



**EFN Report on**  
**Newly registered nurses leaving the nursing**  
**profession or not practicing nursing**  
**after graduation**

*June 2024*



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## Executive Summary

Nursing workforce shortages are a serious global crisis. Many experienced nurses are leaving the nursing profession, and to make the situation even worse, less nurses are being recruited, and more and more nurses are choosing to leave the profession after only a few years from registering in the national nursing register. As this situation is extremely worrying and urgent, it must be tackled as a priority by the EU and national governments. However, this can-not be done effectively without knowing precisely the entity of the challenge and its underlying causes.

As a response to this lack of information, the current EFN Report presents information collected during the EFN General Assembly (GA) in April 2024, in the Tour de Table item of the GA agenda, with 22 National Nurses Associations (NNAs) providing input. This Tour de Table aimed at gathering information on newly registered nurses leaving the nursing profession or not practicing nursing after graduation, including an overview on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation. Furthermore, the Tour de Table focused on the main reasons that newly registered nurses are not practicing nursing after graduation, or even leaving the profession. Finally, the Tour de Table explored EFN members views on successful strategies used in the EFN members' NNAs' countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession and/or to prevent newly registered nurses from leaving the profession. All collected data was synthesised following standard content analysis approaches. The results are shared to inform national and EU policies on nurses' recruitment and retention.

The data collected through the EFN Members indicated great variations between European countries in the percentage of newly registered nurses who are not practicing the profession after graduation and/or leaving the profession. Furthermore, it demonstrated that as it stands, because of the lack of systematic surveys at the national level, we lack precise information on the number of newly registered nurses making this career choice.

On the reasons why newly registered nurses are not practicing the profession after graduation and/or leaving the profession, we can see clear similarities to the reasons why more experienced nurses choose to leave the profession. However, an important difference that currently affects newly registered nurses' decision to not practice or leave the profession is their experiences during the clinical trainings in their last year of studies and the transition from nursing students to registered nurses. The lack of support, mentorship and adequate supervision at these stages deeply affect the newly registered nurses career decisions.

On the strategies in place at national level, the EFN Members qualitative and quantitative data show that in some countries there are no developed nor implemented strategies. On the other hand, we were able to collect several best practices which will greatly benefit the EFN's capacity to influence EU and Member States' policies towards better recruitment and retention policies of newly registered nurses.

Therefore, it is vital that the EU institutions and the National governments support the nursing profession in tackling the ongoing challenges as shortage, working conditions, salaries, recruitment and retention. Nurses are committed to continue to invest and work for the benefit of the citizens/patients, but safeguarding quality and safety requires appropriate consideration and investment. These ongoing health challenges across the EU, coupled with the nurses leaving massively the nursing profession (up to 30% at EU level), makes it imperative that the EU Institutions and the National governments take adequate actions and invest in the nursing profession developments. This is vital to ensure high quality care and building the resilience of the healthcare ecosystems in the EU and Europe.

## Main Report

### 1. Background

The European Union is undergoing a serious health workforce crisis which is not sparing the nursing sector. While this was already well-recognised before the COVID-19 pandemic, the pandemic has made this shortage crisis ever more politically relevant. According to the State of the [WHO World's Nursing Report \(2020\)](#), the global nursing workforce was 27.9 million, with an estimated global shortfall of 5.9 million nurses. [Certain studies](#) raised that after the pandemic, up to 30% of the nursing workforce considered leaving the profession. The reasons are not new, such as workplace violence and harassment, burnout, poor salaries, and lack of recognition, but the pandemic has made these issues even worse. The article "[The Ticking Time Bomb in the European Union Has Exploded](#)"<sup>1</sup>, underlines how in the EU, the political response has lacked concrete actions, and even worse, the Belgian Presidency of the Council 2024 considered even suggesting reviewing the European Directive 2013/55/EU, with an enormous risk of downgrading the education of nurses throughout the EU. However, the same article advances concrete policy proposals to ensure Safe Staffing Levels next to investing as a political priority in the domestic nursing education and training programs, with adequate mentorship support, as also pointed out by the EFN in the [Policy Statement on Nurses' Mentorship](#).

Mounting evidence demonstrates that high quality education is necessary not only to develop a resilient, high skilled domestic workforce with the right skills mix, but also to make the nursing profession more attractive and ensure the retention of newly registered nurses.<sup>2</sup> As the EFN Policy Statement "[How to get Nurses' Education more Attractive](#)" points out, strengthening clinical placements with protected time for mentorship is a necessary step to make the nursing education and nursing profession more attractive. Moreover, other studies<sup>3</sup>, raise awareness towards the importance of the transition period after graduation into clinical practice, which can lead to high levels of stress and mental health consequences if not managed appropriately. In fact, the experience during this delicate phase is often one of the main causes why newly graduate nurses consider to stop practicing nursing or to not practice at all after graduation.

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<sup>1</sup> Paul De Raeve, Patricia M Davidson, Andreas Xyrichis and Pamela F Cipriano. The Ticking Time Bomb in the European Union Has Exploded: The Importance of European Council Recommendations on the Healthcare Workforce. *Iris J of Nur & Car.* 4(5): 2024. IJNC.MS.ID.000598. DOI: 10.33552/IJNC.2024.05.000598

<sup>2</sup> Ibid

<sup>3</sup> Berglund M, Kjellsdotter A, Wills J, Johansson A. The best of both worlds – entering the nursing profession with support of a transition programme. *Scand J Caring Sci.* 2022; 36: 446–455. <https://doi.org/10.1111/scs.13058>

The EFN thus believes in the importance of developing concrete policies at the Member State level, and effective council conclusions and professional guidelines at the EU level, to improve nursing education, and in particular, the clinical experience, in order to make the nursing profession more attractive and ensure Safe Staffing Levels. Moreover, ensuring the retention of registered nurses through adequate investments and policy actions is fundamental. This report is an important step forward in this direction: increasing awareness towards the different experiences at the Member State level, and sharing good practices, is fundamental to developing a coordinated European response, scaling up these identified good practices with the support of the EU resilience and recovery funds and in so doing ensuring the development of a resilient and highly skilled domestic workforce.

## 2. Method

Facilitating the exchange of knowledge, experiences and developments among the EFN membership is a very much valued function of the EFN bi-annual General Assembly meetings. A key policy support mechanism to achieve this is the EFN *Tour de Table*. At each General Assembly of the EFN, the Tour de Table provides the opportunity for the EFN Members to share information and good practices on a specific topic of EFN/nurses concern that should be put higher on the EU political agenda; as well as key issues and developments of national importance.

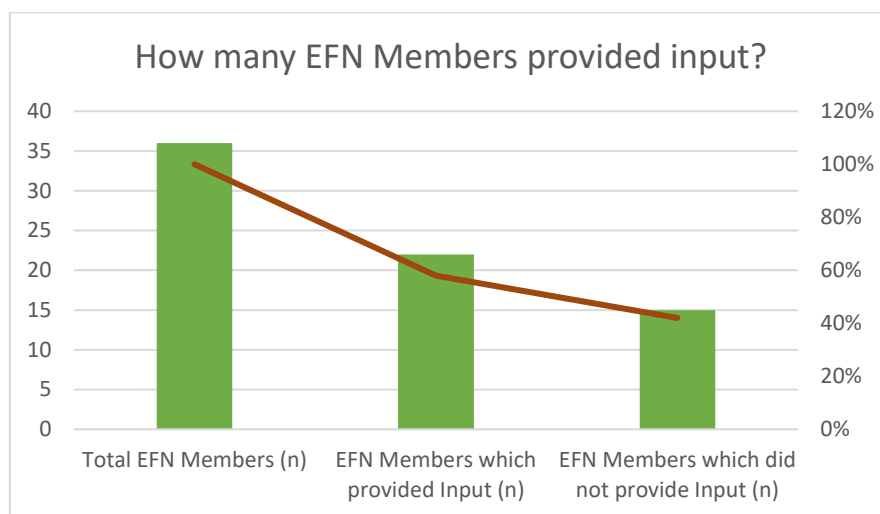
The EFN Members value the opportunity to share their experiences with their colleagues from across the EU and Europe, learn from each other's ongoing developments at National level, and communicating this evidence with the European Commission aiming at upscaling these good practices throughout the EU and Europe.

At the April 2024 EFN General Assembly held in Brussels, the EFN Members were invited to provide information on newly registered nurses leaving the nursing profession or not practicing nursing after graduation, including an overview on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation, the main reasons that newly registered nurses are not practicing nursing after graduation, or leaving the profession, and successful strategies used in the EFN members' NNAs' countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession and/or to prevent newly registered nurses from leaving the profession.

These collected qualitative and quantitative data will be important for the EFN to lobby the EU institutions and in particular the European Commission, the EPSCO Council and the European Parliament, when advancing the EU Workforce agenda. The better the EFN knows what the national situation in each country is, the better we will be able to lobby the EU institutions in shaping fit-for-purpose policy solutions.

### 3. Results

This survey presents input from the EFN members' National Nurses' Associations across the EU and Europe. The EFN Members' input was presented in the EFN Tour de Table, an agenda point in the EFN General Assembly where the EFN members provide written input and an oral briefing to the entire General Assembly on the developments in their country. The respondents to the survey were 22 NNAs (counting two members from Belgium which gave one single, conjoint response), out of 36 total NNAs, meaning a total response turnout of 61%.



*Source: own work.*

#### a. Percentage of newly registered nurses leaving the profession or not practicing nursing after graduation

From the data collected from the answers to this question, calculating an overall percentage is not possible. In many EU Member States, due to the absence of nation-wide studies, exact figures of newly registered nurses leaving the profession or not practicing nursing after graduation are not available.

For the following reason, some NNAs have provided unofficial estimates, such as Lithuania, and others have outright responded that these figures are not available, such as Germany. On the other hand, some countries have provided some form of official figures, like Denmark and Norway, however, even in these cases, the studies are often not done systematically, but they still provide a very useful framework of reference. In the following section, we will look more into detail at the responses of the NNAs to draw some comparisons and look for common trends.

### **Countries with no official/precise data:**

Nine NNAs have reported that in their countries there are no official and precise data when it comes to newly registered nurses leaving the profession or not practicing after graduation. The list includes **Albania, Belgium, Czech Republic, Estonia, Germany, Lithuania, Poland, Spain**. Notwithstanding, we can still draw some interesting information from the NNA's input.

In **Albania** there is no data on newly registered nurses who leave the profession.

**Belgium**, reported that despite the lack of official data they know that 2 out of 10 students are considering not practicing nursing in the future.

In the **Czech Republic**, while nursing schools are mandated by law to update statistical information on nurses leaving the profession, many do not do this, thus it is impossible to have access to reliable information on this matter.

In **Estonia**, while the government does not collect such information, many employers have reported that nurses tend to leave the profession **3-5 years** after graduation.

In **France**, despite some studies, there is a lack of strong evidence and precise information on the percentage of newly registered nurses not practicing or leaving the profession after graduation. Moreover, there is no study which dates after the COVID-19 Pandemic, which strongly impacted the sector, making older studies even less reliable.

**Germany** has provided interesting input by sharing a study which, despite being on self-selective samples, and therefore not representative of the population despite the sample size, raises awareness towards the size of the nursing workforce in working age currently not practicing nursing, which would restart practicing if certain work conditions were improved: between **263,000 and up to 583,000 full-time equivalents**. Considering the serious shortages, implementing successful strategies (which we will discuss in the next section) to attract these nurses back to the profession would greatly contribute to reducing the burden on the remaining nurses.



In **Lithuania** there is no precise data, however, there may be between **20-30%** of newly registered nurses who do not practice nursing after graduation.

In **Poland** there is no official data, but it is known that thanks to wage increases, in the last two years the number of newly graduate nurses leaving the profession has decreased.

**Spain** reported that despite there are 10,000 new nursing graduates a year, many do not practice and register in the country.

### **Countries with some form of official data:**

The countries which reported some forms of official data are **Bulgaria, Cyprus, Denmark, Finland, Iceland, Ireland, Netherlands, Norway, Sweden, and the UK**. Some of these countries were reported under this section despite there is no official percentage of newly graduate nurses not practicing or leaving the profession after the graduation. The reason for this is that the available data was enough to make some estimations.

In **Bulgaria**, nearly **20%** of newly registered nurses leave the profession. Some of them go abroad, where they work in other professions until when they feel comfortable enough with the language to apply for professional recognition of their competences, a process that usually takes 3-5 years.

**Cyprus** reported that around 1-2% of newly graduate nurses are leaving the profession, while 6-7% are not practicing nursing after graduation.

In **Denmark**, a growing number of newly graduate nurses has been leaving the profession. Comparing data from 2013 and 2021 shows how this trend has developed. In 2013, 0.7% of nurses with 1-year seniority left, while in 2021, 1.4% of nurses with 1-year seniority left. In 2013, 1.6% of nurses with 3-years seniority left, while in 2021 the percentage was 2.7%. Overall, nurses **with 3- and 5-years** seniority are those who most frequently leave the profession. Furthermore, many newly graduate nurses are leaving the public health sector, often to go to work as nurses in the private sector, where the salaries are higher. In 2013 5% made this choice, while in 2021 9% has made the same choice. A survey made by the Danish Nurses Organisation (DNO), EFN member, also shows that 9% of nurses with 2-seniority are not expecting working as nurses after 3 years.

In **Finland**, out of the 3243 nurses who made a career change between 2020 and 2021, 5.5 percent were under 25 years old. Overall, while departures from the nursing profession occurred at all ages, this applied mostly to younger age groups. However, career change can also be temporary, and some nurses still remain in social and healthcare positions.

In **Iceland**, the latest report dates back to 2-3 years ago. What it highlights is that every 4-5<sup>th</sup> newly registered nurse (23% of newly registered nurses) leaves the profession **within 5 years from graduation**.

In **Ireland**, due to the lack of official data on newly graduate nurses leaving the profession, the Irish Nurses and Midwives Organisation (INMO), EFN Member, has done a survey of final year Bachelor students, and found that 73% of them considered emigrating after graduation. [A report by the HEA](#) from 2017, which investigated where the 2015 nursing graduates ended up nine months after graduation, found that 89% of graduates were working as nurses in Ireland. Furthermore, according to the data from the [Nursing and Midwifery Board of Ireland \(NMBI\)](#), which holds data on new registrants, in 2023 95,6% of nurses between the age range of 20-24 were practicing, while this percentage drops to 92% in the ages range of 25-29.

In **Italy** about 25% of newly registered nurses do not practice after graduation.

In **Malta**, about 15% of newly registered nurses are leaving the profession while 20% are not practicing after graduation.

In the **Netherlands**, the percentage of newly registered nurses leaving the profession is 9% after within 2 years from graduating.

In **Norway**, the [latest study](#) on newly graduate nurses leaving the profession or not practicing after graduation was done in 2022. This study looked at nurses graduated in 2015, and it shows how after 2 years, 9.3% were not employed in nursing, after 4 years the percentage increased to 11.1%, and after 6 years 12.5% of the nursing workforce graduated in 2015 was not working as a nurse.

In **Sweden**, less than 3 percent of nurses under the age of 30 work outside of the healthcare sector.

In the **UK**, while there is no official data on the overall percentage of newly registered nurses leaving the profession or not practicing after graduation, the Royal College of Nurses (RCN), EFN Member, [has reported](#) that tens of thousands of skilled and experienced nursing staff are leaving the profession, with many aged 21 - 50. The RCN's also surveyed over 9,000 nursing professionals in the UK, revealing that 57% of respondents were thinking about or actively planning to leave their jobs in nursing (up from 37% in 2019). Moreover, those who were more likely to be thinking or planning to leave their jobs were respondents aged 18-44. Furthermore, according to the latest [NMC data](#), in the UK, in the last 12 months to Sep 2023, 9.8% (2,627) of total leavers **left the register five years** after joining it. The data from Sep 2023 shows that 5.7% of people trained in the UK left the NMC register 0-5 years after joining, compared to 4.2% in the 12 months to Sep 2021.

Therefore, we can say that when it comes to the amount of newly registered nurses leaving or not practicing the profession, the main thing that stands out is that there is an obvious lack of data/information. It is therefore key that the EU institutions (Eurostat, DG Grow IMI,...), WHO Europe, OECD, ILO, to reflect on collecting these comparable data to design fit-for-purpose workforce policies. National governments are encouraged to put in place tools to systematically record the number of newly registered nurses not practicing or leaving the profession. Without knowing exactly the entity of the problem, it is difficult to tackle it.

When it comes to the available comparable EFN data, it appears that there is a tendency, noticed in several countries, such as Bulgaria, Estonia, Iceland, Ireland, Norway and the United Kingdom, for newly registered nurses to leave the nursing profession after **3-5 years**. Due to different interpretations and lack of systematic, transparent and comparable data, however, it remains challenging to estimate an average percentage of newly registered nurses who leave the profession or do not practice after graduation. In some countries, like **Sweden and Denmark** for example, the issue is relatively small in entity, where around 3% of newly registered nurses are leaving or not practicing after graduation, compared to the 20% in **Bulgaria**, pointing to great variations from state to state. Notwithstanding, despite the lack of precise and comparable qualitative and quantitative data/information, it is clear that newly registered nurses leaving the nursing profession is a widespread challenge with very serious consequences to the healthcare sector which already faces an exodus of experienced nurses. What is even more concerning, is that a growing number of newly registered nurses are considering to leave or to not retire in the nursing profession, pointing out that this issue is destined to worsen unless concrete action is taken.

### **b. The main reasons that newly registered nurses are not practicing nursing after graduation**

From the data collected through the EFN members, it emerged that the main reasons why newly registered nurses do not practice the profession are often the same that push any other nurse to stop practicing nursing. COVID-19 has worsened the situation for all nurses throughout the EU and Europe, and this is something that clearly comes out when analysing the answers provided to the survey. On the other hand, something which is very interesting, which will also be observed in more detail in the following sections, is that the clinical experience during the last year of study, often plays a key role in pushing newly graduate nurses to not practice the profession, as reported by the EFN Members.

In this section we will be looking into more detail at the main reasons why newly registered nurses are not practicing after graduation.

In **Albania**, the main reason is the lack of jobs in both the public and private sectors.

In **Belgium**, 50% of nursing students are at risk of **academic burnout**, which has the double consequence of leading to many students dropping their studies or to not practice nursing after graduation. Other reasons include the effects of COVID-19, but also other factors such as child birth and the need to regularly update their training certifications.

In **Bulgaria**, the main reasons include low salaries, the bad image of the profession (cultural issues), overstaffing, lack of nursing standards, and the big age and cultural gap between young nurses and more experienced nurses. For these reasons, many young nurses prefer working in private hospitals where the hours are definite and the working conditions much better.

In **Cyprus**, young nurses choose to work as freelancers in community nursing or in doctor's offices instead of hospital settings because of better salaries and working hours, and for the same reasons they also choose any other sector other than healthcare.

Reportedly, in the **Czech Republic** the main reasons include low salaries, issues with competencies, too many responsibilities, high stress levels, the nurses to patients' ratio, and the desire to work only in the mornings or part-time.

In **Denmark**, [according to a study](#), many newly graduate nurses do not practice not because they want to leave nursing, but due to **the conditions in which nursing is practiced**. Moreover, they also believe that in the current conditions **it is not feasible to deliver nursing in a safe, caring and human way**, which may lead to bad care outcomes for patients and mental health issues for nurses. Furthermore, according to surveys carried out by the Danish Nurses Organisation (DNO) in 2022 and 2023, 46% of nursing students gave considered dropping out during the last semester. This is often linked to **bad experiences during their last clinical training**, where they are used as **extra workforce without focus on education or mentoring and support**. Moreover, 9 out of 10 of nurses with 2-years seniority believe that their salaries do not match their responsibilities.

In **Finland**, the Finnish Institute of Occupational Health conducts "How are you?" surveys for social and healthcare professionals on a regular basis. The respondents said that they struggle to manage their workloads and tasks, they often face workplace violence and ethically complex situations, and do not feel like they have an impact on the workplace. The combination of these issues leads many

damages to personal well-being, with only 32% of respondents saying that they recover well from the work strains. Consequentially, only 30% of nurses under 30 responded that they consider working until retirement.

In **France**, the main reasons include salary, shortage of skilled nurses which was made even more acute after the COVID-19 Pandemic, a lack of recognition and difficulties related to digitalization of the profession, the incapacity to fully reap the benefits of Advanced Practice Nurses, and serious issues concerning working conditions.

In **Germany**, the same study that was cited in the previous section, reports that many nurses would return to work if a set of working conditions were to improve, including appropriate staffing, reliable working hours, appreciative leadership, collegiality and better pay.

In **Iceland**, the main reasons why newly registered nurses do not practice nursing after graduation include low wages, the increased workload and work strain, and the unsuitable working environment.

In **Ireland**, according to the [2023 INMO](#) survey of last year students, over half of the respondents would practice nursing if the pay was raised; a third of the respondents said that they would practice nursing if safe staffing levels and better work conditions were provided; 73% of the respondents did not find adequate staffing levels in the workplace to support a positive learning environment, leading to burnout, stress, and overwork. These negative experiences leads many students to believe that the once they will start practicing they will have no support to manage the transition shock, which is realistic considering the lack induction and orientation available to them when they start their journey as qualified nurses. **For these reasons, the learning environment plays a huge role in pushing newly graduate nurses to not practice nursing after graduation.** Finally, another important reason is the cost of living, especially housing.

In **Italy**, the main reasons why newly graduate nurses do not practice the profession after graduation include low pay, recognition and respect to their profession, and unsatisfactorily quality of care due to the shortage of nurses.

In **Lithuania**, because of heavy workloads, low wages, and no respect for nurses, many newly graduate nurses choose to work in other sectors instead of nursing, where they can work independently and organise their work.

In **Malta**, newly registered nurses are not practicing after the graduation because they move to less stressful, better paid jobs, or because of family reasons, which may include childbirth, or other reasons such as going back to University to become Doctors.

In the **Netherlands**, the reasons are slightly different when compared to other Member States. While workload and job satisfaction are listed as one of the main reasons, other reasons include the desire to advance your career to more prominent positions, a lack of passion for nursing care, the feeling of not being prepared for the job after the studies, a lack of sense of belonging due to the toxicity of the workplace environment, and health conditions which may stem from non-work-related reasons.

In **Norway**, the main reasons include childbirth, emigration, the lack of preparation and negative experiences during their studies, and also the same reasons that push most nurses to leave the sector, including low pay, workload, insufficiency in skilled workforce, the strain of shifts and emotional strain.

In **Poland**, salary and employment conditions are the main reasons. Other reasons include staff shortages, underfinanced healthcare sector, poor management, lack of support mechanisms and tools to build resilience despite the high levels of stress and lack of experience.

In **Spain** the main reasons include the wear and tear caused by the COVID-19 Pandemic, which led to as many as 50% of the nursing workforce to consider leaving the profession. Other reasons include work conditions, low salaries, shift work, lack of recognition, lack of family conciliation and short term contracts.

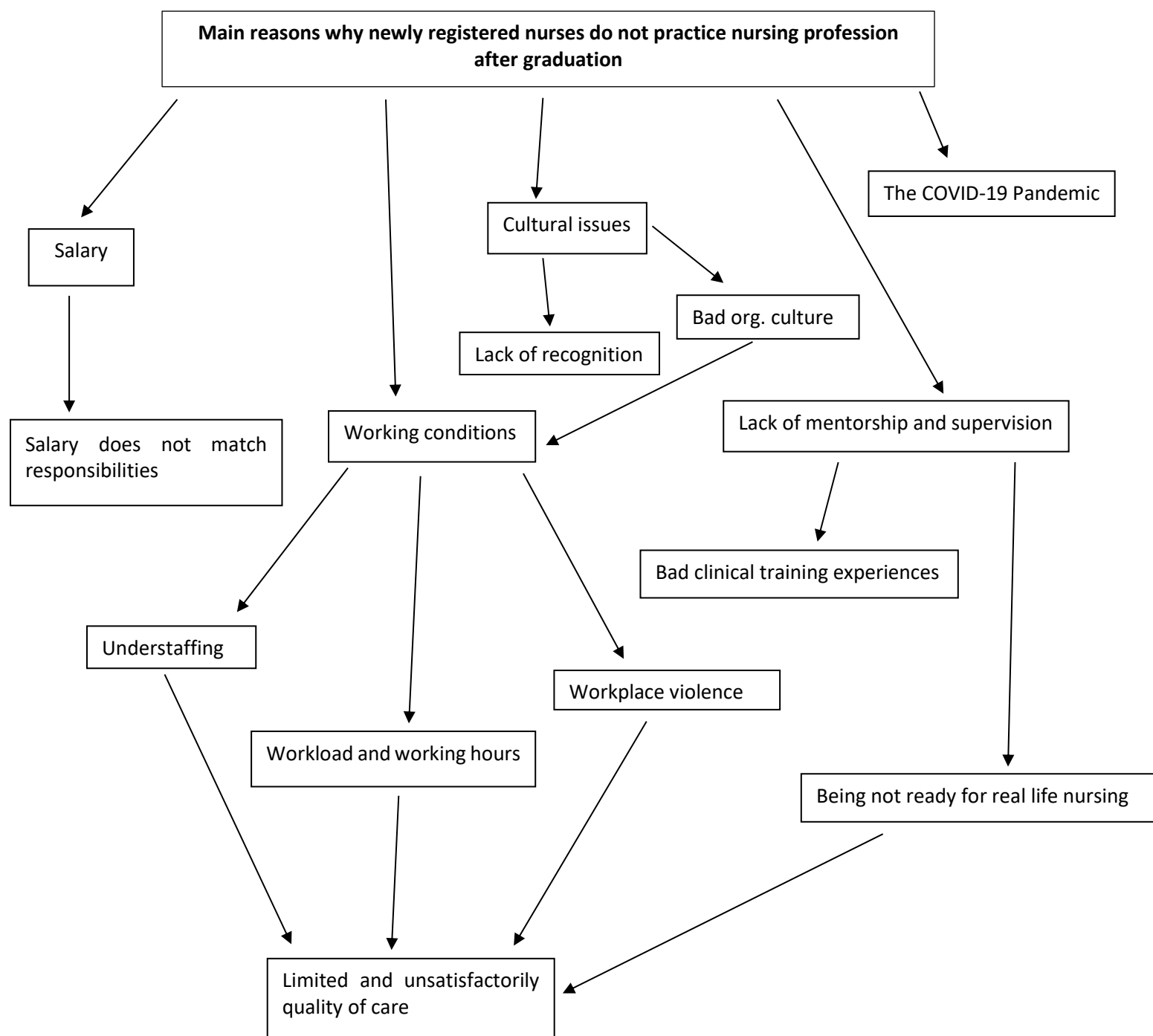
In **Sweden**, in addition to the most common reasons, such as low salaries and work conditions, other reasons include the continuation of studies and parental leave.

In the **United Kingdom**, the main reasons include poor salaries, the treatment of nurses, and high levels of debt, which are incurred during the studies and lead many students to look for jobs in other sectors due to the low pay of nursing which is not enough to fulfil their debts. Newly registered nurses look for jobs in other sectors also for better work-life balance and lower levels of stress.

Overall, it appears that the reasons pushing newly registered nurses to not practice after graduation are the same in most EU and European countries. Low salaries, bad working conditions, the lack of professional recognition, workplace violence and harassment, bad organisational culture, and the ongoing impacts of the COVID-19 pandemic, are all pushing newly registered nurses to seek employment elsewhere after graduation, where they can have better salaries and better work-life balance.

On the other hand, another major issue which appeared evidently from the input of the EFN Members, is that a major factor contributing to the decision of many newly registered nurses to not practicing nursing after graduation is their **clinical training experience during the last year of study**. Improving the nursing education, with adequate mentorship, and not treating interns like extra workforce without supervision and support is thus a major issue that must be addressed by national governments and employers. Furthermore, the realisation during clinical training, **that in the current working conditions it is impossible to deliver high quality care as young nurses aspire to**, is another important factor pushing young nurses away from the profession.

But not all is lost: as transpired from certain surveys, such as the one conducted the INMO in Ireland, the vast majority of respondents said that they would consider practice nursing if their working conditions were improved, which then points to the need of concrete and swift action from nurse leaders, policymakers and politicians.



Source: own work, based on the input of the EFN NNAs.



### **c. Successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession**

The responses to the survey by the EFN Members shows a large variety of strategies which are being utilised to make nursing profession attractive for newly registered nurses to start practicing nursing profession. The majority of NNA have responded that in their countries there are successful strategies to make nursing more attractive. These range from collective bargaining to raise the salaries and to improve the work conditions, to specific projects and initiatives which can be used as an example by other countries.

In **Albania** the main strategy has consisted in improving the image of nursing through various activities including inviting nurses to explain their success stories in schools, to a meeting between nurses and the Prime Minister.

In **Belgium**, not only there is no strategy in place, but the government has been attempting to tackle the staff shortages through “nursing” reform, which consist in delegating nursing legislation to non-nursing professionals, de-evaluating nursing practice and nursing studies.

In **Bulgaria**, some private hospitals have been trying to attract nurses through higher salaries and opportunities for Continuous Professional Development (CPD).

In **Cyprus**, the Nursing Services Directory of the Ministry of Health in cooperation with the Cyprus Nurses and Midwives Association and the Universities, EFN Member, have commenced strategies to improve the visibility and attractiveness of nursing studies through different kinds of outreach activities, and by developing tools to economically support nursing students to finish their studies.

In the **Czech Republic** there are no strategies in place.

In **Denmark**, the DNO has successfully managed in 2021 through collective bargaining to guarantee a mandatory introductory course for all new graduate nurses working in hospitals. This leads to recruitment, retention, higher levels of job satisfaction and patient care. While the content of the course is determined locally, the nurses must have a mentor at their disposition. A good example reported by the DNO is the Horsens Hospital, which offers an introductory course of the length of 1-2 years where newly registered nurses are both working but also offered adequate education and supervision from a mentor. The DNO has also successfully managed in negotiating a pay rise of 9.4% by 2026 as well as an allowance for more than 300 hours shift work for newly graduate nurses.

In **Estonia**, current strategies include onetime fees paid by employers, and career opportunities through APN studies, or the possibility to aim for nursing manager through master's studies.

In **Finland**, the Finnish Institute of Occupational Health & National Institute for Health and Welfare has developed the Good Pull Action Model for Elderly Services. The aim of the project is to ensure the availability of staff and attractiveness of the field of elderly services and to develop a model which can be applied to the entire social and healthcare sector, by addressing the ethical stress at work which affects all the healthcare staff. The project is developed thanks to the data collected in the "How are you?" survey. Despite the concrete solutions that it may bring out, additional measures are still required.

In **France**, the French government has proposed a set of actions which include the consolidation of tools and data, securing and diversifying career paths, upgrading skills and content, and enhancing the recognition and visibility of the profession. However, until this day no concrete actions have been taken in practice.

In **Iceland**, there are no strategies in place which seem to be working. Some hospitals/institutions have raised institutional agreements which led to internal competition for hiring nurses but it has not had any real effect. It is more about management, leadership and the working environment at each hospital which attracts nurses, as long as the wage matches their demands.

In **Ireland**, the INMO, through collective bargaining has ensured a faster pay raises for new graduates. The starting pay is €33,943. After 16 weeks since the end of their internship, the pay raises to €36,683. After a year, they can apply for the Enhanced Practice Contract. The starting pay for the Enhanced Practice Contract is €40,827. Depending on the work location, they may also be entitled to the medical and surgical ward allowance, worth €2,554. For student nurses, further supports were introduced in 2022 to enhance pay, conditions and encourage their retention.

In **Italy**, the government has put no strategies in place.

In **Lithuania**, current strategies are mostly employer driven, whereby the employer offers certain benefits, such as free parking space, free meals at the establishment, pays for public transport, pays for accommodation (in certain instances) and agrees on a work schedule with the employee.

In **Malta**, the strategies employed include a collective agreement, free childcare and other family friendly measures.

In the **Netherlands**, the list of successful strategies is quite extensive and it includes: the implementation of transition programs to support newly graduate nurses in the transition from school to the workplace; making work schedules available, which help maintain a healthy work-life balance (which is particularly important); opportunities for Continuous Professional Development (CPD) and career advancement within the nursing field; the Buddy-system whereby newly registered nurses can practice under the supervision and guidance of experienced nurses, leading to building practical skills and organizational protocols; and good nursing schools preparing students adequately both from a theoretical and clinical perspective.

In **Norway**, a cooperative project between the Norwegian Association of Local and Regional Authorities (KS), the three largest unions in the sector, and representatives from the education sector, is ongoing, focusing on attracting and retaining nurses and nursing assistants to primary healthcare, through mentoring programs, introduction programs, better tutoring systems during the practical part of the bachelor studies, among other things. While the results are hard to measure, the participants seem satisfied. However, it will be successful only if employers prioritise the project and put the right resources in place.

In **Poland**, collective bargaining is ongoing to ensure fair pay raises to match qualifications, as well as initiatives promoting nursing as a profession. Moreover, the government has responded positively to the initiative to create new nursing academic centres in accordance with accreditation standards.

In **Spain**, the focus has been on negotiating more student places as there is great interest for nursing studies, and on pushing public and private administrations to improve working conditions and increase retention.

In **Sweden** there is no ongoing strategies to make nursing more attractive for newly graduate nurses. However, they are aware of students' priorities when it comes to choosing to practice nursing, and they include salary, working conditions, organisational values and culture, leadership, and structured professional introduction with effective supervision and mentorship.

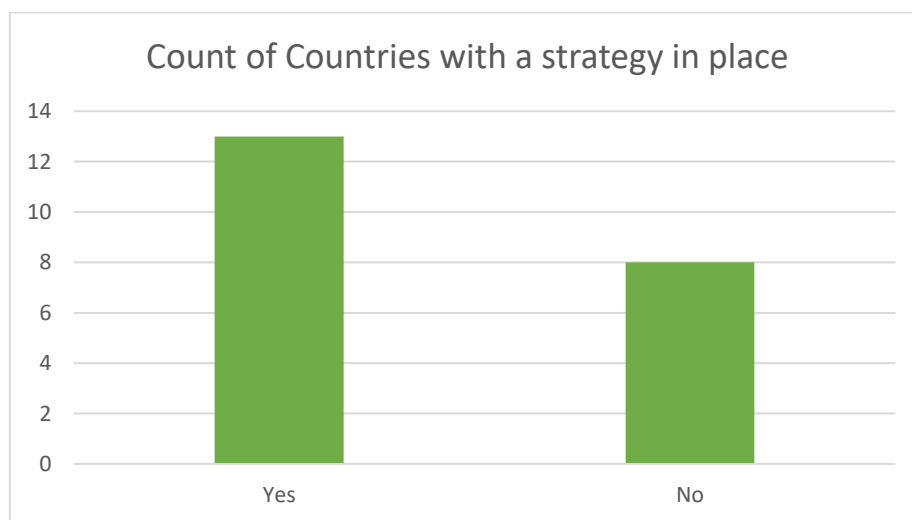
In the **United Kingdom** the government has not done enough to encourage newly registered nurses to practice nursing, to which the RCN has responded by going on strike to ask for better salaries, mentorship, better working conditions, and opportunities for continuous professional development (CPD).

Overall, most member states lack a national strategy, but notwithstanding, the input offered by the EFN members shows that there are strategies which can be effective and that can be implemented throughout the EU and Europe.

First of all, collective bargaining and lobbying have proved to be extremely effective, like shown by **Ireland**, in leading to pay raises which is one of the main demands of newly registered nurses.

Furthermore, initiatives which aim at improving mentoring and making the transition from nursing student to registered nurse, like the ones done in **Denmark** and **Norway**, also show their effectiveness in encouraging newly registered nurses to practice nursing after graduation.

Other notable effective measures include opportunities for **Continuous Professional Development (CPD)**, and focusing on developing **Advanced Practice Nursing (APN)** in the EU and Europe as courses are made available in two **Estonian** Universities, with career progression, and outreach initiatives in schools to make the nursing profession more visible and attractive, such as in the case of **Cyprus**. APN starts to be well legislatively developed and implemented throughout the EU and Europe (De Reave at Al, 2023).<sup>4</sup>



*Source: own work, from the input provided by the EFN NNAs.*

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<sup>4</sup> De Raeve P, Davidson P, Bergs J, Patch M, Jack SM, Castro-Ayala A, Xyrichis A and Preston W (2023), Advanced Practice Nursing in Europe - Results from a pan-European survey of 35 countries: Empirical Research Quantitative. [Journal of Advanced Nursing](#)

### **d. Main reasons that newly registered nurses are leaving the profession.**

According to the EFN data collected in April 2024, it is clear that in most instances, newly registered nurses are leaving the profession because of the same reasons why they are not practicing after graduation. These included the bad working conditions, low salaries, lack of respect and professional recognition, too many responsibilities and understaffing. Moreover, it is clear that the COVID-19 pandemic has worsened an already drastic situation, as demonstrated by the input that EFN received from the EFN Members.

In **Albania**, newly registered nurses often leave to work abroad, in countries like Italy or Germany.

In **Belgium**, untenable working conditions, stemming mostly from heavy workload and leaving staff not being replaced, are leading to many leaving the profession. In turn, this has led to the closure of hospital beds and entire departments, and to heavier workloads for the remaining nurses.

In **Lithuania**, the main causes are low salaries (with the better salaries in jobs outside the profession), workplace violence, bad working conditions, and lack of recognition.

In **Cyprus**, newly registered nurses are leaving nursing profession for better salaries and working conditions in other sectors.

In the **Czech Republic**, the main reasons are salaries which do not match responsibilities, too much of overtime work, and low prestige.

In **Denmark**, a survey carried out by the DNO in 2023, shows that the psychosocial working environment experienced by newly registered nurses is worse when compared to that of experienced nurses, especially that they are more prone to feeling dissatisfied with the quality of care, it is harder for them to deliver care in a safe and professional manner, the pace of work is too high at the cost of quality, and they are more prone to stress and taking sick leave. For these reasons, they are more prone to leaving the profession.

In **Estonia**, low salaries which do not match the responsibilities and do not allow nurses to make a decent living for themselves and their families, heavy workloads due to staff shortages, which decreases the quality of care pushing newly registered nurses to face an ethical conflict and extreme dissatisfaction, and poor organisational culture which leads to a toxic and understaffed workplace, are all conducive to leading newly registered nurses to leave the profession.

In **Finland**, newly registered nurses are leaving the profession for the same reasons why newly registered nurses are not practicing after graduation.

In **France**, the reasons are the same which were listed in the previous section.

In **Iceland**, the reasons are the same for which newly graduate nurses are not practicing after graduation.

While in **Ireland** the main reasons why newly registered nurses are leaving the profession are similar to the reasons why newly registered nurses are not practicing after graduation, a survey done by INMO in 2023 shows that after the COVID-19 pandemic, 73% of the respondents had considered leaving the profession. Of these, 34.8% were newly registered nurses.

In **Italy** the reasons are the same for which newly graduate nurses do not practice after graduation, but they also include workplace violence, especially in emergency units.

In **Lithuania**, what is pushing newly registered nurses to leaving the profession is mainly the poor working conditions caused by understaffing, as well as the lack of respect and decent salaries for nurses.

In **Malta**, the reasons are the same that push newly registered nurses to not practice after graduation.

In the **Netherlands**, the reasons are very similar to the reasons why newly registered nurses do not practice nursing after graduation.

In **Norway**, the causes are largely similar to the reasons why newly registered nurses are not practicing.

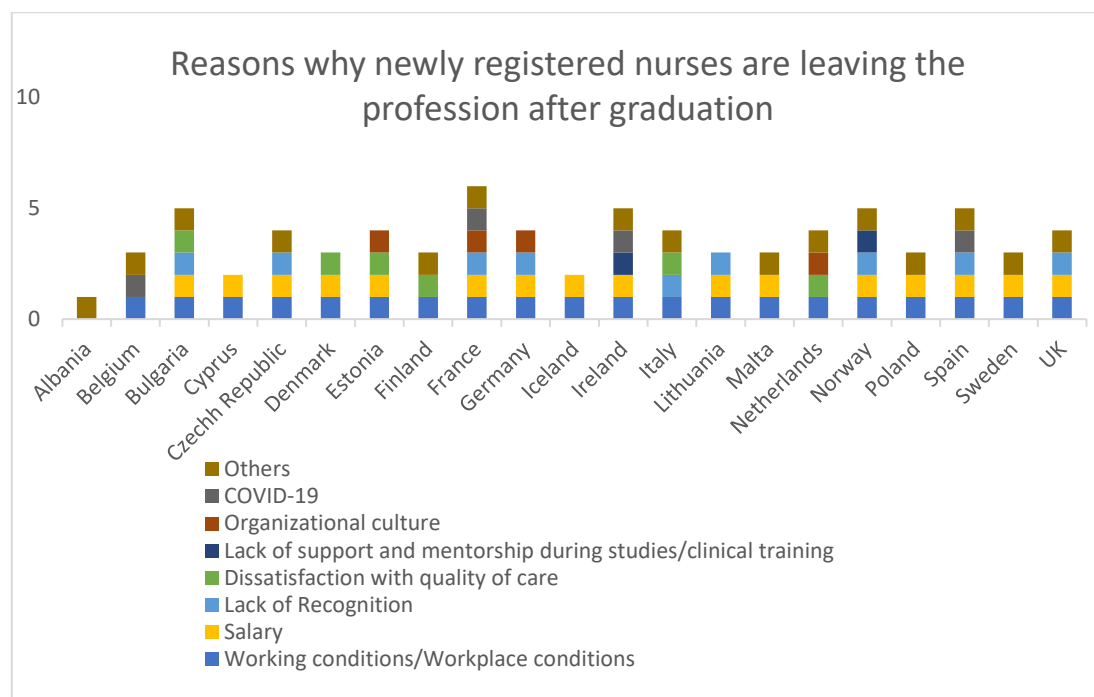
In **Poland**, many newly registered nurses prefer to study other subjects since higher education is largely free, so that they can work in sectors where the stress levels are not as high.

In **Spain**, in addition to the reasons described in question 2, our member has reported that many young nurses once they start to work in the health sector, they realise that it is nothing like what they had expected, and this contribute heavily to driving them out of the profession.

In **Sweden**, the main reasons are the same cited above, but they also include issues faced with the employer or legal issues.

In the **United Kingdom**, the main reasons reported include the most common issues faced by nurses, such as low pay, working conditions and lack of respect and recognition, but also concerns about not meeting revalidation requirements.

Overall, it is clear that the main reasons why newly registered nurses are leaving the profession are very similar to the reasons why newly registered nurses are not practicing the profession after graduation.



Source: own work, based on the input the EFN NNAs.

## e. Successful strategies used in their countries to prevent newly registered nurses from leaving the profession.

According to the EFN data collected, certain EFN members have reported that in their countries the strategies in place are the same which are used to make the nursing profession more attractive for newly registered nurses to practice the profession. This is the case for **Cyprus, Denmark, Finland, Malta, Norway, Poland and Sweden**. On the other hand, **Bulgaria, the Czech Republic, Estonia, Italy, France, and Spain** have reported that there are no strategies in place at the national level. When it comes to the remaining countries:

In **Albania**, the Prime Minister has called a health congress to call on nurses to return to the profession.

In **Belgium**, the AUVB-UGIB, EFN Member, has lobbied the political institutions through an attractiveness plan for the nursing profession in 2022, and through the Memorandum 2024, with key

points to be implemented between 2024-29, and they will continue to monitor the situation for any developments.

In **Ireland**, while there are no ongoing national strategies, the INMO has reported that it continues to lobby the government from greater investments in healthcare, particularly in affordable housing, domestic nursing workforce, and in the workplace, in order to improve job satisfaction.

In **Iceland**, the Icelandic Nurses Association has been working towards a new collective agreement with government officials, since the previous one expired on 1<sup>st</sup> April, but so far it will be a long process.

Similarly, in **Lithuania**, collective bargaining is ongoing to push the government to train more nurses, to promote mentoring on the workplace, and to provide annual salary increases to nurses.

In the **Netherlands**, in addition to the strategies previously explained, we can find efforts by decision makers and employers to maintain safe-staffing levels in order to prevent overload and burnout, and greater attention by managers towards the needs of individual employees.

In the **United Kingdom** there are no national strategies in place, but RCN is trying to tackle this issue through initiatives focused on safe staffing levels and bed shortages, as well as on improving the way immigrant nurses are treated in the health system. Moreover, it continues to lobby the government to deliver a fully funded health and care workforce plan, higher salaries, better working conditions, to address health inequalities and to make career progression accessible to all.

## 4. Conclusion

The input from the EFN Members has proved to be extremely valuable and informative regarding their national contexts on newly registered nurses not practicing or leaving the nursing profession after graduation. At the moment, there is still too little information available on rates that newly registered nurses are leaving or not practicing the profession, which may limit the effectiveness of the interventions. On the other hand, the reasons why newly registered nurses are not practicing after the graduation or leaving the profession are extremely clear, meaning that we know what has to change in order to tackle this worrying and serious problem to be addressed at the EU level. Furthermore, the sharing of good strategies from the EFN members adds hope, as it shows that there are already effective strategies developed which can be upscaled with EU Funds, especially the



Recovery and Resilience Facility, Horizon Europe, Erasmus+, European Public Health Programme, even in those countries that at the moment do not have any strategy in place.

Nurses are the backbone of the healthcare systems, but without adequate support by the EU and national governments, they cannot deliver the quality of care for which they have been trained and which they aspire to deliver. For this reason, unless the support is provided, the nursing shortages will only become larger in dimension, as the many experienced nurses that are choosing to abandon the nursing profession early will not be replaced by newly registered nurses who are also choosing to look for better work conditions and salaries elsewhere. As such, the EFN and its National Members, the National Nurses' Associations (NNAs), will continue to make the voice of nurses heard loud and clear, and ensure that tackling nursing shortages and their causes remains the highest priority for the EU and for the national governments.

## EFN Members input country per country

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### ALBANIA

1. **The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

We do not have information for newly registered people who leave the profession, but we do have information for those who want to leave to work abroad.

2. **The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

Lack of jobs in both the public and private sectors

3. **The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

Various activities in promoting the image of nurses, inviting nurses explaining their success stories, Meeting in the parliament, application for projects.

4. **The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

In Albania, young nurses are more likely to leave to work abroad, as in the countries of Italy and Germany.

5. **The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

The meeting by the prime minister, the call and development of the health congress where he calls for them to come and work in Albania.



### BELGIUM

1. **The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

We don't have exact figures, but various studies (2021) reveal that two out of ten nursing students do not plan to work in the healthcare sector in the future.

2. **The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

The same studies show that 50% of nursing students are at risk of academic burn-out. This increases on the one hand (1) the risk of stopping their studies (45% of students plan to stop their studies, according to the same study), and on the other hand (2) the orientation towards sectors other than healthcare after graduation. Not all causes are attributable to the Covid 19 pandemic,

but also to academic and private life conditions: having a child, having a certificate training level, and having a student job and factors related to the COVID- 19 outbreak, including: not having sufficient PPE for COVID- 19, working overtime during the last internship, (6) having an increased workload during the pandemic (OR, being a proven carrier of SARS-CoV- 2 , being a possible carrier of SARS-CoV-2) and having a loved one who has died since the start of the pandemic.

**3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

There are no successful strategies currently being implemented by the government. The government is attempting to alleviate the shortage of nursing staff through "nursing reform", which consists mainly of delegating nursing acts to non-nursing staff. This increases the sense of devaluation of nursing studies and practice.

**4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

Belgium needs 20,000 more nurses. Belgium has enough graduates. In 2018, Federal Public Health Service counted 215,000 qualified nurses.

Of these, 59% work in the sector ("10% are active outside healthcare, 15% are inactive on Belgian territory and 15% are already retired". But today's untenable working conditions (heavy workload, staff not replaced) are driving nurses out of the profession. This shortage is leading to the closure of hospital beds (sometimes by entire departments). There is less room for patients, and more work for the nurses who remain.

As far as students are concerned, the elements that could help keep them in school are: Specific measures to reduce the workload of training programmes, including lowering the number of internship hours, could help in this regard. Other improvements can also be proposed. For example, it would be appropriate to make a place for productive teaching environments and techniques (Panda et al., 2021), such as health simulation (Sullivan et al., 2019) and clinical debriefing (Servotte et al., 2020). Programmes could also optimise the pedagogical support of students, in particular by improving working conditions and increasing human resources (clinical staff and instructor support) in the field.

**5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

As far as nurses are concerned, the AUVB-UGIB has proposed an attractiveness plan for the profession in 2022 and has published and informed politicians through our Memorandum 2024 of the structural points to be put in place for the period 2024 -2029. We continue to monitor the situation closely.

**References:**

- nursing\_open\_-\_2022\_-\_baudewyns\_-\_prevalence\_and\_factors\_associated\_with\_academic\_burnout\_risk\_among\_nursing\_and\_midwifery.pdf (sciensano.be)
- Les soignantes, trois ans après les applaudissements | Master en journalisme – ULB
- Maha\_Master-2023\_FR-Presse.pdf (belfius.be)



## BULGARIA

**1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

In Bulgaria, about 20% of the newly registered nurses leave the profession. Some of them go abroad, but they don't work as nurses. Usually, they work as health assistants in patients' homes and when they feel comfortable with the language, they apply for professional recognition of their qualification. It usually takes 3 to 5 years.

**2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

The main reasons that newly registered nurses are not practicing after graduation are well known – very low salaries, bad image of the profession, because of the quickly happening political and societal changes, great overstuffing, lack of nursing standards, a gap, between the young and the elderly nurses, the middle age of nurses in Bulgaria is 55, and the young nurses don't feel comfortable. In order to keep the healthcare system working, nurses have to work on 2 or 3 places. Of course, they agree with this because of the better payment, but the quality of care is not good enough. At the same time, some big trade chains propose very good salaries and good qualified young nurses prefer to go there, where the working hours are definite, without responsibility for human life. Nurses in Bulgaria are not visible in the society, because they are usually working in the hospitals. The community nurses' services are not developed. It took 10 years for BAHPN to manage to organise changing the health legislation, so that nurses and midwives may open their autonomous practices in the community. The problem is that the patient has to pay for the services from his pocket. The National Health Insurance Fund doesn't pay for that. From 2021 till now 47 nurses' and midwives' practices have been settled and in 2022 they have been taking care for more than 21000 patients as a private entity.

**3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

In some private hospitals, the managers are trying to attract nurses with better salaries and possibilities to attend different courses and activities in connection of CPD.

**4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

Low salaries, bad working conditions, risk of violence at work, ingratitude, and a lot of possibilities to work somewhere else for better payment.

**5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

Unfortunately, no such strategies.



## CZECH REPUBLIC

- 1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

There is mandatory to update statistical data by each nursing school about leaving nurses after finishing exams but unfortunately not all schools and universities provide these data, so we are not sure whether we get appropriate data. Also, these data are hardly to be obtained for single person without access permission. We can report this information just as per our experience from different hospitals and units right now. As per one accessible report from 2023 there were plus 44 nurses and midwives from 2021 to 2022. It does not reflect newly graduated nurses and we do not have number of leaving nurses. No chamber for nurses no data.

- 2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

Upon discussion in our NNA there are many reasons such as low salary, problem with competencies, responsibilities, high stress level, not enough nurses for high number of patient, new nurses do not want to work shifts and they prefer morning working hours or part time.

- 3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

No strategies in place right now on national level.

- 4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

Too many responsibilities, low salaries, overtime work, low prestige of the job.

- 5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

No strategies in place



## CYPRUS

- 1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

1. Rate around 1-2% leaving the profession
2. Rate around 6-7% not practicing nursing

- 2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

1. Nurses are working as freelancers in community nursing or work at doctor's offices because of the more favourable working hours instead of the working hours in hospital settings.
2. Nurses work in any other profession due to better working conditions and better salaries.

### 3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.

The Nursing Services Directory of the Ministry of Health in cooperation with the Cyprus Nurses and Midwives Association and the Universities commenced strategies involving the Ministry of Education for attracting more people into the nursing schools of the universities, targeting basic secondary education pupils and schools. These strategies included:

1. Informing school counselors about nursing profession and its advantages in comparison to other professions and mainly the immediate employment with good salaries.
2. Power Point Presentations and speeches about the Nursing Profession are done in secondary education schools to pupils and teachers.
3. Power Point Presentations and speeches about the Nursing Profession are done at Events that the Ministry of Education and other educational stakeholders organise for the higher-level education in Cyprus towards secondary education pupils and their parents.
4. Film making about the valuable offer of Nurses and Midwives as professionals from birth till death.
5. Finding ways of supporting students of the Nursing University programmes to complete their studies with less economic burden for them and their families.

### 4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.

1. In Cyprus newly registered nurses usually are leaving from public hospitals to private hospitals or from private hospitals to public hospitals due to working conditions or for a higher salary.
2. Newly registered nurses are leaving the profession due to the working conditions and for the money in other professions.

### 5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession

In Cyprus the main problem is that not enough pupils are entering Nursing studies anymore. Therefore, the strategy focuses at the moment on attracting new people getting into Nursing education and not preventing the only few nurses from leaving the profession.



## DENMARK

### 1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.

The EFN Members are asked to **report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

[Press release from Ministry of Higher Education and Science](#) from 15th March 2024 shows an increase in the drop out in all the welfare educations. For the nursing education, 18% drop out the first year and 27% after 4 years.

[HBS Economics report from 2022](#) shows:

- ✓ In 2021 9% of the Danish nurses are employed outside the profession.
- ✓ An increasing development of nurses is leaving the profession from 2013 until 2021. Nurses with 1-year seniority: 2013 0.7% and in 2021 1.4%. Nurses with 3 years seniority: 2013 1.6% and in 2021 2.7%. Nurses with 3- and 5-years seniority have the highest percentage of leaving the profession.
- ✓ Newly educated nurses are leaving the public health sector earlier – Nurses with 3 years seniority in 2013 5% left and in 2021 9% left the public health sector (primarily to the private sector - still as a nurse but with a higher salary)

DNO survey from 2022 among nurses with up to 2 years seniority shows that 9% are not expecting to be working as a nurse in 3 years.

## **2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

[Ph.d Vibeke Røn Noer](#), Head of Research, at VIA University College, has researched nursing students and newly registered nurses' turnover intentions, transitions, and work-life strategies. Some highlights from her research:

- ✓ Every fourth newly registered nurse doubts whether they will be in the profession in 5 years.
- ✓ The newly registered nurses don't want to leave the profession but rather the framework and conditions within which the profession is practised.
- ✓ They have an ideal of providing nursing in a safe, human and caring way which they don't see as feasible in practice – they are afraid of the consequences for the patients but also for themselves (mental health)

If we look at the nursing students – we have the following data from DNO surveys from 2022 and 2023:

- ✓ 46% of the nursing students in the last semester of their education report that they have considered dropping out during their education. The main reasons are factors related to the working life as a nurse or experiences from their latest clinical training.
- ✓ Considerations to not practise as a nurse can be linked to experiences in the clinical training like being used as an extra workforce without a focus on learning or not getting sufficient support and mentoring.
- ✓ 9 in 10 nurses with 2 years seniority don't think their salary matches the responsibility and work pressure.

## **3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

We have research showing that considerations to not practise as a nurse can be linked to experiences during the education, especially the clinical training. Thus, we need to invest in an education of high quality and with a specific focus on the quality of the clinical training. A need to focus on the transition from student to registered nurse (see the answer below to successful strategies to prevent new nurses from leaving)

#### **4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

In 2023, DNO in cooperation with employer representatives conducted a questionnaire survey among nurses who have left the healthcare system. The survey shows that the younger nurses aged 25-35 years old declare the main reasons to be:

1. Working conditions like salary and working time (82%)
2. Working environments like stress and workload (78%)
3. Work-life balance (63%)

A survey from 2023 shows, that the psychosocial working environment of the newly registered nurses is worse than that of other nurses, for example, they experience:

- to a lesser extent that the work can be carried out to a quality that they are satisfied with
- to a lesser extent, it is possible to solve the tasks at a professional and safe level
- More often, it is necessary to work very quickly
- More often, the pace is so high that it affects the quality of the work
- Going home more often with an experience of professional inadequacy
- More often being stressed due to work and having sick leave due to work-related stress

#### **5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

The research tells us that the right strategy is to initiate initiatives at multiple levels like:

- ✓ Strengthen nursing education (especially clinical training)
- ✓ Initiatives that strengthen the transition from student to nurse – avoiding practice shock (like mandatory onboarding/introduction)
- ✓ Improving salary and working conditions for nurses
- ✓ Ensuring career paths

A DNO survey from 2023 shows the most important factors influencing retention of nurses:

1. Greater financial gain (64%)
2. Better working environment (47%)
3. Better opportunity for CPD (28%)

All these factors have been important for DNO in collective bargaining for several years.

#### Introduction/onboarding must be mandatory

In 2021, we succeeded with a collective agreement guaranteeing all newly graduated nurses employed in the hospitals, the right to an introductory course. DNO and the employer agreed that a good transition between student life and working life is crucial to ensure a good start in working life and to retain the nurses at the workplace and in the profession. The purpose is to contribute to the recruitment and retention of new nurses, increase their job satisfaction and ensure high quality for the patients.

The concrete content of the introductory courses is determined locally but follows 6 principles like the newly qualified nurse must have an experienced nurse as a mentor.

A good example is Horsens Hospital. They have for several years focused on onboarding and introduction of newly educated nurses. They have introductory positions between 1-2 years, where the new nurse is employed in a department/speciality. They work as a nurse but are also



offered different elements to ensure a good onboarding like a mentor, supervision, participation in simulation and exchange to other departments.

Higher salary is key according to surveys

DNO has through tripartite negotiations and collective bargaining in 2024 succeeded with the following proposal (awaiting the members' voting):

Newly educated nurse pay rise at 9.4% by 2026 + allowance if more than 300 hours shift work

Nurses with 4 years of seniority pay rise at 13.8% by 2026 + allowance if more than 300 hours shift work.



## ESTONIA

1. **The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

Estonia does not collect such information. We know that people leave after 3-5 years after graduation. This is rather subjective feedback from employers.

2. **The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

After graduation they go to health care, more precisely, they already work there before graduation as nurse assistants.

3. **The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

In Estonia, they try to direct nurses to work in different regions with a one-time fee. Mainly, such a one-off fee is paid by local governments or, in some rare cases, to the employer. The goal is that the employee chooses them and works for them for a certain period of time.

Young nurses see the possibility of further education and specialisation as a career opportunity. To this end, two Estonian higher education institutions offer special APN curricula.

In addition, several major hospitals have clearly stated that a career option is to aspire to the position of nursing manager even after completing a specialisation or a Master's degree in another curriculum.

4. **The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

**Low salary.** A decent service, which allows you to support your family, can only be earned with a lot of overtime

**Too Intense workload – too many patients per nurse.** The workload does not allow young nurses to provide the kind of nursing care they have been taught at school, an ethical conflict arises within them, and they give up because they are not willing to provide low-quality nursing care.

**Poor organisation culture.** A toxic work environment that may be caused by a generation gap; lack of well-trained supervisors in the hospital and, as a result, few well-trained newly registered nurses who break under pressure and leave. Our system continues to have hierarchical

management at certain employers, so young people feel that their ideas and feedback are not welcome.

**5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

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## FINLAND

**1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

The turnover from 2020 to 2021 amounted to a total of 7595 nurses, of whom 44 percent (3359 individuals) left the nursing profession. Naturally, turnover also occurred due to retirement and other reasons. However, career change is the primary reason for annual turnover in the nursing profession. Out of the 3243 career changers under the age of 61 (2020->2021), just over a third (35%) were aged 31–40. Among them, 5.5 percent were under 25 years old, and 16 percent were 51–60 years old. Departures from the nursing profession occurred at all ages, but the shift was predominantly towards younger age groups. It is worth noting that career change can also be temporary, and some nurses still remain in social and healthcare positions.

**2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

The Finnish Institute of Occupational Health conducts regular "How are you?" surveys for social and healthcare professionals.

- ☞ It has been revealed that young professionals find their work meaningful.
- ☞ Those under 30 perceive their work as more meaningful than older colleagues (72% find their work meaningful among those under 30).
- ☞ The daily grind of work is taxing: managing workload and tasks is challenging, encountering customer violence and ethically difficult situations is frequent.
- ☞ Rarely do individuals perceive having an impact on workplace changes.
- ☞ Therefore, work proves to be truly burdensome, with only 32% of young professionals recovering well from the strains of the workday. The situation is challenging for well-being.
- ☞ Only 37% of workers under 30 believe they will continue working until retirement age.

**3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

Finnish Institute of Occupational Health & National Institute for Health and Welfare: Good Pull Action Model for Elderly Services:

- ☞ Solutions to the situation are provided by the joint project of the Finnish Institute of Occupational Health and the National Institute for Health and Welfare, ensuring the availability of staff and attractiveness of the field in elderly services (Good Pull).
- ☞ The project aims to develop a model for elderly services and the entire social and healthcare sector, focusing on addressing ethical stress in work, involving staff, coaching leadership, and managing staff's own career paths.

- ☞ Development work is conducted in collaboration with social and healthcare organisations and universities of applied sciences, utilising the results of the "How are you?" survey.
- ☞ The Good Pull action model offers many concrete solutions to the situation, but additional measures are also required.

**4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

See question 2

**5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

See question 3



### FRANCE

**1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

France publishes very few studies. What we find are assertions made by organizations that are not based on any conclusive data.

We're dealing with a lack of data: there are no real figures on the length of nursing careers. Contacted by ActuSoins (French nursing media created by nurses: <https://www.actusoins.com/>), the French National Order of Nurses (ONI) admitted that it had no such statistics. The few data available are relatively old, or do not benefit from sufficient hindsight.

It is therefore impossible in France to indicate the percentage of newly qualified nurses who leave the profession or do not practice nursing after graduation.

I have only found two solid recent studies published by the Ministry of Health's Directorate of Research, Studies, Evaluation and Statistics (DREES).

The first dates from January 2019 and states, "Nearly three years after training, 96% of nurses are in employment". This means that only 4% of new graduates are not practicing after three years (and not one year as requested).

Consider that the Covid-19 pandemic had a significant impact on the nursing profession, undoubtedly calling these figures into question.

The second, more recent, report, dated August 24 2023, states that almost one in two hospital nurses leaves the hospital or changes profession after a ten-year career. It analyzes the career paths of nurses who began their careers between 1989 and 2019.

The study tracks the proportion of hospital nurses still in the profession as their career progresses, and whether they work in the hospital, as an employee in another sector, or as a self-employed nurse.

Fall in the proportion of nurses still working in hospitals after 10 years

The proportion of nurses still working in hospitals is lower among those who began working in the late 2000s (50%) than among those who entered the profession in the early 1990s (60%).

Over the period studied, after ten years in the profession, 71% of nurses are still employed:

- 54% of hospital nurses are still employed by the hospital;

- 11% are nurses employed by another employer;
- 7% work in the hospital but have changed profession;
- 7% have another profession in another sector.

Of the 29% who are no longer exclusively salaried:

- 10% work exclusively as self-employed nurses;
- 2% are self-employed nurses who also hold salaried jobs;
- 3% are exclusively self-employed in another profession;
- 2% are both self-employed in another profession and in salaried employment;
- 11% are unemployed.

An article in ActuSoins, although dated February 2021, sums up the French situation quite well:

There are rumours that 30% of caregivers give up and change professions within five years of graduating. There are also rumours that the average career span for a nurse is 8 years. These figures are inaccurate, according to various studies compiled by the Carif-Oref (center animation ressources d'information sur la formation-Observatoire régional emploi formation) d'Ile-de-France, which has published a report (1) on career lengths for nurses in Ile-de-France (also taking into account and mentioning national data). These data are also far from reflecting reality. Because the difference between the desire to change professions or the expression of a feeling of unease, and actually changing professions is significant, notes the study, which reviews a series of reports from different organizations. Among the studies cited by Carif-Oref: those of the DARES (Direction de l'animation de la recherche, des études et des statistiques) over the period 1998-2003, showed that nurses and midwives were still in employment after 5 years, 97% of them still in the same profession.

Early career: 2% "loss" in seven years

In 2008, a Drees study (4) looked at the first seven years of nurses' careers. A Cereq survey, on which this study was based, concerns only graduates of initial training courses.

"Among holders of a state nursing diploma obtained in 1998, 98% were working as nurses seven years later", says the report, which is admittedly rather dated.

17.5 to 21.5 years for nurses, excluding temporary stoppages

At national level, career lengths would be between 14 and 18 years for orderlies and between 17.5 and 21.5 years for nurses, estimates Corif-Oref, based on its own estimates and other reports (CNRACL data in particular).

These figures do not take into account temporary stoppages in the activity of orderly or nurse (long-term sick leave, secondment, etc.), which are estimated at 8% of the time for nurses and 2% of the time for orderlies, i.e. "a duration actually spent in the nursing post of between 10.5 and 14.5 years for nurses and between 11 and 15 years for orderlies" who left the region or the profession between 2011 and 2016.

## **2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

There are a number of claims in France that may explain the main reasons why newly qualified nurses do not practice their profession after graduation. But this is only a hypothesis. The Lisa think tank explains them clearly (<https://www.lisa-lab.org/focus-14-plaidoyer-profession-infirmi%C3%A8re>). To this end, beyond the somewhat complex regulatory considerations (definition of missions versus decree of acts), it is essential to clarify the responses of the public

authorities on the various subjects below, so that a consensus can finally be formed and the positions of the players aligned.

**Remuneration.** Nurses (we use the feminine to fit in with the majority...) run the hospital, but they also run homecare. The question of remuneration has not really been settled by the Ségur de la Santé, and there are major disparities in terms of salaries and living conditions between the public and private sectors, between different sectors (hospital, town, medico-social, etc.) and across the country. We therefore need to launch a new round of pay negotiations, this time linked to the issue of careers and working conditions. We also need to recognize, in hard cash, that liberal nurses are our primary resource in meeting the challenge of ageing at home.

**Workforce and careers.** With Covid, we finally realized the strain on human resources and drew the consequences by massively increasing training quotas, on the concerted initiative of the State and the Regions (which are responsible for this training, let's not forget). If this trend is to continue, it needs to be informed by a more precise and forward-looking analysis of needs, as recently undertaken by the Observatoire national de la démographie des professions de santé (ONDPS). Increasing the number of nurses must also be accompanied by a massive plan to develop professional promotion: we need to give nursing assistants new career prospects by significantly increasing access to the nursing profession, while preserving the quality of training and delivery of the skills the healthcare system needs. The diversity of profiles and the smooth functioning of the social ladder are the richness of the profession.

**The place of nurses in primary care.** The relationship between nursing and other professions is not necessarily straightforward. They are not, by construction, simple for any profession. The idea of the referral nurse recently emerged in the law. This should not remain a slogan. Nurses can play a greater role in prevention and in coordinating certain types of care, particularly for elderly patients at home. Nurses are very often involved in territorial professional health communities (CPTS): a sign of their central role in primary care. This role must be recognized - and valued - without taboos. Moreover, here as elsewhere, the challenge of digital technology and information sharing, in this case with nurses - and beyond, with all medical auxiliaries - is crucial to effective coordination.

**New professions and specialties.** The French Court of Auditors<sup>[1]</sup> recently analyzed the difficulties encountered by advanced practice nurses. Let's draw the consequences in terms of financing training, raising the status of nurses (both in the city and in hospitals), mobilizing healthcare establishments and... educating the players in the system. One of the main obstacles to reaping the full benefits of advanced practice is doctors' lack of information. Nursing specialties (the other main route to skills development) also need to be consistently upgraded. The same applies to local management.

**Working conditions.** Over and above remuneration and inadequate career prospects, working conditions are a powerful factor in staff attrition, which is particularly significant in certain establishments and regions. We need to tackle this issue head-on: it concerns night work, physical constraints, the violence sometimes directed at caregivers, psycho-social risks, housing and transport problems... We need a comprehensive plan that takes into account the profile of today's caregivers...

**Consolidating training.** Here, the first question to answer is simple: where does nursing fit into the hierarchy of professions? It has been a category A profession for many years now. This must be reflected in the way in which training is structured, on a scientific basis (with close links between institutes and universities), assessment, graduation and students' rights. Yet the lingering effects of the past are still strong. Employers must understand that aligning this training with higher education standards is part of the attractiveness of the profession, which in no way detracts from the professionalizing nature of the training and the need, as we have said, to encourage career

advancement. Finally, to be attractive, training must conform to best practice in terms of the use of digital technology and simulation. Hence the importance, on this point as on others, of a fruitful partnership with the Regions.

**3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

A plan to make the profession more attractive is proposed, based on the following objectives:

- Objective 1: Consolidate tools and data
- Objective 2: Secure career paths
- Objective 3: Diversify career paths
- Objective 4 : Upgrade skills and training content
- Objective 5 : Enhance visibility and (re)knowledge of the profession

To date, apart from the overhaul of the reference framework of activities and skills, which is currently being finalized, with the revision of studies that this entails, nothing has really been decided.

**4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

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**5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

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### GERMANY

**1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

Such a number is not known for the German health system. There would have to be a statistical survey that provides for longitudinal monitoring. The authorities have not set this up. The official reporting system is based on samples. The annually reported data is requested from employers (e.g. hospital providers or providers of nursing facilities).

In a more recent development, monitoring of training capacities and training trajectories has been carried out since 2020, in conjunction with the Nursing Professions Act. However, no data is collected on the intent to leave the profession after graduation (see <https://www.bibb.de/dienst/publikationen/de/19518> in German).

It is not the case that there is no data on the intent to leave the job/the profession in the nursing professions in Germany. These are based on convenience samples from (nursing) studies, almost self-reported.

Certain key facts have existed for a long time and dominate the myth-making of political debate. In 1989, the Dornier study came to the conclusion that nurses leave the profession after 6 years (3 years of vocational training and 3 years on the job) on average. This was a classic measurement



error, because the question was not about quitting the job, but rather about leaving the employer. But the myth was born: nurses only stay in the profession for six years.

In 1998, a study provided a new figure from the area of geriatric care. Here, the professional stay was between four and seven years after training. There were a number of methodological flaws, but they did not change the myth, nurses will quit the profession earlier than any other profession.

The first reasonable longitudinal study with a stratified sample was the European NEXT study 2001- 2005. For Germany, the average length of employment was seven to 14 years. It was shown that there are always interruptions in career paths (child leave, LLL, family breaks). This also shows that more than half of those surveyed (n=6,500 for Germany) stay in their job for 14 years or longer.

The latest study regarding newly registered nurses leaving the profession or not practicing nursing with a convenience sample, which has received much attention in Germany, was published by a consortium at the Bremen Chamber of Employees in 2022. The survey took place in autumn 2021. The sample includes 12,684 evaluable responses Part-time nursing staff and nursing staff who have left the nursing profession, both from the nursing sectors hospital care and nursing sectors Long-term care. The sample is self-selective and therefore not representative despite its size. However, if respondents are similar in important characteristics to the population of (part-time) nursing staff in Germany, plausible statements can be made that go beyond the sample (see – only in German - Jennie Aufferberg, Denise Becka, Michaela Evans, Nico Kokott, Sergej Schleicher, Esther Braun (2022) “I’ll take care again if...” – Potential analysis for returning to work and increase in working hours nursing professionals A cooperation project of the Chamber of Employees Bremen, the Institute of Work and Technology Gelsenkirchen and the Saarland Chamber of Labor <https://www.arbeitskammer.de/studie-ich-pflege-wieder-wenn.html>).

The study has received so much attention because the potential analysis conservatively and maximally estimates how much workforce there would be in Germany if the nurses stayed in the job or increased the part-time contracts (in Germany over 60% work part-time because the job is unbearable full-time).

Some quotes from the study - thanks to the web-based translators:

*To calculate the nursing potential of nursing staff who have left, the number of all nursing staff was first taken into account nursing staff who left are estimated based on billing data from BARMER's statutory health insurance. Detailed methodological information on this can be found in the long version of this report. According to the projection based on the BARMER data, there was a shortage as of December 31, 2020 1.275 million former professional nurses are no longer working as nursing staff. Included around 372,000 are geriatric nursing specialists and 492,000 are nursing specialists.*

Estimate of the population of retired nurses, based on a Extrapolation of GKV routine data:

	Altenpflege- fachkräfte	Altenpflege- hilfskräfte	Krankenpflege- fachkräfte	Krankenpflege- hilfskräfte	Fachkräfte gesamt	Hilfskräfte gesamt	Fach- und Hilfskräfte gesamt
2020*	372.065	169.509	491.901	241.482	863.966	410.991	1.274.957

Assuming that the willingness to return to work determined in this study applies to everyone can be transferred to nursing staff who have left, this results in a potential nursing workforce of around 152,000 to 335,000 full-time equivalents in the field of geriatric care. For nursing in the hospitals sector results There is a potential nursing workforce of around 111,000 to 248,000 full-time

equivalents. In total with the return of nursing staff who have left the workforce, between around **263,000 and up to 583,000 full-time equivalents** would be available to provide good care and to relieve the burden on existing nursing staff. Detailed methodological limitations can be found in the long version of this report.

To estimate the potential of skilled workers, it is also helpful to take into account the age structure of the nursing staff who have left the workforce. This shows that retired geriatric nursing professionals are on average 47 years old and could theoretically work in nursing for almost 18 years until retirement. Nursing professionals who have left are on average 46 years old and could theoretically still be employed. Worked in nursing for almost 19 years. The age structure of the estimated population of skilled workers on which the potential calculations are based is comparable to the age structure of the sample of nursing staff who have left in this survey.

Age structure of the estimated population of nursing staff leaving the profession

	Altenpflege- fachkräfte	Altenpflege- hilfskräfte	Krankenpflege- fachkräfte	Krankenpflege- hilfskräfte	Summe
unter 20	0,2 %	1,6 %	0,5 %	1,6 %	0,8 %
20–29	5,2 %	32,7 %	11,2 %	27,5 %	15,4 %
30–39	24,6 %	18,9 %	20,4 %	23,6 %	22,0 %
40–49	22,5 %	15,8 %	20,3 %	16,4 %	19,6 %
50–59	30,3 %	20,7 %	30,7 %	20,1 %	27,3 %
60–64	17,2 %	10,4 %	16,9 %	10,8 %	15,0 %
ab 65	0,0 %	0,0 %	0,0 %	0,0 %	0,0 %
Summe	100 %	100 %	100 %	100 %	100 %
Mittelwert	47,18	39,6	46,41	40,15	44,54
Standardabweichung	11,32	14,01	12,32	13,61	12,94
Durchschnittlich verbleibende Erwerbsjahre zur Rente	17,82	25,4	18,59	24,85	21,67

Quelle: Berechnungen des SOCIUM aus GKV-Routinedaten der BARMER.

Coming back to the study findings: The study participants were asked, among other things, what needs to be improved about the working conditions so that they would return or increase the hours. **The table next page** shows a summary of the ranking of working conditions, that have to be improved, a few dozen items were available for selection. This ranking also confirms findings from other studies. Scarce people left within the **first five years after training 25 percent of nursing staff leave** their job (Wiethölter 2012 ). The main reasons are high time pressure and too little Personnel, poor work organization and falling behind your own professional skills demands (Kühnel et al. 2020). The high workloads are also a reason why (Becka/Evans/Öz 2016) that almost two thirds of the Nursing staff in long-term care work part-time, as do almost half of nursing staff in Hospital nursing service.

The ranking provides information on the type of relief- and skilled-workers-offensive that needs to take place and should address: appropriate staffing (needs-based), reliable working hours, appreciative leadership, collegiality and better pay.

A model program in Bremen was launched a year ago (May 2023) that implements the study results in an applicable way.



*Table 4: The ten most important working conditions for returning or increasing hours*

	Working conditions	subject areas	important/ quite important	n
1	Fair treatment among colleagues	Organization and leadership	97.4%	6,654
2	Superiors who are appreciative and are respectful	Organization and leadership	96.5%	6,655
3	Appropriate staffing,	professional self-image and recognition	95.1%	7,707
4	Supervisors who are sensitive to my Workload	organization and leadership	94.4%	6,644
5	Not having to work understaffed	Professional self-image and recognition	92.8%	7,741
6	More time for human attention	Professional self-image and recognition	92.7%	7,730
7	Simplified documentation	organization and management	91.0%	6,642
8	Mandatory rosters	Compatibility of work and Personal life	89.1%	7,392
9	Eye level with the medical profession	Organization and leadership	89.1%	6,612
10	Further training = higher salary	Further training and career	88.9%	6,344

Source: Own calculations based on the nationwide survey "I will provide care again if...", those who have left the profession n = 6,612–7,707.

Ranking of the most important working conditions for re-entry and Increase in hours (basis: results of the Bremen pilot study)

Rank	Working Conditions	Medium Rank
1	More time for good care through more staff	2.15
2	Higher pay	3.07
2	Reliable working hours	3.32
3	More appreciation from superiors	4.60
3	Collective bargaining agreement	5.05
4	Professional advancement opportunities	5.68
4	Process experiences psychologically during working hours can	5.97
4	Company interest representation/participation	6.15

W = 0.37, p < 0.001

Source: Own calculations based on the nationwide survey "I will provide care again if...", all respondents n = 5,204.

2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.  
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3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.  
-
4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.  
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5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession

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## ICELAND

1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.

In Iceland, while there are no precise data, the latest report from 2-3 years ago says that every 4-5<sup>th</sup> registered nurse leaves the profession within 5 years from graduation, and to support this, there is nothing else which would say otherwise. The percentage was around 23%, therefore I say every 4-5<sup>th</sup>.

2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.

The main reasons are the increased workload and strain at work, the wages and insufficient working environment.

3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.

So far we wouldn't say that we had any successful strategies that are really working. Some hospitals/institutions have been raising the institutional agreements and therefore in internal competition between them regarding hiring nurses, but it is such a minimum that it doesn't really statistically count. It is always more of a question about the management and leadership and the working environment, more at each unit/institution that is getting the nurses to come – if they can work for the salaries offered.

4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.

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5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession.

These weeks we are sitting at the negotiating table with the State, City and municipalities and its going very slow. Our collective agreements expired April 1st and the nurses getting very impatient, understandably. This will take some more weeks, that's for sure.



## IRELAND

### 1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.

In Ireland, the demand for nursing/midwifery education has been largely robust, with an oversubscription of student nursing/midwifery places. Over the period 2014 to 2021, first year nursing and midwifery intake places in Irish HEIs grew from 1,570 to 2,032 – an increase of almost 30% (Caulfield, Hayes and O'Connor, 2022). In 2024, over 3,750 students put nursing and midwifery as their first choice on their college application form. However, there is no consistent data publicly available on the number of newly registered nurses leaving the profession or not practicing nursing after graduation.

In response to this lack of data on attrition and employment, the Irish Nurses and Midwives Organisation (INMO) began surveying the final year (Interns) to gauge their plans post registration. According to survey results in 2023, 73% of nursing and midwifery graduates were considering emigrating when they qualified. When prompted to provide further information to support their answer, interns cited factors such as a lack of adequate breaks, unmanageable pressure, exhaustion, and a lack of safe staff-to-patient ratios across the Irish health service among the reasons for considering leaving Ireland or moving to the private healthcare sector. (INMO, 2023)

There is a formal mechanism for reporting the progress of nursing students through their programmes which also captures attrition. The Higher Education Institutes (HEIs) submit a report containing details regarding undergraduate students' progress/ non-progress through the various nursing programmes and years to NMBI annually. However, this would not be the number of newly registered nurses, but rather those who left their undergraduate nursing degree programme before completion. The Higher Education Authority (HEA) (2024) published a report on the progression rates of students in Irish universities, looking at the progression from first to second year. It found a 12% non-progression rate in health and welfare related courses.

The HEA (HEA, 2017) also investigated where the 2015 nursing graduates ended up nine months after graduation and found that 89% of graduates were working as nurses in Ireland.

Since the first BSc (Nursing) graduates completed their degree in 2006, the Health Service Executive (HSE), through the Office for Nursing and Midwifery Services Director (OMNSD), produced yearly reports detailing where graduates were post-registration. The last report released in 2011 presented the findings from a national survey entitled: Survey of 2010 Nursing and Midwifery Graduates; Where are they now? The survey was conducted among graduates who had completed a Bachelor of Science (BSc) undergraduate education programme in general/psychiatric/ intellectual disability nursing or midwifery in 2010. There have been no recent surveys conducted among nursing graduates by the OMNSD or the HSE.

The Nursing and Midwifery Board of Ireland (NMBI) hold data on new registrants. Its State of the Register Report (NMBI, 2023) listed 1,584 new Irish first time registrants. Further investigations of the Register (NMBI, 2023) details the breakdown by age group and show that in the age range 20-24 (n=2,249) 95.6% are practising. This then drops in the age range 25-29 (n=8,321) where just 92% are practising.

## **2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

It is important to understand the background of clinical placements of newly qualified nurses in Ireland. In their final and fourth year, students, working as interns, complete a 36-week placement in their training hospital, leading to graduation. Therefore, all newly qualified nurses have worked in the Irish public health system, with many experiencing the challenges of overcrowding, staff shortages and difficult working environments.

As mentioned above, the INMO runs an annual survey of nurse interns. Since it commenced in 2017, the survey respondents have indicated that many interns are considering moving to other careers, leaving the profession, or leaving Ireland on graduation. There are broadly four main reasons for this including pay, staffing levels and working conditions, learning environment and cost of living in Ireland.

### **Pay**

From the 2023 survey, 54% of respondents say increases in pay is the priority incentive to encourage them to stay in the Irish public health system. It was also noted that 57% of respondents had not been made aware of the salary for newly qualified nurses/midwives in Ireland.

### **Staffing Levels and Working Conditions**

The 2023 Intern survey found that 33% of respondents would be encouraged to stay in the Irish public health service if there were improved staffing levels and working conditions. This is not limited to newly qualified nurses as experienced nursing staff are leaving because they cannot face working in locations with inappropriate staffing in unsafe environments.

### **Learning Environment**

Newly qualified nurses are continually learning and require protected learning time, supportive colleagues and a working environment that will support their transition from novice to expert staff nurses. The 2023 Intern survey reported that 73% of respondents did not find adequate staffing levels in the workplace to support a positive learning environment. The current working environment is not conducive to learning, with many feeling near burnout, stressed, and overworked. One respondent stated, "By the time we reach internship, we are burnt out. If student nurses were treated better and appropriately remunerated for the work we did, we wouldn't be as frustrated with the profession by the time we are interns or newly qualified nurses."

Many reports about newly qualified nurses describe the lack of orientation and induction available to them when commencing their new role as qualified nurses. This is especially evident for those who continue to work in their training hospital. One respondent stated that they 'experienced the little support provided to interns never mind what was on offer for fully qualified nurses'. As newly qualified nurses, they need guidance and assistance and ideally, a structured graduate programme with realistic expectations to allow them to transition without 'transition shock'.

### **Cost of Living**

The cost of living is having a significant impact on where nurses/midwives decide to work in Ireland, if at all. Rental prices and the cost of housing in Dublin are driving nurses and other healthcare workers away from living and working in the capital, leading to staffing problems for the health service. In the 2023 survey, 39% of respondents were considering moving to a workplace closer to home due to the cost of living.

### **3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

The INMO recognises the crucial importance of recruiting and retaining student/new graduate nurses into the public health service and has campaigned on behalf of its members on a range of issues supporting this issue.

Due to the years of underfunding, understaffing, and under-resourcing in the public health service, it is difficult to identify clearly successful strategies undertaken by the Government to retain newly registered nurses. As a result of the moratorium on recruitment and promotions in the public service (effective from the 27 March 2009), changes occurred in the recruitment practices in hospitals between 2009 and 2011 (HSE HR Circular 010/2009), which made it much more difficult for newly registered graduates to obtain a permanent position which led to many newly registered nurses leaving.

#### **Pay and Allowances**

Following the 2019 strike, the INMO secured the amendment of salary scales to allow new graduates ascend the scale quicker on commencement of employment. Post registration they start on Point 1 of the scale (€33,943). After completing a further 16 weeks post internship they skip Point 2 on the scale and move to Point 3 (€36,683). Once they have completed a year on this scale point, they would be eligible to move to point 4 on their increment date and this would also mean that they could apply for the Enhanced Practice Contract. Point 1 of the Enhanced Practice salary scale is worth €40,827. Depending on work location, they may also be entitled to the medical and surgical ward allowance, worth €2,554 pa.

For student nurses, further supports were introduced in 2022 to enhance pay, conditions and encourage their retention. Recommendations included, that pay would be re-instated at 80% of first year staff nurse/midwife pay scale, for internship students and a range of other allowances including travel, accommodation and uniforms.

#### **Safe Staffing and Working Environments**

Ensuring safe nurse staffing and skill is central to the retention of newly graduated nurses. The Framework for Safe Staffing and Skill-Mix (Department of Health, 2018) was scientifically developed and underpinned by evidence to ensure appropriate nurse staffing and improve patient safety. The Framework has proven to improve quality of care, reduce burnout and increase job satisfaction amongst nurses. Unfortunately, it is currently not fully operationalised in all hospitals. To achieve optimal patient safety objectives, it must be fully funded and implemented across all relevant wards and departments. The Framework for Safe Nurse Staffing and Skill Mix in Adult Emergency Care Settings in Ireland (Department of Health, 2022) must also be fully implemented, and phase 3 of the Framework in long-term residential care and community settings must be fast-tracked.

### **4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

The reasons why newly registered nurses are leaving the profession are largely similar to the reasons why experienced nurses are leaving the profession. In Ireland, we have seen an increase in the intention to leave the profession since the pandemic. Surveys carried out in 2020 (INMO, 2020) on nurses and midwives during the pandemic showed that 61% of respondents stated that their experience of COVID-19 caused them to consider leaving the profession. This had increased to 68% in 2021. In the 2023 INMO Annual Survey, over 73% of respondents stated that they had considered leaving the profession. Of those that answered yes, 30% said that this was mainly due

to workplace stress with a further 24.5% stating they felt exhausted and a further 14.5% that they felt undervalued. Further analysis of respondents who stated they intended to leave the profession found that 34.8% had only worked in their current position between 1 and 5 years, which would include many of our newly registered graduates.

### **Pay**

Respondents in the INMO Annual Intern survey have been very clear over the years on what would be required to prevent them from leaving the profession or the country. From the 2023 survey, 54% of respondents say increases in pay are the priority incentive to encourage them to stay in the Irish public health system. It was also noted that 57% of respondents had not been made aware of the salary for newly qualified nurses/midwives in Ireland.

### **Staffing Levels and Working Conditions**

The 2023 Intern survey found that 33% of respondents would be encouraged to stay in the Irish public health service if there were improved staffing levels and working conditions. This is not limited to newly qualified nurses as experienced nursing staff are leaving because they cannot face working in locations with inappropriate staffing, in unsafe environments.

The INMO Annual Survey (2023) found that 84.8% of respondents stated current staffing levels and skill mix did not meet the required clinical and patient demand in their work area. Over 65% (65.8%) said they felt that patient safety was put at risk very often or always.

### **Cost of Living**

The cost of affordable housing is a key factor in retaining highly trained Irish nurses and midwives in the public system. Rental prices and the cost of housing in Dublin is driving nurses and other healthcare workers away from living and working in the capital, leading to staffing problems for the health service. In the 2023 survey, 39% of respondents were considering moving to a workplace closer to home due to the cost of living. Irish nurses and midwives and overseas nurses who have worked here for a number of years are now moving abroad to Sydney where they have safe staffing ratios underpinned by legislation; to the USA who are heavily targeting nurses and midwives working in Ireland and to the UK where many cities have a city weighting allowance to help with the cost of accommodation.

## **5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

The possible strategies that would prevent young people from leaving the profession are the same as those that will keep our newly registered nurses practicing in the profession in Ireland outlined above.

One key factor in retaining highly trained Irish nurses and midwives in the public health system is the cost of affordable housing. Therefore, when building new hospitals, the Government must consider land zoning for affordable housing for essential frontline workers.

Work life balance, work environment, health and safety and job satisfaction are also significant factors that affect nurse turnover. Although workplace stress and exhaustion are high on list for nurses' intention to leave, there are more complex intertwined reasons for leaving. Therefore, as part of a funded workforce plan, employers must employ robust strategies to address these challenges and retain valuable staff. Specifically, to retain newly registered nurses, it is essential to consider how the current environment can affect their intention to leave.



Ireland, like the rest of the world, is not immune from the global shortage of nurses and midwives. The INMO has continually emphasised the need for Government to embrace the critical importance of becoming self-reliant, ensuring an adequate number of nurses and midwives are available to the health service. The domestic production of nurses and midwives must be optimised to meet or surpass health population demand (WHO, 2020). Ensuring an adequate supply of nurses and midwives is essential against the background of the global shortage of nurses and midwives and is an internationally recognised ethical imperative.

In order to prevent young nurses from leaving the profession, it is essential that the health service has a funded workforce plan that includes robust recruitment and retention strategies. Such strategies must include appropriate pay and conditions of work.

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## ITALY

1. **The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

Data indicate that from 10-15 of nurses do not start to practice after graduations, but there is not an updated analysis. Only 75% of enrolled in a nursing program complete the university degree.

2. **The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

Low pay respect responsibility, difficult to adhere quality of care due shortage of nurse.

3. **The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

The Italian Government has no strategies in place.

4. **The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

Workplace violence (especially in emergency rooms).

5. **The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

Until now no strategies were adopted.



## LITHUANIA

1. **The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

No official data. According to unofficial data, there may be up to 20-30 percent of newly registered nurses who do not practice nursing after graduation

2. **The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

They do not work as nurses, because some of the graduates plan or work in the beauty industry, cosmetology, where they can work independently and organize their own work. the other half work in other jobs that are more desirable to them, not related to the nursing profession. Other reasons: heavy workloads, low wages, too little respect for the profession.



- 3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

The employer offers various extras for work and other benefits, such as a free parking place near the establishment, pays for a public transport ticket for a trip to work, offers free meals at the establishment. Employers also offer accommodation benefits in the regions to the employee, agree on work schedule agreed with employee.

- 4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

Too few personnel and, as a result, heavy workloads, physically difficult working conditions and insufficient respect for a professional, wages inadequate for hard work

- 5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

Seeking to reduce staff shortages, encouraging the government to train more nurses, promoting workplace mentoring. during the negotiations, the aim is to ensure a consistent annual salary increase for nurses, and the aim of the approved regulation of workloads.



### MALTA

- 1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

Leaving the profession is about 15 % while not practising nursing after graduation is about 20%.

- 2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

The reason why nurses are not practising is that are moving on to less stressful and better paid job or for family reasons due to the shifts which effect the family especially those nurses raising small children and that nurses are going back to the University to become Doctors.

- 3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

Malta had a collective agreement and the introduction of free child care centres and family friendly measures.

- 4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

Please see answer to Question 2.

- 5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

Please see answer to question 2.



## NETHERLANDS

### 1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.

Nurses two years after graduation:

Zorg en welzijn smal: gediplomeerden (bol-voltime / voltime) werkzaam als werknemer in zorg en welzijn smal, 2 jaar na diplomering, opleidingsrichting, 2010/'11 - 2019/'20

Studiejaar	Opleiding (voltime)	Gediplomeerden (aantal)	Werknemers in zorg en welzijn t+2 (%)
2019/'20	Totaal opleidingen zorg en welzijn (bol-voltime / voltime)	19 440	82
2019/'20	Verpleegkunde (hbo)	2 480	91
2019/'20	Verpleegkunde (mbo)	2 440	91
2019/'20	Verzorgende ig (mbo)	1 790	87

9% of the newly registered nurses leaving the profession within two years after graduation.

### 2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.

Reasons why new nurses are not practising nursing include:

- Lack of challenge: Some may seek further advancement in management or research roles.
- Lack of passion: A missing sense of passion for patient care can deter some from the profession.
- Perceived incompetence: Feeling unprepared for the challenges of nursing can lead to leaving the profession.
- Workload and job satisfaction: A heavy workload and work-life imbalance can reduce job satisfaction.
- Health conditions: Non-work-related health issues may prevent fulfilling job requirements.
- Sense of belonging: A negative work environment and poor colleague relationships can impact the decision to stay in the field.

### 3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.

Successful strategies to make nursing profession attractive include:

- Implementing transition programs that support newly graduated nurses in adapting to the workplace environment.
- Offering work schedules to help maintain a healthy work-life balance, which is highly valued by nursing professionals.
- Providing opportunities for professional development and career advancement to encourage growth within the nursing field. (Lifelong learning/developing.)

- Facilitating experiences with experienced nurses to build practical skills and organizational protocols. (Buddy-system.)
- Nursing schools play a role in preparing nursing students with the required knowledge and clinical experiences.

#### 4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.

Reasons for leaving the profession:

- Lack of challenge and opportunities for advancement in management or research roles.
- Absence of passion for patient care, leading to job dissatisfaction.
- Feeling of incompetence of nursing demands.
- Heavy workload resulting in work-life imbalance and stress.
- Health conditions and the need for work environment adjustments not being met.
- A sense of not belonging due to negative attitudes among colleagues.

#### 5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession

Successful strategies to prevent nurses from leaving the profession include:

- Implementing mentorship and support programs for newly graduated nurses.
- Providing continuous professional development to maintain engagement and job satisfaction.
- Ensuring staffing levels to prevent overload, burnout and work-life imbalance.
- Attention from managers to the needs of the individual employee.



### NORWAY

#### 1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.

The latest study available on the matter was carried out by Statistics Norway in 2022, investigating nurses graduated in 2015 (Statistics Norway, rep. 55/2022, tab. 3.8 ):

Nurses graduated in 2015	2 years on	4 years on	6 years on
Health care sector	90,7 %	88,9 %	87,5 %
Other sectors	4,2 %	5,0 %	6,9 %
Not employed	5,1 %	6,1 %	5,6 %
<i>Sum not employed in health care sector</i>	<i>9,3 %</i>	<i>11,1 %</i>	<i>12,5 %</i>

#### 2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.

As the table above shows, the percentage not being employed is slightly higher than the percentage working in other sectors. Among those not employed, staying at home with small children, emigration are the main reasons newly registered nurses are not practicing nursing after graduation (source: [Article by Statistics Norway, Aug. 8th, 2017](#)). Four to six years after graduation,

the better part of those not employed are doing further education (for instance to become midwives) (source: Same as previous & [Statistics Norway, rep. 55/2022](#)).

Please **also** see answers to question 4.

**3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

A project offering advice on how to attract nurses and nursing assistants to primary health care (municipality sector) focuses on mentoring programs, introduction programs, better tutoring systems during the practical part of the bachelor studies etc. The project receives some funding from the government and was a response to newly registered nurses preferring the hospital sector over primary health care sector.

The success rate is difficult to measure in numbers, but the participants are content. It does, however, require that employers prioritize such projects and the resources needed to carry it out. The project is a cooperation between The Norwegian Association of Local and Regional Authorities (KS), the three largest unions in the sector, and representatives from the education sector.

**4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

Professional, or peer, support and guidance is crucial for less experienced nurses to remain in the profession. In a survey among our members, 40 % answered that the training/studies not at all, or only to a small degree, had prepared them for the actual work.

In addition, we know that in general, the following factors play an important role when nurses leave the sector:

- High workload combined with little control over their work
- Gap between one's professional knowledge or standards, and actions available due to staffing or resources in general.
- Imbalance between needs and demands – work force insufficiency in numbers or qualifications or both.
- Strain of shift work
- Emotional strain
- Low wages

In a recent survey, we asked our members if they wanted to quit their job. 55 % of those wanting to leave the healthcare industry all together, said it was because of high workload or low wages.

**5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

Please see answers to question 3.



## POLAND

**1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

The situation of polish nurses in the labor market is very dynamic. In the last two years, the increase in nursing salaries has contributed to a reduction in the percentage of newly registered nurses not entering the profession. This is a positive sign suggesting that the attractiveness of the nursing profession may be growing. We hope that this trend is not just a temporary situation. It's worth noting that additional salary increases are planned starting from July 2024.

**2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

Newly registered nurses are looking for a job that have good employment conditions and satisfying salaries. The increase in wages has had a significant impact on the number of nurses returning to the profession. Nevertheless, the conditions of work (staff shortage, low level of finances of healthcare sector, poor level of management and lack of differentiation in professional duties based on acquired competencies, lack of support mechanism and tools to build resilience of nurses especially newly registered nurses who have high level of stress and lower resiliency than more experienced one.

**3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

Significant Increase in wages, campaigns promoting nursing as a profession. Nursing unions continue discussion with the government of continuous increase of wages in referring to qualification. The government express interest in collaborating with organisations working towards nursing development by establishing new academic centres for nurses in accordance with accreditation standards.

**4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

The main risk is change of interest (not nursing) due to unlimited access to free studying at universities in Poland. Working condition that are not attractive for young generation of nurses (high stress levels).

**5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

Financial strategies, promoting campaigns.



## SPAIN

**1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

In Spain we do not have exact data on the number of newly registered nurses who leave the profession and do not practice nursing after graduating. In Spain, nearly 10,000 nurses graduate annually, but not all of them register and practice in our country.

**2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

It is evident that we are still suffering the consequences of the COVID-19 Pandemic. During the pandemic, a survey of more than 20,000 Spanish nurses gave us worrying data since nearly 50% of those surveyed told us that at some point they had considered stopping practicing the nursing profession. Obviously there has not been a drop in the percentage of the profession, but it is worrying to know that a large number of nurses would be willing to leave the profession. Therefore, one of the main reasons has been the wear and tear caused by the pandemic. Other reasons are poor working conditions that include low salaries, shift work, lack of family conciliation, short-term contracts,... and a great lack of professional recognition.

**3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

Fortunately, in our country there is still great interest in studying Nursing at the University. According to data provided by the universities, there are approximately 3 applications for each nursing student position. In short, every year, thousands of young people cannot study nursing due to lack of places. From the General Nursing Council, we have been negotiating with the government to increase student places and we have managed to increase them by 15%, in most universities. We are also trying to get public and private administrations to improve working conditions to prevent nurses from leaving the profession or emigrating to other countries with more attractive contracts.

**4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

In addition to the reasons stated above, we believe that new graduates, when they begin to work in health institutions, suffer from the conditions described above and see that reality is a little different than what they thought. We believe that it is not a lack of interest in practicing nursing but a consequence of working conditions.

**5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

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## SWEDEN

**1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.**

Fewer than 3 percent of nurses under the age of 30 work outside health care. It is significantly more common for older employees to work outside of healthcare.

**2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.**

We have not conducted any survey for this group. But in addition to the same reasons that make nurses leave (see below), we can also see reasons such as parental leave or continued studies.

**3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

When our student organization asked students within the professions about their experiences from recent summer jobs (2023), they were also asked which factors they would rank as most important when they are looking for their first job after graduation. Of the eight selectable factors, the students made the following ranking:

1. Salary
2. The team or colleagues
3. The work tasks
4. Flexibility (referring to working hours, workplace, etc.)
5. Development opportunities in the workplace
6. Leadership
7. Organizational culture
8. The organization's values

Also see the importance of a “structured professional introduction” (below)

**4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

Nurses who left the profession entirely have given multiple reasons, e.g. legal and employer issues, stressful or poor working conditions, working life/home life and effort/reward imbalances, as well as external values and beliefs about nursing.

**5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

Vårdförbundet have suggested a “structured professional introduction” of 9-12 months (the structured professional introduction must be given in addition to the usual workplace introduction) including:

- Access to supervisors from the same unit for support in professional matters.
- Access to a mentor from another unit for the opportunity to raise problems from your own workplace.



- Supervised group meetings for reflection and exchange of experiences once a month together with other newcomers to the profession.
- Facilitated competency meetings based on different themes every two months, for example handling complex situations, prioritizing, and leading nursing care.



## UK

### 1. The EFN Members are asked to report on the percentage of newly registered nurses leaving the profession or not practicing nursing after graduation.

In terms of general trends of leaving nursing, an RCN report published in February 2023 revealed that tens of thousands of skilled and experienced nursing staff are leaving the profession, with many of those aged 21 to 50.<sup>5</sup> The report shows that between 2018 and 2022, nearly 43,000 people aged 21 to 50 left the Nursing and Midwifery Council (NMC) register. It also finds the number of nurses leaving the NMC register increased by 9% from 2020-21 on the previous year and increased by a further 3% in 2022. At the same time, recent UCAS figures highlight that there's not only a record number of experienced nurses leaving the NHS, but less joining the profession, leading to more vacancies in the future.<sup>6</sup>

The RCN's employment survey (RCN, 2021a)<sup>7</sup> of over 9,000 nursing professionals in the UK revealed that 57% of respondents were thinking about or actively planning to leave their jobs in nursing (up from 37% in 2019). The survey showed that respondents aged 18 to 44 were more likely to be thinking about leaving their jobs, or actively planning to leave.

Unfortunately, no data source in the UK reports on the percentage of newly registered nurses who leave the profession or do not practice nursing after graduation. The NMC data reports on the number of 'people' leaving the register grouped by length of time since the first registration. This includes midwives and nursing associates. However, as of September 2023, 93% of those on the register are nurses and dual registrants (nurse and midwife).

According to the latest NMC data (Sep 2023), in the UK, in the last 12 months to Sep 2023, 9.8% (2,627) of total leavers left the register five years after joining it—fairly soon after registration. This includes UK, EU-EEA and NON-EU/EEA nurses. The data shows that 5.7% of people trained in the UK left the NMC register 0-5 years after joining, compared to 4.2% in the 12 months to Sep 2021.<sup>8</sup>

### 2. The EFN Members are asked to report on the main reasons that newly registered nurses are not practicing nursing after graduation.

*"As a soon-to-be qualified nurse, I no longer want the career as it is. The reality feels as though I must sacrifice my own health and wellbeing, for a less than satisfactory wage, in order to do half the job I would like to. I see nurses crying, extremely stressed but wanting to do good and yet are not given the opportunity to. I feel deflated and at an all-time low within the career, with little to no hope for a better future." Student on placement in intensive care (England)*

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<sup>5</sup> [Valuing Nursing in the UK | Publications | Royal College of Nursing \(rcn.org.uk\)](#)

<sup>6</sup> [Fall in nursing degree applicants exposes professions recruitment crisis | News | Royal College of Nursing \(rcn.org.uk\)](#)

<sup>7</sup> The RCN employment survey 2021 received 9,577 responses from registered nurses, health care support workers, students and nursing associates working across all areas of health and social care.

<sup>8</sup> [Registration data reports - The Nursing and Midwifery Council \(nmc.org.uk\)](#)



Newly registered nurses may decide not to practice nursing after graduation for a number of reasons, including high levels of debt, poor pay and treatment of nurses in the NHS. We hold policy makers responsible for identifying and removing these barriers for nurses staying in the profession. We intend to conduct research into this through a survey of registered nursing students and nursing associates, within our membership, seeking to capture their experiences starting from the decision to start studying nursing, during their studies (including the risk of withdrawing from their courses) and concluding with their plans after graduation.

Current nursing higher education finance policy is inconsistent and ineffective in incentivising more people to choose nursing. In England, nursing students are currently required to self-fund their studies, and maintenance grants do not reflect the reality of costs of living. Before 2017 they received a bursary and nursing degree funding was provided by government via Health Education England (now part of NHS England).

Recent higher education finance reforms in England include lowering the repayment threshold to £25,000, extending the repayment period by ten years and removing real interest rates during and after study which will result in nurses, and all low to middle income graduates paying more, for longer. This could be one reason why newly registered nurses are not practicing nursing after graduation. Completing their degree leaves them with high levels of debt, and they often turn to other sectors for higher rates of pay, less stress and better work-life balance.

Continued below inflation pay rises and the UK government's failure to address concerns of adequate financial support has contributed to fewer going into the nursing profession after graduation. Paying nurses fairly and providing access to financial support for tuition fees will not only help with the growing cost of living for those choosing to begin the path to the profession but also make it more attractive to join. Nursing students in higher education should have access to adequate financial support for tuition and the cost of living – and fair pay for the work they do. Until this happens, this decline in interest in the profession is likely to continue.

### **3. The EFN Members are asked to report on successful strategies used in their countries to make nursing profession attractive for newly registered nurses to start practicing nursing profession.**

Governments across the UK have let the nursing profession down once again by offering and awarding inadequate pay awards. In parts of the UK where RCN members went on strike, they did so because of more than just pay. They were protesting against chronic staff shortages, long working hours, unsustainable workloads and limited opportunities for career progression. This has been met with a failure to deliver a substantial pay rise for nursing staff and the further erosion of the right of nursing staff to take part in lawful industrial action in Scotland, Wales and England. All nursing staff must receive the fair pay they deserve, with parity of terms and conditions across all parts of the profession.

Outside of pay, governments across the UK are not doing enough to make the nursing profession attractive for newly registered nurses once they have completed their graduation. A newly registered nurse has to navigate a steep learning curve, build confidence, adjust to workplace dynamics and manage stress. They need to know they will be supported with this through mentorship and opportunities for professional development and a good work-life balance, however the government isn't doing enough to provide this in the nursing profession and newly registered nurses are often looking elsewhere for this.

#### **4. The EFN Members are asked to report on the main reasons that newly registered nurses are leaving the profession.**

Reasons why newly qualified nurses leave the profession aren't currently captured by governments in the UK. We intend to survey our registered nursing students and nursing associates to capture their experiences and gain evidence to support the notion that many newly qualified nurses don't feel able to continue with the profession.

In general, the profile of nurses leaving the profession, and their reasons for leaving, is limited at UK level. The NMC register does not provide a breakdown of reasons for leaving by age, gender, ethnicity or country of training. Each year, the NMC invites all professionals who have left the register (including midwives, dual registrants and nursing associates), to complete a voluntary survey<sup>9</sup> asking for their reasons for leaving the profession. Data from the latest NMC leavers' survey shows that stress, poor mental health, negative workplace culture, the COVID-19 pandemic, poor pay and benefits, as well as concerns about not meeting revalidation requirements, were cited as reasons for leaving the profession.<sup>10</sup>

The RCN 2021 Employment survey shows that over half (53%) of respondents cite low levels of pay as one of the reasons for considering or planning to leave their current job.<sup>11</sup> Feeling undervalued generally was also another key reason.

In the RCN's 2020 'Building a better future for nursing' survey, 73% of respondents said higher pay would make them feel more valued.<sup>12</sup> Further reasons for considering leaving were insufficient staffing levels (50%) and the need for safe working conditions (45%).

A recent comprehensive review of the evidence on supporting nurses and midwives to deliver high quality care (King's Fund, 2020)<sup>13</sup> found the key drivers of nursing attrition to be: staff shortages resulting in pressures, workload and work schedules, pay, support during education and on entry into the nursing workforce, bullying, harassment and discrimination experienced in the workplace. The consequences of these experiences are early retirement, reduced ability, and intention to quit.

#### **5. The EFN Members are asked to report on successful strategies used in their countries to prevent newly registered nurses from leaving the profession**

Literature available identifies action that can be put into place to improve retention. A recently published synthesis of the academic literature established 10 domains influencing recruitment and retention of hospital nurses (Marafu et al., 2021). The paper highlights the major factors which included strong nursing leadership and management, access to education and career advancement opportunities, conducive organisational factors, such as improved working conditions, adequate staffing levels, good support from peers and health professionals, and positive working terms and conditions including good salaries. The RCN is trying to tackle this issue also through initiatives focused on safe staffing and tackling the issue of corridor care, which refers to providing care in hospital corridors due to a shortage of staff and beds. Additionally, the RCN's

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<sup>9</sup> The NMC contacted via email 21,035 people to take part in the leaver's survey 2022 and received 6,458 responses.

<sup>10</sup> <http://www.nmc.org.uk/globalassets/sitedocuments/data-reports/march-2022/leavers-survey-2022.pdf>

<sup>11</sup> Royal College of Nursing (2021) *Employment Survey 2021: Workforce diversity and employment experiences*. London: RCN. Available at <https://www.rcn.org.uk/Professional-Development/publications/employment-survey-report-2021-uk-pub-010-216>.

<sup>12</sup> Royal College of Nursing (2020). *Building a better future: RCN members have their say*. Available at: <https://www.rcn.org.uk/Professional-Development/publications/rcn-building-a-better-future-covid-pub-009366>.

<sup>13</sup> The King's Fund (2020). *The courage of compassion: Supporting nurses and midwives to deliver high-quality care*. Available at: <https://www.kingsfund.org.uk/publications/courage-compassion-supporting-nurses-midwives>.

work includes a focus on migration, including how international nurses are treated within the healthcare system.

In addition to improving pay for nursing staff, the RCN makes further demands of the UK governments, which includes:

- Delivering fully funded health and care workforce plans
- Publishing independently verifiable assessments of health and care nursing workforce requirements to meet the needs of the population and address health inequalities
- Ensuring there is accountability for nursing workforce planning and supply in law.
- Improving working conditions and health and safety
- Making career progression available to all

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*The [European Federation of Nurses Associations \(EFN\)](#) was established in 1971 and is the independent voice of the profession. The EFN consists of National Nurses Associations from 35 EU Member States, working for the benefit of 6 million nurses throughout the European Union and Europe. The mission of EFN is to strengthen the status and practice of the profession of nursing for the benefit of the health of the citizens and the interests of nurses in the EU & Europe.*



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