers

A total of 428,258 nursing personnel were working for 2,878 hospitals which responded to questions about numbers of nursing workers. Of these personal, 75.0% were stationed at wards, 12.9% at outpatient departments and 12.1% at other departments including operating rooms, intensive care units, visiting nursing units and nursing departments.

Among nursing personnel at words, 64.6% were nurses including public health nurses and midwives, 18.6% were assistant nurses, and 16.8% were nursing assistants.

The composition of nursing works at wards varied according to the category of hospital. The proportions of nurses, assistant nurses and nursing assistants at general hospitals were 77.8%, 11.8% and 10.4% respectively. At special hospitals, the proportions were 87.3%, 3.5% and 9.2%. At hospitals mainly for psychiatric disorders, they were 43.6%, 35.3% and 21.2%. At hospitals

mainly for geriatric disorders, they were 18.9%, 29.1% and 52.0%. Proportions of nurses were higher at special hospitals and general hospitals. At hospitals mainly for geriatric disorders, nursing assistants accounted for more than 50% of nursing personnel.

The average number of inpatients per nursing staffer at general wards was 2.05.

The average number of inpatients per nursing worker was 1.78.

In outpatient departments, nurses accounted for 53.7% of all nursing workers, assistant nurses for 34.1%, and nursing assistants for 12.2%. The average number of outpatients a day per nursing staffer was 25.6 persons. At special hospitals, however, this figure was 32.8, higher than those of other categories.

Male nursing workers (nurses, assistant nurses and nursing assistants) were working at 56.3% of hospitals. This figure increased from 49.7% in the previous survey. 48.9% of male nurses were placed in psychiatric wards, 24.8% in other wards, and 12.6% in operating rooms. Compared with the previous survey, the figure for psychiatric wards declined while the figures for other locations rose.

III. Night shifts

A three-shift system was common at general wards in the past. Recently, however, there have been increasing numbers of cases in which night shifts are different as variations of the three-shift system or two-shift systems have been adopted. Concerning night shifts at wards, respondents were asked to choose as many responses as appropriate. 69.5% of hospitals were using a three-shift system for general wards, 7.9% were using a variation of the three-shift system and 25.1% were using a two-shift system. In the previous survey these figures were 73.7%, 8.6% and 10.6%, respectively. The number of hospitals using a two-shift system increased significantly.

Respondents were asked how many nursing workers were on night duty at wards (nursing units) on the day the survey was conducted. According to the responses, two nursing workers were on duty at 56.6% of nursing units with a three-shift system and at 51.0% of those with a two-shift system. The proportion of nursing units where three or more nursing workers were on night duty increased from the previous survey, rising from 38.4% to 42.2% for nursing units with a three-shift system and from 24.9% to 45.1% at those with a two-shift system.

Nursing staffers at general wards with a three-shift system worked the night shift an average of 8.0 times in September, 1995. This indicates that the night shift burden on nursing

staffers fell slightly from the average 8.7 times per month found four years earlier, though the previous survey revealed no declining trend.

IV. Treatment of nursing staffers

(1) *Wages and allowances*

Respondents were asked how much the hospital paid monthly for predetermined models. The average amounts paid, including allowances, are as follows: the starting salary for a nurse (graduate of a high school or a three-year nursing school) was ¥251,231; the model salary for a 31- to 32-year-old nurse with 10 years of service and who is not a manager was ¥318,952; the model salary for a 32-year-old nurse who stopped working with seven years of service as a nurse at a general hospital and was re-employed less than three-years later was ¥288,539; the model salary for a 31- to 32-Year-old assistant nurse with ten years of service and who is not a manager was ¥272,856; and the model starting salary for a nursing assistant in his or her late forties without experience is ¥171,764.

Average hourly wages for part-time nurses were ¥1,311 for daytime hours and ¥1,668 for nighttime hours.

(2) *Working hours*

Prescribed working hours per week were shorter than found by the previous survey. The proportion of hospitals where prescribed working hours were 39 hours and 59 minutes or less increased from 20.6% to 34.9%. The proportion of nursing staffers to whom these hours applied also increased, from 23.1% to 39.3%. The number of hospitals where prescribed working hour per week were 40 hours rose from 6.8% to 44.8%, and the number of nursing staffers to whom these hours applied rose from 8.4% to 50.8%. The average prescribed working hours per week for staffers were 39 hours and 32 minutes, one hour and 30 minutes less than the 41 hours and 12 minutes found by the previous survey.

In addition, the five-day week was more common. The proportion of hospitals with a five-day week was 51.1%, compared to 6.2% as found by the previous survey. Working hours, among other working conditions, can be said to have been improved most significantly.

Average overtime hours in September, 1995 were 6.0 hours in wards, 14.1 hours in operating rooms and 5.3 hours outpatient departments.

The average number of paid holidays taken in 1994 by nursing staffers was 10.9 days.

(3) *Support for motherfood and child care, and family care leave*

4.2% of female nursing staffers gave birth and took maternity leave in 1994. 70.5% of those who gave birth took child care leave, for 7.4 month on average. The percentage of those who took child care leave was higher than the 58.5% found by the previous survey, and the length of leave was longer than the 6.5 months found by the previous survey.

This is probably because the Child Care Leave Law went into effect in April, 1992, after the previous survey was conducted.

41.1% of hospitals had in-house nursery facilities available to their nursing staffers, and 26.3% of these facilities provided 24-hour care.

37.9% of hospitals allowed leave for family nursing and care.

V. Recruitment of nursing staff

The average age of nursing staffers was 34.1 years. The average ages of nurses and assistant nurses were 32.5 and 37.7 years, respectively. The average length of service of nursing staffers was 8.5 years, compared to 8.3 years found by the previous survey. The separation rate in 1994 was 9.9%, down from 11.3% in 1990. At private hospitals, where it had been difficult to recruit and maintain sufficient staff, this figure was by 1% to 2% lower than found by the previous survey.

According to a 1995 Labor Ministry report, "Actual Conditions of Female Workers," the average length of service for female was 7.6 years in 1994, and 16.2% of female workers, excluding part-times, left their jobs in that year.

With regard to the recruitment of nurses over the next three years, 64.7% of hospitals planned to increase the number of nurses, 27.6% planned to maintain the current level, and 0.8% planned to reduce the number of nurses. Regarding assistant nurses, 13.2% of hospitals planned to increase the number, 42.2% planned to maintain the current leave, and 23.9% planned to reduce the number. Regarding nursing assistants, 28.0% of the hospitals planned to increase the number, 47.6% planned to maintain the current level, and 5.4% planned to reduce numbers of positions to be added for public health nurses, midwives, nurses assistant nurses and nursing assistants were 988, 1,779, 18,975, 1,979 and 4,368, respectively. The number of assistant nurse positions to be eliminated, however, was 3,337, which exceeded the number of such positions to be added.

14.8% of hospitals had nursing staffers who graduated from a nursing-related department of a university. The number of such nursing staffers was 1,953, or 1.8% of all nursing staffers at

those hospitals with college graduates. 67.4% of hospitals indicated that they wanted to hire university graduates. Among hospitals which employ college graduates, 93.7% want to hire more graduates.

VI. Education for nursing staff

83.5% of hospitals offered for new nurses, 67.7% provided training in treating patients, 66.3% held lectures on new information and knowledge about medical treatment and nursing, 66.5% provided training for nursing assistants (care staffers), 53.8% offered education for leaders, and 53.0% provided training for chief and head nurses. Compared to the findings of the previous survey, the proportion of hospitals providing training in treating patients rose by about 11%.

The 1995 budget for education and research for nursing departments was ¥1,598,000 per hospital and ¥10,598 per staff member. The 1995 budget for books was ¥269,000 per hospital and ¥1,859 per staff member.

VII. Activities of nursing assistants

Concerning direct care for patients by nursing assistants, 7.2% of nursing managers replied that nursing assistants should not provide direct care for patients, 59.9% replied that nursing assistants may take part in providing care under the direction of a nurse, and 29.1% replied that nursing assistants can care for patients independently in accord with a nurse's judgment according to the condition of the patient. Compared to the findings of the previous survey (12.0% 63.6% and 21.2%, respectively), more nursing managers were taking a positive attitude toward direct patient care by nursing assistants under the direction and judgment of a nurse.

As to problems with nursing assistants' activities, 39.1% of nursing managers answered that it is difficult to train them and 35.2% replied that their ability and physical strength are questionable. These figures rose from 27.4% and 23.0% found by the previous survey, respectively. This means that nursing managers were more aware of the importance of education for nursing assistants with different backgrounds.

VIII. Cooperation with other workers and departments

It has become necessary to peripheral activities of nursing staffers, including those related

to medications and moving patients, from nurses to nursing assistants or to other workers or members of other departments such as dietitians, pharmacists and clinical engineers, or to share them among nurses and the latter workers or departments, so nurses can be committed to providing more direct services for patients. In fact, such a shift of peripheral activities has made little progress.

On the other hand, there are growing numbers of opportunities for other specialists (dietitians and pharmacists) to visit wards to provide professional services for individual patients. 12.7% of hospitals placed "ward pharmacists" exclusively in charge of a ward. This figure increased from 6.2% in the previous survey.

IX. Nursing management system and problems with nursing management

Nursing departments were under the direct control of hospital presidents at 88.0% of hospitals surveyed. The heads of nursing departments attended hospital management meetings at 89.6% of hospitals. The heads of nursing departments were directors at 7.1% of hospitals and vice presidents at 6.1% of hospitals.

Regarding requirements for promotion to nursing supervisor, 78.5% (as compared to 73.4% found in the previous survey) of hospitals cited recommendation of the head of the nursing department, 57.8% (48.8%) cited recommendation of the hospital president, 41.4% (49.5%) cited personal performance, 33.2% (30.2%) cited support of the nursing supervisor of the wards served by the candidate, 32.2% (28.0%) cited support of the nursing supervisors of more than two relevant wards, 32.3% (32.0%) cited clinical experience for a certain number of years, and 30.2% (23.0%) cited participation in training for managers (nursing supervisors). Compared with the findings of the previous survey, more respondents cited "recommendation of the hospital president" and "participation in training for managers." The percentage of hospitals which cited "personal performance" declined.

Heads of nursing departments were women at 96.7% of hospitals and men at 1.7%. The average age of heads of nursing department was 54.1 years, compared to 53.5 years found in the previous survey. Average length of service as head of the nursing departments was 6.4 years (down from 6.6 years found in the previous survey). The average length of service as head of the nursing department at the current hospital was 4.6 years (as compared to 4.9 years found in the previous survey).

Hospitals were asked whether they were engaged in given areas of medical care. 43.5% were

engaged in providing guidance on medical treatment for patients with chronic disorders, 41.4% in medical care at home, 41.4% in rehabilitation, 36.4% in emergency care, 22.0% in highly specialized care, 21.9% in terminal care, 14.1% in care for the elderly, and 5.6% in medical treatment for AIDS. Hospitals were also asked whether other facilities and organization to provide public health and medical care services were attached to the hospital. According to their responses, 8.9% of hospitals had home-care support centers and 9.5% were considering establishing such centers. 11.7% of hospitals had a station for visiting nurses and 14.9% were considering establishing such station. 10.8% of hospitals had geriatric facilities and 10.1% were considering establishing such facilities.