

**B14.** On the whole, how satisfied are you with your present job?

- Very satisfied
- Moderately satisfied
- A little satisfied
- A little dissatisfied
- Moderately dissatisfied
- Very dissatisfied

**B15. Independent of your present job,** how satisfied are you with being a nurse?

- Very satisfied
- Moderately satisfied
- A little satisfied
- A little dissatisfied
- Moderately dissatisfied
- Very dissatisfied

**B16.** Do you plan to leave your **present** nursing position?

- Yes, within the next 12 months
- Yes, within the next 3 years
- No plans to leave within next 3 years → **SKIP TO B19**

**B17.** What do you plan to do after leaving your present nursing position? *Please "X" as many as apply.*

- Retire
  - Take a different position in nursing
  - Return to school to pursue additional nursing education
  - Pursue a job in another profession
  - Take time out for family or other personal reasons
  - Other (please specify below)
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**B18.** How likely would each of the following be to cause you to reconsider your plans to leave your present position?

	Very Likely	Some-what Likely	Not Very Likely	Not Likely at All	N/A
More flexible scheduling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Higher salary or benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More autonomy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More respect from management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Better staffing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More opportunities for professional development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**B19.** In the next year, do you plan to increase or decrease the number of hours that you work?

- Plan to increase
- Plan to decrease → **SKIP TO B21**
- No change expected → **SKIP TO B22**

**B20.** Why do you plan to increase the number of hours that you normally work? *Please "X" as many as apply.*

- To make more money → **SKIP TO B22**
  - To pursue a higher level / more demanding job in nursing → **SKIP TO B22**
  - Other (please specify below, then → **SKIP TO B22**)
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**B21.** Why do you plan to decrease the number of hours that you normally work? *Please "X" as many as apply.*

- To reduce stress or feelings of exhaustion
  - To go back to school
  - Want more flexibility in my work schedule
  - Won't need to make as much money due to improved financial circumstances
  - To have more time for family or other personal activities
  - Other (please specify below)
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**B22.** What is your clinical specialty?

- Maternal/Child
  - Medical/Surgical
  - Critical care
  - Operating room
  - Ambulatory
  - Oncology
  - Administration
  - Education
  - Other (please specify below)
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**B23.** What nursing degrees have you received and in what year did you receive them? *Please "X" as many as apply.*

	Year Received
<input type="checkbox"/> Associate degree in nursing	_ _ _ _
<input type="checkbox"/> Diploma in nursing	_ _ _ _
<input type="checkbox"/> Baccalaureate degree in nursing	_ _ _ _
<input type="checkbox"/> Master's degree in nursing	_ _ _ _
<input type="checkbox"/> Doctoral degree in nursing	_ _ _ _

**B24.** What **non-nursing** degrees have you received and in what year did you receive them? *Please "X" as many as apply.*

	Year Received
<input type="checkbox"/> Didn't receive a non-nursing degree	
<input type="checkbox"/> Associate degree	_ _ _ _
<input type="checkbox"/> Baccalaureate degree	_ _ _ _
<input type="checkbox"/> Master's degree	_ _ _ _
<input type="checkbox"/> Doctoral degree	_ _ _ _

**B25.** Have you been certified as an advanced practice nurse (this includes nurse practitioner, midwife, anesthetist, or clinical nurse specialist)?

- No
  - Yes (please specify below)
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