

2004–08 Explanation of Substantive Changes to Survey Instrument

This appendix provides an explanation of the salient changes to the questionnaire. These changes are meant to reduce both time and cognitive burden on respondents.

Overall

1. *Nursing employment settings.* This list of employment settings is included in the question (Questions 22 and 53)¹ rather than at the end of the survey so the respondent doesn't have to flip back and forth while completing the survey. Also, the respondent only has to check a box and does not have to write in a code. Both changes are expected to reduce respondent burden and improve data quality.

2. *Positioning of instructions.* Respondents by and large do not pay attention to instructions when they are placed after the question stem. Hence, when a question has instructions, they now precede questions.

3. *Check boxes:* Where possible and appropriate, write-ins have been eliminated and replaced by check boxes. This change is expected to reduce respondent burden and improve data quality.

Section A: Eligibility and Education

Question 11a-c, on emergency preparedness:

The emergency preparedness question wording has been improved to determine (1) if training was received or provided; (2) the extent of understanding of the disaster/emergency plan; and (3) the level of preparedness.

Question 12, additional academic degrees earned after graduating from initial registered nurse education program:

Since distance learning is becoming more popular, HRSA included distance learning as a response category and expanded the listing for type of degrees

¹ Note all question numbers refer to the 2008 questionnaire.

Question 13, completion of formal education program preparing the respondent as a nurse practitioner, clinical nurse specialist, nurse midwife, or nurse anesthetist:

To improve the analytic usage of the information, added two sub-questions, Question 12e-2 and Question 12f-2, to understand if certification is required by the employer.

Question 16a, percent of course work that was distance based:

Like Question 12, Question 16 also collects information on percentage of coursework that is distance based.

Section B: Principal Nursing Employment

This entire section is improved compared to the 2004 version. HRSA has updated and refined the response categories by evaluating the 2004 responses and the “Other (Specify)” write-in, and sought input from nursing experts and ICONS.

Question 22, Employment setting of the principal nursing position on March 10, 2008:

As stated earlier, the employment settings are now a part of the question and the respondents have only to check a box; they do not have to flip to the last page to pick a code that best describes their employment settings and then write that code in the box provided.

Further the list of settings are better defined and more comprehensive. An example of this is the ambulatory setting operated by a hospital, vs. an ambulatory service located in a hospital campus but operated by a private physician/medical practice.

Question 25 (a, b and c), level of care and type of work, age of patient population, and clinical specialty:

This three-part question again reflects input from ICONS and nursing experts. This updated and refined question now accurately collects information on type of work, patient population and clinical specialty where the RN spends at least half of his or her time.

Question 31, plans for leaving the nursing position:

ICONS and nursing experts were keen on collecting data on the RN's career plans and whether he or she will remain in the nursing workforce. Question 31 reflects this emerging data need.

This data element is important when evaluating supply projections of RNs remaining in the workforce. No other national survey of RNs collects this data.

Section C: Secondary Employment in Nursing

No substantive changes.

Section D: Nurses Not Working in Nursing

Question 37, intentions regarding work in registered nursing:

Similar to Question 31, this new question reflects the need to understand if the RN will return to the workforce.

Section E: Employment Outside Nursing

Questions from 2004 that pertain to employment outside nursing were moved into this new section.

Questions 42a and b, principal position outside nursing:

Another survey improvement is that Question 42 is now a listing of suggested positions (obtained from the 2004 survey write-ins) and not a write-in. The question is now asked in two parts; where Question 42a asks about the field in which they are working outside nursing and Question 42b asks about the job title.

The 2004 survey had a section titled “Plans for Employment in Nursing.” This section has been deleted. The questions on career plans (Questions 31 and 37) are more targeted.

Section F: Prior Nursing Employment

Question 53, Employment setting of the principal nursing position on March 10, 2007:

Similar to Question 22, the employment settings are now a part of the question and the respondent has to only check a box; they do not have to flip to the last page to pick a code that best describes their setting and then write that code in the box provided.

As mentioned earlier, the list of settings are better defined and more comprehensive. An example of this is the contrast between ambulatory setting operated by a hospital compared to an ambulatory service located in a hospital campus but operated by a private physician/medical practice.

Section G: General Information

No substantive changes.

Section H: License and Certification Detail

Question 65, other names in which the respondent held a nursing license:

This revised question eliminates the need of responding nurses to fill in information about their license numbers, State associated with each license, and name associated with the respective licenses. This question now collects essential information that will be used to verify instances of multiple licensures.

Question 66, Certifications:

In 2004, nurse practitioners, clinical nurse specialists, nurse midwives and nurse anesthetists were asked to identify their certifications from a list of certifications while all other nurse respondents were asked to write in a list of their certifications (up to three certifications.)

In the current questionnaire, a full list of certifications has been moved to the end of the survey and applies to all RNs. The list has been organized greatly by certifying organizations. The list of certifications is comprehensive and will therefore reduce write-ins for “Other (Specify).”

Section I: Contact Information/Comments

No substantive changes.