

# 2020 Nurse Values Survey Report

*Pennsylvania Nurses on What Matters to Them and Their Patients*

September 2020



# Introduction

**Healthcare in Pennsylvania was in a crisis long before the arrival of COVID-19.** Short-staffing, “just-in-time” supply chains, and a focus on efficient billing as opposed to patient care left our facilities with little resilience. For years, nurses have warned about the impacts of more decision-making happening in corporate boardrooms with less input from frontline caregivers.

As we saw, in many parts of the state and in many facilities, underprepared and overwhelmed. Nurses did not have adequate Personal Protective Equipment (PPE). No one had access to testing, and the support systems needed to allow caregivers to keep their families safe while they tended to patients were nowhere to be found.

**How did our elected officials respond?** At the federal level, safety protocols, OSHA protections, and other liability measures were relaxed. Congress passed legislation to offer paid family leave, but at the behest hospital providers, excluded nurses and other healthcare workers. In our state legislature, representatives spent weeks debating whether or not to comply with stay at home orders and actively ignored the *hundreds of nurses throughout the state engaging in advocacy* for public health and nurse safety.

**It’s time for nurses to have a seat at the table.** It is critical that nurses have input in health legislation and public policy. As the frontline professionals trained to advocate for the needs of their patients, nurses not only have deep expertise in what keeps patients safe, but are trusted as authorities on public health. For 18 years in a row, Gallup polling has found the American public views nurses as the most honest and ethical profession.<sup>1</sup> A recent Harris poll found that 87% of the public agree “nurses have been indispensable during the coronavirus pandemic”, and 79% would “like nurses to play a great role in healthcare in the future.”<sup>2</sup> However, we have seen that a majority of the Pennsylvania legislature has not listened to working bedside nurses on the issues nurses agree on and advocate for.

The grassroots Nurses of PA organization and Nurse Alliance of SEIU jointly conducted this survey to gain a more complete understanding of what issues and values are critical to nurses across Pennsylvania, and how nurses want legislators to relate to those issues.

## Our conclusions are simple:

- Nurses believe that healthcare is becoming more profit-driven than patient driven.
- Nurses believe they are becoming less able to impact decisions about the care they can provide for their patients, and at the same time, they emphatically assert they should be able to advocate for their patients beyond the bedside.
- Legislators should consult nurses when making decisions about healthcare and patients, and nurses agree on a wide range of issues they believe to be critical for legislators to act on.
- Across Pennsylvania, nurses say their workplaces and elected leaders did not respond well to address the pandemic.
- Nurses are committed to educating the public on important health matters, including which legislators act on nurses’ patient advocacy.

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1 <https://news.gallup.com/poll/274673/nurses-continue-rate-highest-honesty-ethics.aspx>

2 [https://3aaa9248-e569-4da8-ada5-c4c9b14e503e.filesusr.com/ugd/d52815\\_ea23c1bba67c46eebe9692cf2b69a54b.pdf](https://3aaa9248-e569-4da8-ada5-c4c9b14e503e.filesusr.com/ugd/d52815_ea23c1bba67c46eebe9692cf2b69a54b.pdf)

# Summary

This report compiles more than 4,300 nurses responses to Nurses of Pennsylvania and Nurse Alliance of SEIU PA's 2020 Nurse Voter Values Survey, conducted from February through April of this year.

Every legislative district in Pennsylvania is represented, and respondents include nurses from hospital, long term care, school, and other settings, as well as retired nurses and those no longer practicing as a nurse.

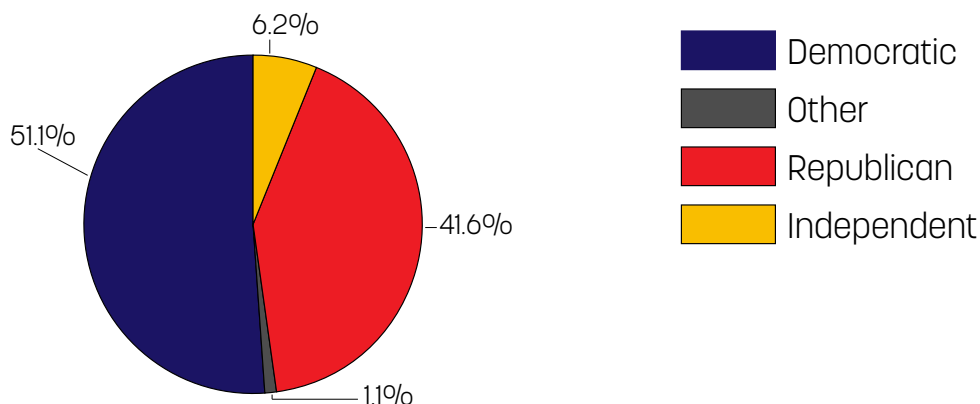
## Quick Overview:

- **95%** of respondents believe **healthcare is becoming more profit driven** than patient driven.
- **85%** of **nurses feel less able to affect decisions** that impact the care they provide
- Asked to rate the importance of legislators taking action on the following issues on a scale of 1 to 5 with 5 being the most important:
  - **93%** gave a "5" to legislators taking action on **safe patient limits**
  - **93%** also gave a "5" to legislators taking action to address **workplace safety**
  - **92%** gave a "5" to legislators taking action to ensure **"a respected voice for bedside nurses at work and in the legislature in the decisions that affect our profession and ability to deliver safe care"**
  - **86%** gave a "5" to legislators taking action to ensure **affordable access to quality care for patients and residents**
- **Twice as many** working nurses said the response of workplace and legislative leaders to the pandemic was worse than adequate as said that response was better than adequate.

## About the Participants

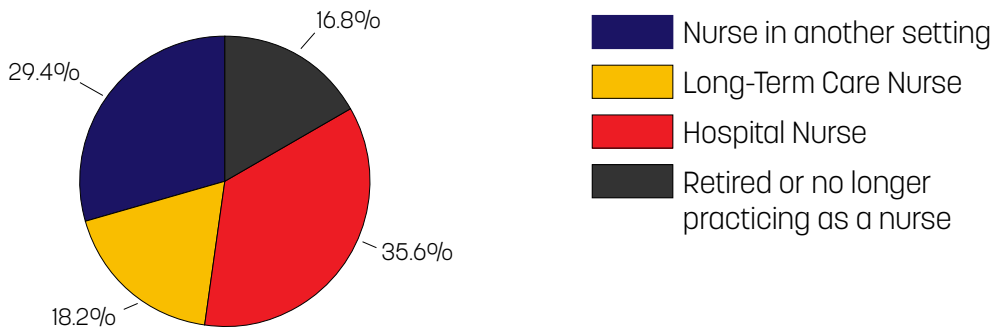
The 4,337 survey participants are widely dispersed geographically. Every Senate District in Pennsylvania had at least 20 participants, and there are participants from every one of Pennsylvania's 203 House Districts.

Nurse participants were evenly distributed by political party. The views represented here are the views of nurses from different political parties, or none at all, and the results of the survey are not about political parties, but rather the values of patient advocates.



**Party Identification**

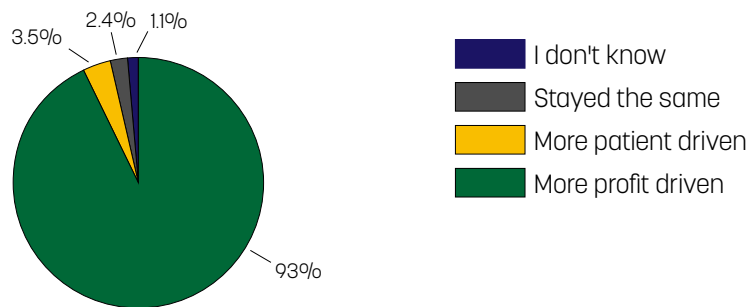
The survey results also represent the perspectives of a broad cross-section of nurses across Pennsylvania across every care setting, including significant participation from nurses who are retired or no longer practicing as a nurse.



**Current Experience in Nursing**

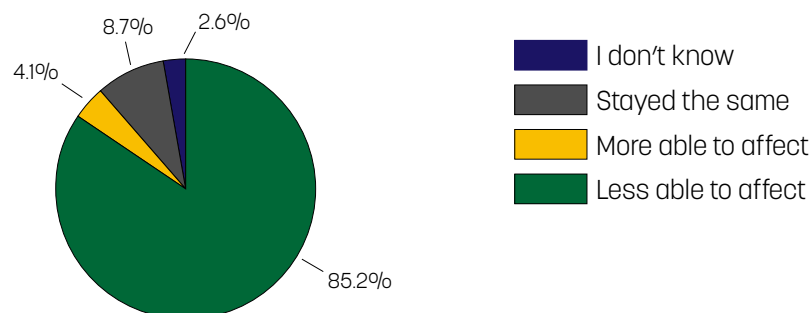
## State of Healthcare

When asked about the current state of healthcare, nurses' answers are clear. **95%** of nurses say that **healthcare is becoming more profit driven**, while only **3.6%** say healthcare is becoming more patient driven.



**Do you feel that healthcare is becoming more patient driven or more profit driven?**

When asked if nurses feel they are becoming more or less able to affect the decisions that impact the care nurses provide, **85%** feel **less able to affect the decisions that impact the care they can provide**.



**As a patient advocate do you feel that you are becoming more or less able to affect decisions that impact the care you can provide such as staffing and working conditions?**

When asked, **“Should nurses be able to advocate for improvements in care and practice beyond the bedside? Why?”**, 99.8% of 3,486 respondents answered positively. Only seven replied that nurses should not be able to advocate beyond the bedside. At least one of those seven may simply have given up on nurses having a say. She glossed her negative response with the comment “Stop dreaming”. Many nurses who answered the question affirmatively also shared frustration over the outsized voice of “suits behind the desk” in setting the direction of nursing and care.

*“Yes, but our voices go unheard by administration who have no idea of what our profession entails, we care for [patients’] every need!”*

*“YES! We are on the front lines and experience the daily struggles and joy our profession brings. We know what is needed and what will make a difference toward patient care. As healthcare is moving more toward a profit centered approach and not patient centered, I feel this is directly related to the people who are making these overall decisions. The people who should be making decisions related to patient care and their practice should be the nurses who are providing in the role and not just another ‘suit behind the desk’.”*

*“Yes we went into this profession to make a difference and improve on care to patients. We are used like a machine. Employers want more for less at the expense of time to do our jobs properly and if a mistake is made its our license and the detriment of the patient. We all want to give 100%. But it seems we are expected to give 500% with time and staffing to only give 80%. We need proper staffing to give optimum service.”*

*“The real question is who could possibly be better situated to advocate than the RNs at the bedside. We see everything and hear everything that is happening both in our own facilities and generally in healthcare. The ‘for profit’ template that is so apparent negates the voices providing direct care and responds to administrative decisions for cost cutting and punitive responses to falls, CLABSIs etc. However they refuse to hear the voices of the nurses and doctors who have inherent skills at critical thinking, and prioritizing along with advanced degrees and experience. I hear most nurses afraid of speaking up for fear they will lose their jobs. Mostly, the ones who speak up finally give up after concerns repeatedly falling on deaf ears.”*

When asked, **“Should decision makers in Harrisburg listen to nurses and take action to improve care? Why?”**, the responses were a near unanimous and emphatic “yes”. Nurses believe it is critical that lawmakers listen to nurses and act on their advice.

*“Yes they should! We need decision makers who have been in our shoes and know what it is like to work short staff, to be under pressure, to deal with complaints from people all over, to not take lunch breaks, to not use the bathroom for hours, to stand on your feet for hours, answering call lights, and helping patients with their needs. We need for them to hear us to and to not make decisions on ‘book’ answers, but to make decisions on real-life situations. We need realistic policies and procedures implemented. The patients are suffering, not us. They are being put on hold because they can’t receive the proper care due to improper staffing, which then turns into more falls and call lights being answered for 20 minutes or more. There has always been a shortage of nurses in this field, it is only getting worse, by the day. The older nurses are retiring. The newer nurses are leaving and going to other fields because they are feeling the burn out before having 1 year of experience in. Nurses shouldn’t have to walk on eggshells at their employment.”*

*“Yes. Because decision makers are so far removed from the common patient they have no concept what is going on in healthcare... Changes need made and the health system needs updated and the sooner the better. Also decision makers have no idea what health care workers endure.”*

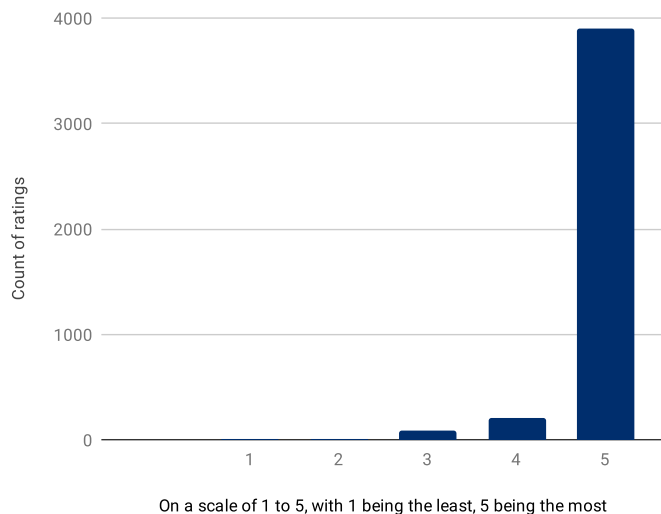
*“Yes, especially at this critical time in history with this pandemic, we are a large collective voice to make them aware of our needs for safety, equipment and patient care that benefits us as health care workers as well as patients. We see daily what we lack as far as personnel protection and resources. We should not constantly have to fight for our rights and protection here in America. We should have the resources, a voice, and equipment and medication needed without begging and pleading with administration.”*

## Nurse Values

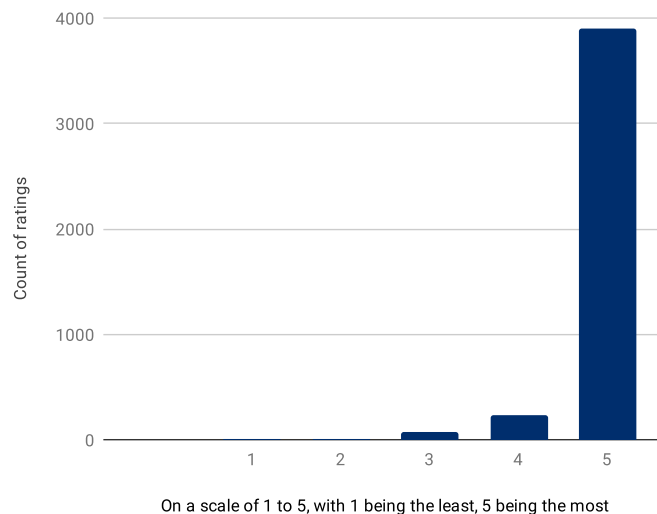
As stated above, nurses were invited to assign a level of urgency to issues they want legislators to act on, rating them on a scale from one to five, with five being the most important. The results are striking for their consistency among nurses.

**Please rate how important it is for legislators to take action on the following issues that affect care, on a scale of 1 to 5, with 1 being the least, and 5 being the most.**

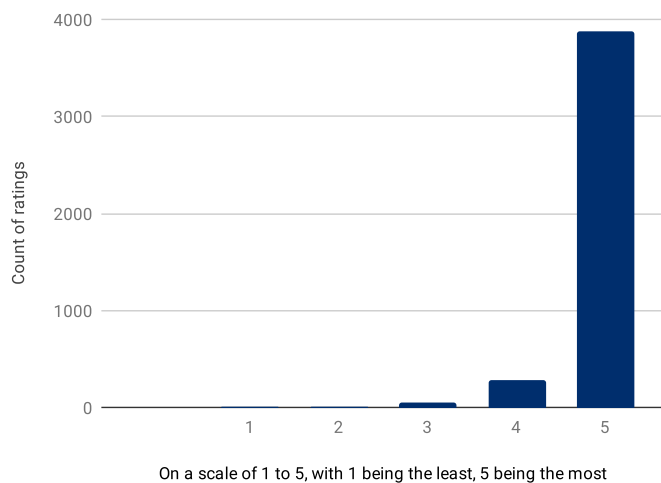
Safe patient limits legislation



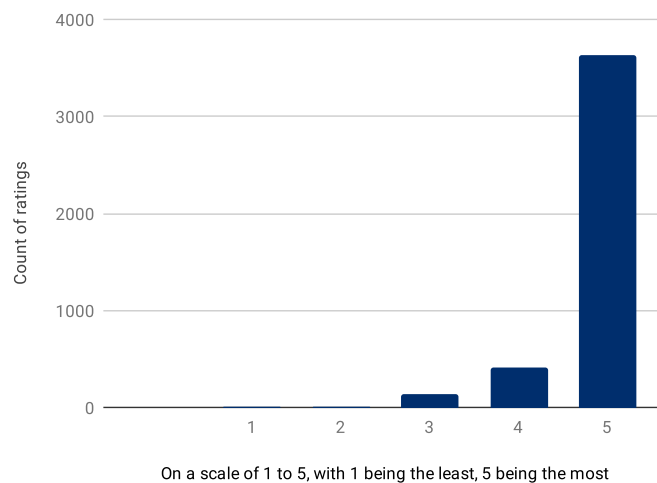
Workplace safety



A respected voice for bedside nurses—both at work and in the legislature



Affordable access to quality care for patients and residents



When asked **“What should nurses do to hold legislators accountable to our values?”**, most respondents discussed voting to elect or remove legislators based on their support for nurses’ key objectives. Some respondents also suggested that nurses educate the public both on the importance of their policy priorities and how legislators responded. Public pressure was mentioned as well. Many answers also suggested tactics like asking legislators to spend a day in their shoes.

*“Let our voices be heard and hold them accountable if they do not follow through as promised.”*

*“Call them out for not abiding by the needs of nurses. Let the public know which legislators are willing to ‘put their money where their mouth is’ and which ones are just yes-men who then do whatever they want at the expense of the patients and the healthcare workers.”*

*“Legislators need to spend a day with us. Better yet, a week. Then ask them what they think!!”*

*“Absolutely and we can do it by our votes. Our numbers alone represent an entity that any candidate should take seriously.”*

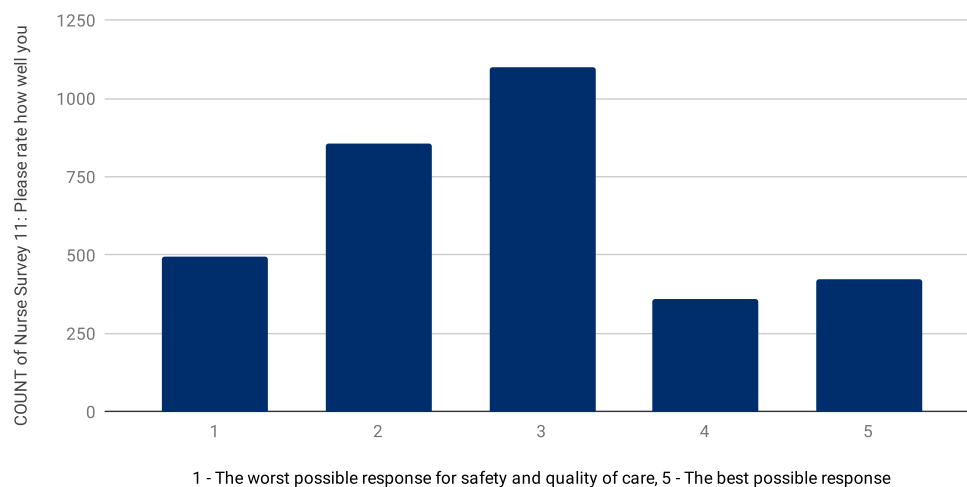
*“Have a public / media based ‘report card’ for them that will reflect their performance and enlist the public help as to what their needs are when they or their loved one is a patient.”*

## Addressing the COVID-19 Pandemic:

A few weeks after the launch of our survey, COVID-19 hit Pennsylvania’s health system; shortly afterwards it was declared an international pandemic and a statewide emergency. We added three questions to the survey to ask specifically about COVID-19.

When asked **“Please rate how well you believe your workplace and elected leaders are responding to this crisis to keep patients, frontline workers, and our communities safe [5 - The best possible response for safety and quality of care, 3 - An adequate response, 1 - The worst response]”**, nurses identified serious problems.

Please rate how well you believe your workplace and elected leaders are responding to this crisis





79% of nurses currently working in hospitals or nursing homes rated the performance of their workplace and elected leaders as a three, two, or one, and 46% rated their performance below a three.

**Twice as many** working nurses said the response of workplace and legislative leaders to the pandemic was **worse than adequate** as said that response was better than adequate.

When asked **“What challenges brought on by COVID 19 are you facing in your workplace that administrators and public officials must take action to address?”**, of the 1,472 nurses currently working in a hospital or nursing who answered this question, 71% mentioned personal protective equipment in their answers. Many also talked about testing and unsafe staffing.

Asked **“How is the response to the COVID 19 pandemic impacted by the pre existing challenges you and your patients were facing prior to the pandemic?”** many nurses drew direct connections between ongoing challenges like safe staffing and challenges specific to combating the pandemic.

*“Short staffing. We have vacancies but are difficult to fill. Poor staff retention. Few nurses with years of experience. Too many patients per nurse. Little ancillary staff and acuity isn’t factored into assignments. Too many tasks get diverted to nursing because others are too busy. This is not sustainable.”*

*“Everything in healthcare is based around profit now. Administration runs a profit generating machine under the guise of promoting wellness at all levels. I became a critical care nurse because of my interest and trust in biological sciences, my ability to work well under pressure, and my desire to help people in their worst time of need. The only one of those things healthcare administration and republican leadership support is my ability to work under pressure. And the pressure is too much. Staffing is kept at the minimum to generate best profit all the time. During COVID, even making mass staffing cuts at our hospital in the elective surgical dept. These nurses and support staff could help in many ways to prepare for and care for patients so we are not overworked and overwhelmed but it’s not “cost-effective.” Hospitals are not prepared for pandemics like this because it’s a financial risk. Purchasing supplies, infrastructure, keeping enough staff hired and educated, and paying people who have any knowledge to write and maintain detailed disaster plans is expensive. And it’s a gamble if you will ever use what you just spent money on. So facilities dump millions into building a nice waiting room and advertising to the public. These will generate business and the insane way the US runs insurance and healthcare costs means business equals payment. This money never trickles down to the healthcare workers or to support preventative measures. Everything in the hospital is run with the mentality of making the most money and spending the least amount to do so.”*

*“The nurse to patient ratio has already been atrocious. Some nurses in my hospital are taking on 10+ patients at night - patients who require frequent checks and observation (post surgical, neuro/stroke patients). This only puts the public at risk by having nurses who cannot effectively perform their jobs! COVID makes it worse because now, on top of caring for too many acutely ill patients without COVID, nurses are expected to care for their patient population PLUS the new COVID patients. ICU patients are being put on med/surg floors because COVID patients need the ICU beds. There simply aren’t enough nurses and by stretching their nurse to patient ratio, nurses will become burnt out/leave then profession and patients will risk a higher risk of death.”*

*“We did not have enough working staff in any area prior to COVID-19 because everything is profit driven and everybody turns a blind eye, and nurses, doctors, housekeepers, [and] every single working person in the facility are killing themselves working stressed out to the max on a daily basis before COVID-19.”*



## **About Nurses of Pennsylvania**

Nurses of Pennsylvania is an organization of, by and for nurses focused on improving the bedside care nurses provide. PA nurses work in cities and small towns, at large hospitals, in nursing homes and more - tied together by their commitment to their patients, their families and their communities. United for quality care, Nurses of Pennsylvania is focused on leading the state to a health care system that puts patients first.

For more information, please visit us on Facebook at Nurses of Pennsylvania or at [www.nursesofpa.org](http://www.nursesofpa.org).

## **About Nurse Alliance of SEIU PA**

The Nurse Alliance of SEIU Pennsylvania is an affiliate of SEIU Healthcare Pennsylvania, Pennsylvania's largest healthcare union and largest union of nurses—representing over 10,000 nurses. The Nurse Alliance was created as a forum for nurses to connect across their union and discuss ways to meet the challenges nurses face regarding their patients and profession, and works to advocate for patients, educate their colleagues, and serve their communities.

For more information, please visit us on Facebook at Nurse Alliance of SEIU PA.