AONL | American Organization for Nursing Leadership

Engaging and Retaining Gen Z Nurses: Trends and Strategies

SPRING 2026

laudio INSIGHTS

Contents

Welcome

Dear Colleague:

Now in the initiative's third year, the American Organization for Nursing Leadership (AONL) is leading a national effort to understand and address nurse leaders' key workforce challenges. A major objective of the work is to illuminate these challenges while also identifying specific strategies to elevate and support nurse leaders in addressing them.

As part of this effort, AONL has partnered with Laudio, a purpose-built software and analytics company whose mission is to inspire and amplify the people who deliver great health care. Front-line leaders and executives use Laudio to streamline work for leaders and help drive large-scale change through everyday human actions.

AONL and Laudio Insights, Laudio's dedicated analytics and publications group, have partnered on bi-annual reports, published each spring and fall, highlighting data and best practices to inform decision-making for front-line leaders and their executives. The Fall 2025 report, *An Early Warning System for Nurse Burnout: Metrics and Strategies,* [1] shared actionable data and strategies highlighting available and predictive burnout metrics.

This Spring 2026 report, *Engaging and Retaining Gen Z Nurses: Trends and Strategies*, offers new insights into the growth of Gen Z RNs in health systems, their patterns of work and what they need from their managers relative to prior generations. These data-backed insights are coupled with strategies shared by nurse executives and managers who have built highly engaged teams that include Gen Z team members. The findings are intended to promote constructive conversations about how managers can best support Gen Z RNs while enabling executives to best support the managers.

The evolving and complex roles of the nurse manager and nurse executive are critical to effective and sustainable care delivery. Our goal is to provide a data-driven foundation for the ongoing evolution of health care—with a focus on supporting its front-line leaders.

Sincerely,

Claire M. Zangerle
Chief Executive Officer, AONL
Chief Nurse Executive, AHA

Tim Darling
Co-Founder, Laudio
President, Laudio Insights

1. Laudio Insights & AONL. (2025, Fall). *An Early Warning Systems for Nurse Burnout: Metrics and Strategies.* https://www.aonl.org/An-Early-Warning-System-for-Nurse-Burnout-Metrics-and-Strategies

Background

2026 is the year Gen Z RNs reach a tipping point in health systems: by virtue of reaching 30% of the general population, Gen Z will go from adapting to workplace norms to redefining them. According to Malcolm Gladwell, author of the best-selling book *The Tipping Point* (2024), when a minority group within a population reaches between 25% and 33%, the dynamic of the population changes to reflect their needs and values. 2026 is also the year when many health systems are likely to see the first major cohort of Gen Z RNs filling nurse manager roles.

Gen Z is the generation born between 1997 and 2012 (ACEF, 2023). As of 2026, those who were born in the first ten years of that window have now entered the workforce, ranging from 20 to 29 years old. Those born in the remaining five years will enter by the end of the decade. Prior to Gen Z are millennials, Gen X and baby boomers,[2] all of whom are in the workforce today. Before the baby boomers, there was the silent generation, who are largely out of the workforce today. While national nursing workforce statistics group all nurses age 65 and older (Smiley et al., 2025), there are likely few, if any, silent generation members in nursing practice, outside of volunteer/patient sitter roles and therefore they are not further discussed in this report.

Popular books have explored the unique needs and attributes of Gen Z, with Gen Z RNs becoming an emerging topic of academic literature. This report quantifies many of the common conceptions of Gen Z RNs and, in doing so, confirming or refuting them with data. One example from popular literature is that managers of Gen Z team members report Gen Z's need more frequent feedback (Bierbrier, 2024). An example from the academic literature is that surveys have shown that Gen Z perceives itself as being recognized less often than its older colleagues (Tan, 2023). This report provides quantified findings that may help to explain both conceptions.

For example, millennial and Gen Z individuals have reported a stronger preference for working a long string of shifts in a row over a two-week window, thus maximizing the uninterrupted length of time off (Stimpfel, 2020); these patterns are confirmed in the analysis section of this report. In addition, nurse managers have reported that encouraging Gen Z RNs to assume charge nurse roles has been more challenging than for prior generations (Sherman, 2025); this report also aims to quantify and illuminate Gen Z's overall path to leadership.

Finally, within Gen Z, there have been many major variations in life experiences. The oldest Gen Z RNs were new nurse graduates during COVID-19, leading to remote residency programs and patients diagnosed with COVID (Sherman, 2021). In contrast, the youngest members of Gen Z are currently the only members of the workforce who were not working during the pandemic; therefore, their experiences give them a different perspective from their older peers.

Importantly, this report is not intended to be a study of Gen Z as a cohort. Rather, it is an examination of how nurse leaders and health care organizations are adapting to support and retain this newest segment of the workforce and to build environments where they can grow, contribute and sustain meaningful long-term careers in nursing. The report attempts to avoid sweeping generalizations of

2. Millennials (1981-1996: 30-45 years old in 2026), Gen X (1965-1980: 46-61 years old), baby boomers (1946-1964: 62-80 years old) and silent generation (1928-1945: 81-98 years old)

Gen Z or any generation, but rather, uses data for directional alignment of interventions alongside an overview of what some health systems are observing and doing today.

Finally, the observations and interventions discussed, while particularly helpful for managing Gen Z nurses, may bolster the entire workforce, as individuals across all generations have the same need for honest and authentic leaders, an understanding of how their daily work connects to a higher organizational mission and purpose, the opportunity to grow through experimentation and flexibility in their work and careers.

Executive Summary

A review of Laudio Insights' national workforce database of 99,800 RNs identified the mix of Gen Z RNs relative to other generations by department type and in leadership roles. The dataset was also analyzed to identify how Gen Z RNs respond to meaningful interactions compared with prior generations, among other insights. These analyses form the first section of this report.

Further analysis identified nurse executives and managers who have led teams with many Gen Z RNs over the last few years and have maintained an exemplary level of engagement with those team members. The results of interviews with these leaders form the second section of this report.

Gen Z has unique work behaviors relative to prior generations

As of mid-2025, Gen Z is the second highest populated generation of health system-based RNs; they are also the only generation that is relatively increasing. Relative to other generations, Gen Z RNs are more likely to stay through their 24-month anniversary in an organization; however, they are recipients of more support, including residency programs, during this time. After 30 months, their overall turnover rates are higher than Gen X and millennials.

Gen Z RNs are moving into some specialty roles early in their careers, particularly critical care. On the other hand, to date, they have been slower to move into other specialties, such as therapies and rehab.

KEY TAKEAWAY

Relative to older generations, Gen Z:

- Have the highest retention rate in the first 30 months
- Are more likely to not skip breaks
- Are more likely to group shifts to maximize time off
- Need 2.5x more meaningful interactions per month
- Are on track in taking on assistant manager and charge nurse roles

Gen Z RNs have unique work patterns: analyses show that they are more likely to group work shifts to maximize continuous days off and to take meal breaks during shifts. Interviews also revealed that nursing executives and managers perceive Gen Z RNs are more inclined to insist on schedule flexibility than prior generations.

Gen Z RNs need more frequent interactions with their manager

Gen Z RNs need 2.5 times as many meaningful interactions with their managers as prior generations to maintain the same level of retention (and up to 5 times as many as the oldest members of Gen X). Meaningful manager-employee interactions are documented exchanges (e.g., emails, texts, check-ins, notes or follow-ups) directly related to an employee's work, beyond a social connection.

This implies that managers need to create shorter, more specific and more frequent interactions with Gen Z RNs. New processes (e.g., a reduced reliance on annual reviews) and new tools may be needed to support these new and growing leadership demands on nurse managers.

All these findings are statistically significant and published here for the first time.

So far Gen Z RNs are on track to become nurse managers

With the oldest Gen Z members turning 30 in 2026, they are only just entering the window of their careers where RNs are typically called upon to become nurse managers, though a few Gen Z RNs already serve in this role (this is discussed in more detail in Analysis 3).

While it's too early to tell with certainty if they will move into the nurse manager role in their 30s at the same rate that millennials did, Gen Z RNs are rising into charge nurse responsibilities at a pace on par relative to their distribution among generations (also discussed in Analysis 3). This, along with a similar trend showing their willingness to take on assistant manager responsibilities, provides hope that the next generation of leaders will be ready to lead in the coming years. As detailed in the interview section of this report, Gen Z's willingness to lead is dependent on feeling ready to do so.

Nurse leader interviews revealed that nurse managers needed to adjust their approach to encourage Gen Z RNs to step into charge nurse roles by helping them understand both what "being ready for leadership" looks like and how they can make a unique difference through their leadership.

How nurse leaders can respond

Finally, as detailed in the interview section of this report, Gen Z RNs are accelerating a shift away from tenure-based to skills and competence-based career paths. Compared to prior generations, nurse leaders report that their Gen Z team members challenge the "time served" mentality and, for example, are pushing for overall equality in shift scheduling precedence. They also question policies that lack an explicit rationale and expect leaders to explain not only what decisions are made but also why they are made.

As Gen Z RNs now start to enter leadership roles, they are set to redefine not just those roles but the overall culture and norms of nursing. This new mindset is likely to create, among other changes, greater operational transparency and smaller, more frequent career advancement opportunities.

The nurse manager and executive interviews identified five priorities:

1. Personalize professional development
2. Adapt organizational structures and systems
3. Modernize communication
4. Prioritize wellness and flexibility
5. Advocate for mental health

While acknowledging the current environment's complex and unrelenting demands on managers' time, this report's findings reveal specific ways leaders can adjust and focus their efforts to best support Gen Z RNs. By quantifying some of the themes and conceptions discussed about Gen Z, the report aims to justify the changes and investments that leaders are evaluating and prioritizing today.

About AONL and Laudio

About the American Organization for Nursing Leadership (AONL)
As the national professional organization of over 11,000 nurse leaders, AONL is the voice of nursing leadership. Our membership encompasses nurse leaders working in hospitals, health systems, academia and other care settings across the care continuum. Since 1967, the organization has led the field of nursing leadership through professional development, advocacy and research that advances nursing leadership practice and patient care. AONL is an affiliate of the American Hospital Association. For more information, visit AONL.org.

About Laudio
Laudio's mission is to amplify and inspire the people who deliver great health care. Through its purpose-built platform for front-line leaders, Laudio enables health systems to drive large-scale change through everyday human actions. The company's AI-enhanced platform streamlines workflows for front-line leaders, strengthens interpersonal connections and aligns C-suite objectives with front-line efforts, enhancing leader efficiency, employee engagement and patient experience. Laudio makes it possible for patients, front-line team members and health system leaders to thrive together. Discover how at laudio.com.

About Laudio Insights
Laudio Insights is Laudio's analytics, research and publications division. Managers' use of Laudio enables us to collect unique detailed work environment data for leaders who manage over 300,000 health system clinical and non-clinical employees, including 100,000 RNs, in 150+ hospital and health system sites in the United States. From the data, Laudio Insights creates actionable and independent analytics. Laudio Insights publishes quarterly reports, articles and other content that provide decision-making support to front-line leaders and their executives.

The Laudio data set

The Laudio platform serves as a centralized hub for front-line leaders' core daily work across employee experience, quality and safety and patient experience. It integrates data from underlying systems, including human resource information systems (HRIS), electronic health record (EHR)/admission data, discharge and transfer (ADT) data and time-and-attendance solutions, into actionable workflows. The Laudio platform uses AI to prompt leader actions (e.g., employee recognition and appreciation) that elevate organizational culture and performance.

The daily data feeds and documented manager activities in the platform form the foundation of the data in this report. While managers of all sites of care, roles and specialties use Laudio, this report focuses on nurse managers and their teams. The definition of nurse manager, as used in this report, is in Appendix 1; multiple typical job titles are associated with this definition.

Laudio's data set includes over 150 acute care hospitals and hundreds of ambulatory and clinic facilities nationally. The data set used in this analysis covers 15,000 distinct managers, inclusive of all roles and over 300,000 front-line employees, inclusive of all sites of care. Some of the statistical analyses use a subset of the data set where the analysis requires exclusion criteria.

Laudio's data set has a higher representation of East/Southeast regions in the US and of American Nurses Credentialing Center (ANCC) Magnet® hospitals (details in Appendix 2).

Nurse managers and their teams in the Laudio data set

About two-thirds of the nurse managers in the Laudio data set work in an inpatient setting; the remainder are in Emergency Departments (EDs) and outpatient/ambulatory settings (Figure 1). Unless otherwise noted, the analyses in this report are inclusive of all sites of care. The data used in the trends is from January 2022 to January 2026; for the statistical analyses, calendar year 2025 data was used.

Additional details about the facilities, managers and team members in the Laudio data set are in Appendix 2.

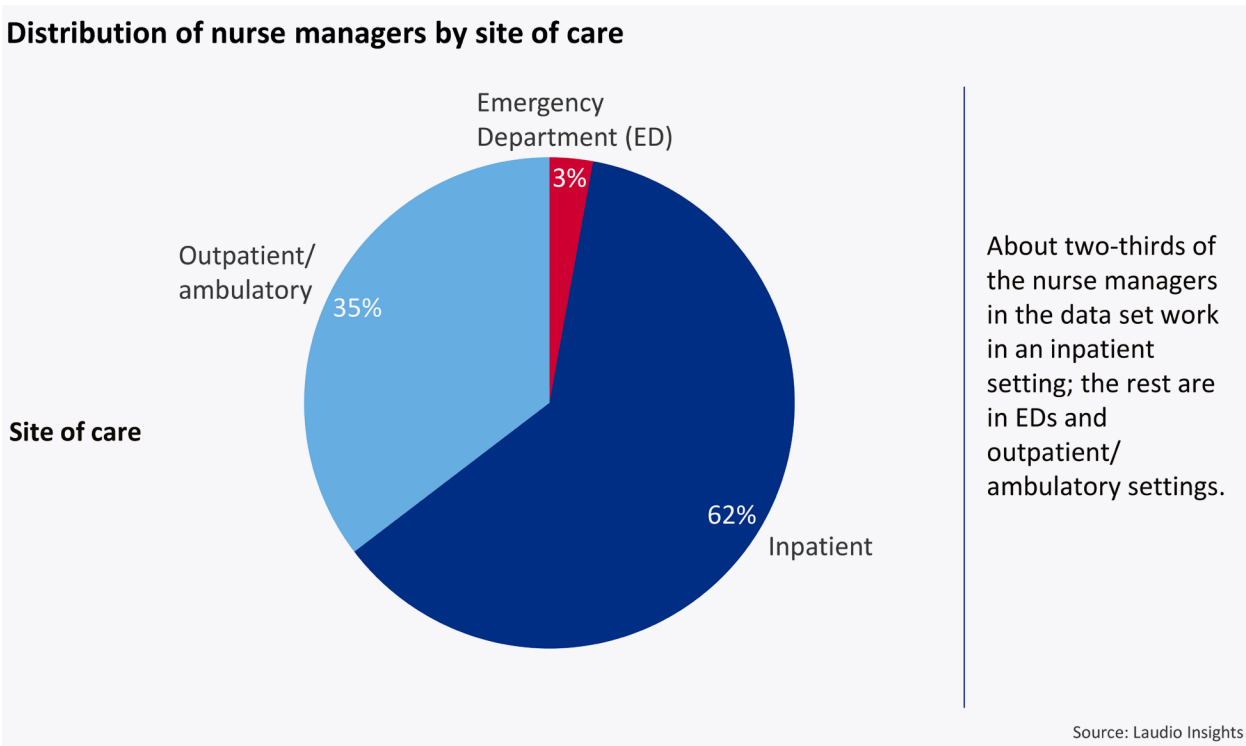


Figure 1

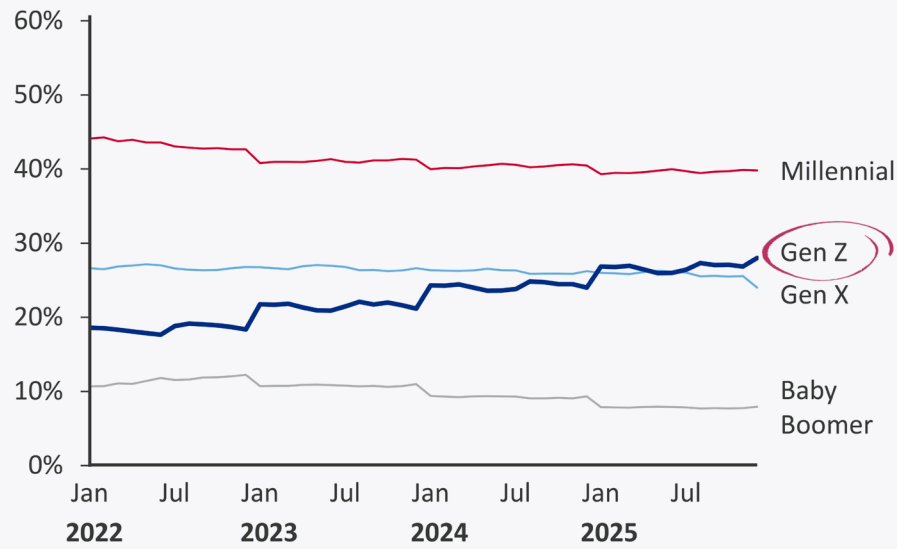
Analysis 1

The unique work behaviors of Gen Z RNs

The growing role of Gen Z RNs

As of July 2025, Gen Z RNs have become the second-largest generational group working as RNs in the data sample's health systems, as shown in Figure 2.

Percentage of health system-based RNs by generation, over time



Gen Z are the second highest populated generation among health system RNs (as of the end of 2025).

Gen Z is also the only generation of RNs that is increasing in relative population, growing at about 13% per year.

RNs only; full-time and part-time

Source: Laudio Insights

Figure 2

Figure 2 shows the relative proportion of sample health system-based RNs by generation. The totals for each month equal 100%. Coincident with completing secondary education, Gen Z currently encounters relative increases every January and July following nursing school graduations.

Gen Z RNs stand out as the only cohort whose relative numbers are growing. Gen Z remains the most constant, while baby boomers and millennials are decreasing in relative population.

Given that millennials are only 30-45 years old in 2026, it is disconcerting to see their relative population of RNs decrease more quickly than the older Gen X over the last four years (from about 44% to 40%).[3] Several executives interviewed for this report noted that millennials are reducing work hours or leaving acute care roles due to the financial and work-life balance challenges associated with raising young families. This observation may help explain the steady decline in millennial representation in health system nursing roles.

3. The number of RNs in the US increased from 3.07M in 2022 at 1.13% average per year to an estimated 3.26M in 2025 (HRSA, 2024). Therefore, millennial RNs accounted for 1.35M RNs in 2022 (44%) and 1.30M RNs in 2025 (40%), a net decline of about 50,000 RNs.

One implication of this is a lasting change to the generational composition of the RN workforce; if millennial RNs continue to leave acute nursing practice, other generations of nurses may experience disproportionate workforce responsibility.

The relative decline of mid-career millennial RNs may be part of a typical career / family adjustment at this time in their lives; it may also represent a fundamental shift that could have significant impact on the strength of the future nursing workforce.

The 30-month inflection point for Gen Z

Compared with other generations, Gen Z RNs have higher rates of early-tenure retention: they are more likely to remain with a health system through their first 30 months, as shown in Figure 3.

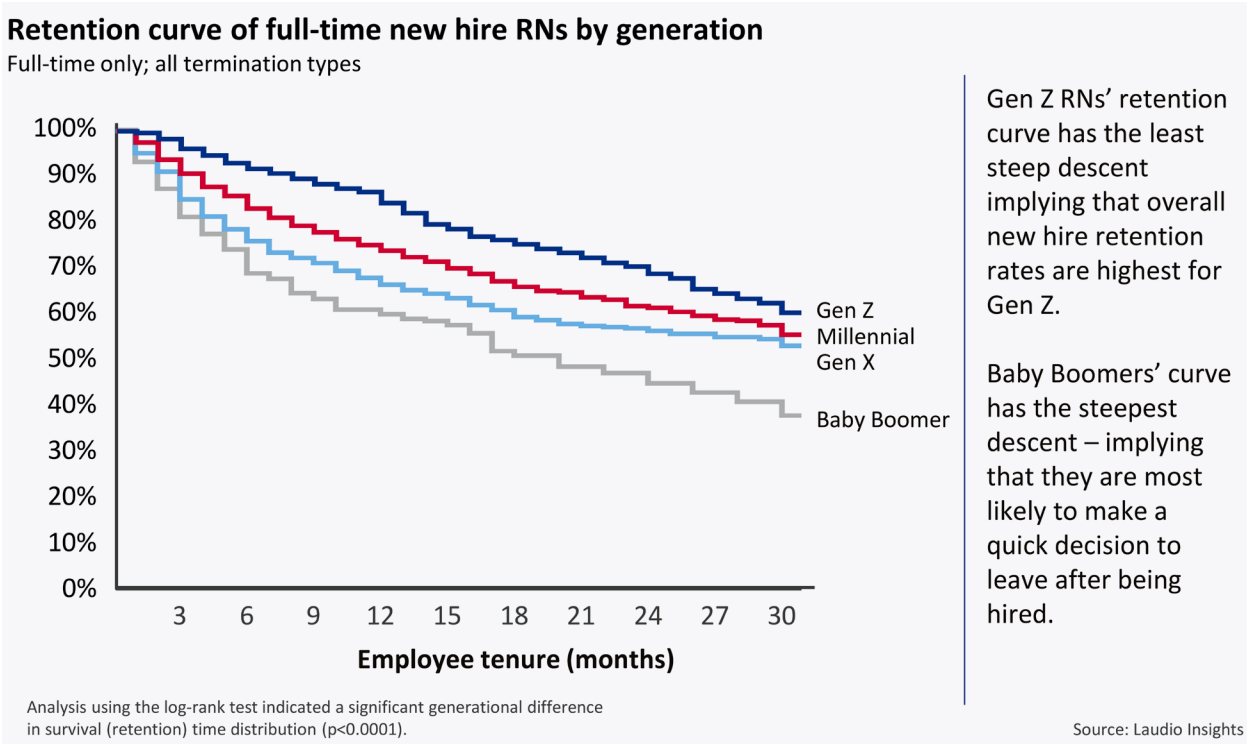


Figure 3

Figure 3 shows the retention curve of the four generations active in health systems today. The chart aligns all RNs hired in the 2025 calendar year as starting at the far left of the x-axis, as if they had all started on the same day. At the 3-month point, 95% of Gen Z RNs remain (the dark blue curve) while only 80% of baby boomer RNs remain (the grey curve).

At the 24-month mark, 68% of Gen Z RNs remain relative to about 61% of millennial RNs (in red), 56% of Gen X RNs (in light blue) and 41% of baby boomer RNs. Therefore, a new hire Gen Z RN has a much higher likelihood of staying past the first couple of years.[4]

4. 32% of full-time Gen Z RNs have left (compared to 68% who remain) by the 24 month mark while 59% of baby boomer RNs; therefore, the baby boomer termination rate is about twice the Gen Z rate.

However, as the retention curves approach the 30-month mark, this advantage begins to diminish. Beyond 30 months, Gen Z turnover begins to outpace that of millennials and Gen X, as shown in Figure 4. This inflection suggests that while health systems are successfully retaining Gen Z nurses during early tenure, they are less successful at retaining them once that initial period has passed.

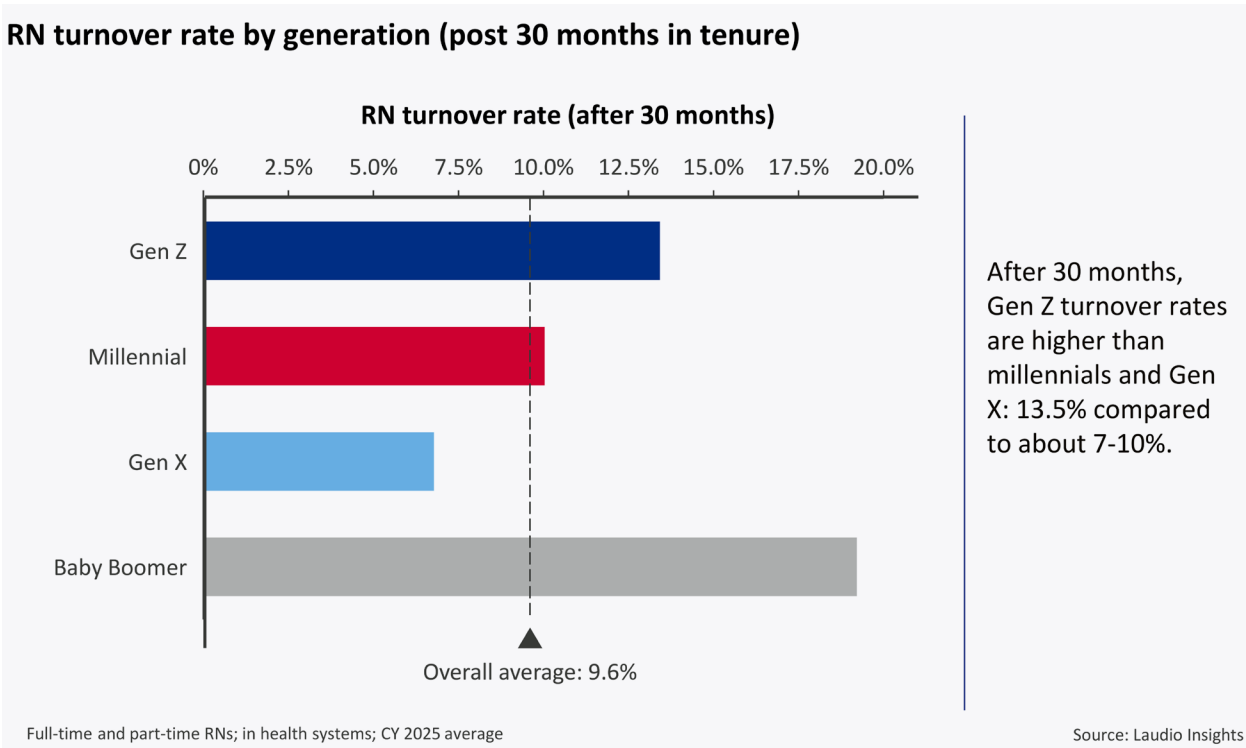


Figure 4

The first 24 to 30 months of employment often coincide with structured residency programs, formal onboarding, intentional mentorship, frequent check-ins and clear developmental expectations. These elements align closely with the support structures Gen Z RNs report valuing most. Once these formal programs conclude, Gen Z nurses transition into standard operational leadership environments that were largely designed around the expectations and working styles of previous generations. While there is a small drop around month 12 (perhaps due to a signing bonus window), the retention curve for Gen Z is almost linear in the first 30 months implying that there are no specific moments in their first two to three years that are unusually disruptive.

The data suggest that Gen Z RNs are not leaving because of an inability to adapt to nursing practice, but rather because the workplace model they enter after early tenure no longer provides the frequency of feedback, coaching, recognition and relational connection they experienced during residency.

Why this inflection matters for the future workforce

This pattern carries significant implications when viewed alongside generational workforce composition. The loss of Gen Z nurses after 30 months, therefore, is not simply a retention issue: it represents a potential long-term threat to workforce sustainability.

Understanding Gen Z beyond early tenure

The gap observed after the 30-month mark appears addressable. Interviews with nurse leaders and executives, as discussed later in this report, suggest that Gen Z RNs are not disengaging from the profession of nursing, but from work environments that have not yet adapted to how they prefer to be supported, developed and recognized.

Understanding the unique behaviors, expectations and goals of Gen Z RNs is essential for redesigning leadership touchpoints that extend beyond early-tenure programs and into the full arc of a nurse's career within a health system; nurse managers have the unique and valuable responsibility of connecting and mentoring with consistency.

Gen Z RNs are entering high-acuity specialties early in their careers

Figure 5 shows the percentage of Gen Z RNs in common specialties, relative to older generations. In terms of career development, Gen Z RNs are already entering high-acuity specialties, such as transplant, step-down and critical care units, at a higher proportion than their overall representation in the workforce.

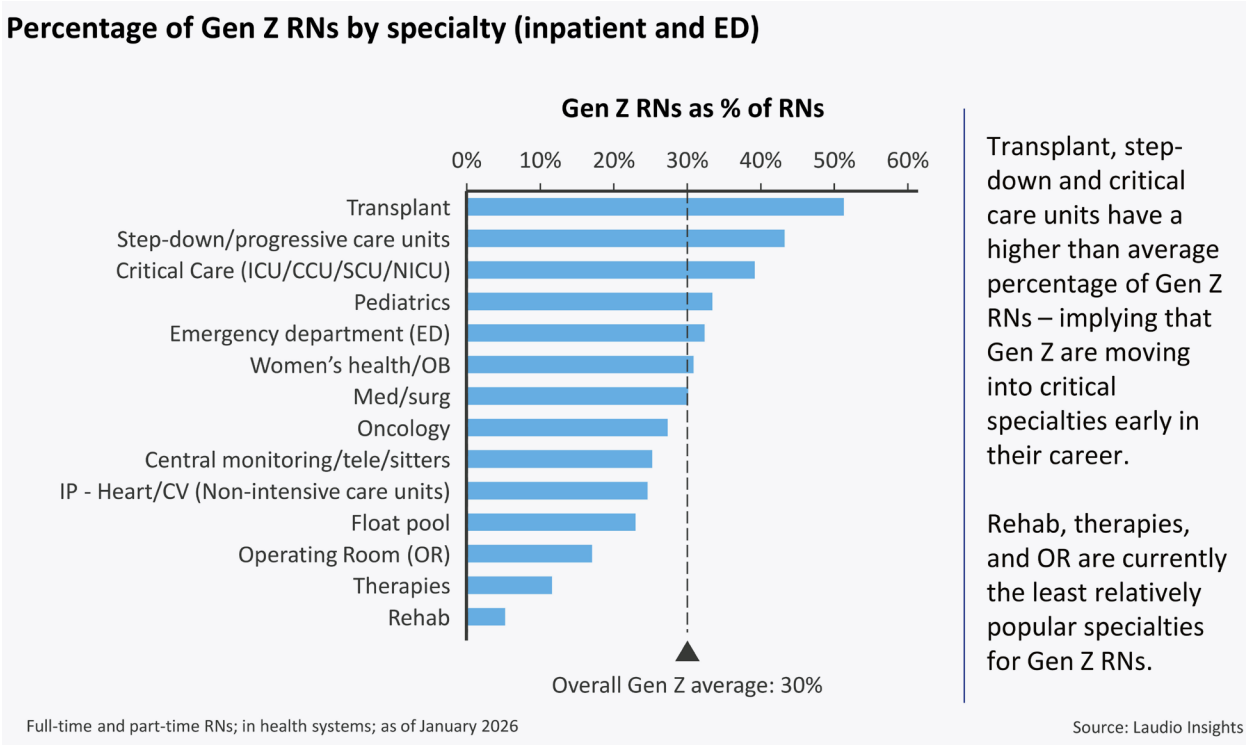


Figure 5

Gen Z RNs account for 30% of all RNs in health system inpatient and emergency departments; the top of the chart shows specialties where the proportion of Gen Z RNs is greater than the overall average.

The bottom of the chart shows where Gen Z's current representation remains comparatively low, such as therapies and rehabilitation services. Operating rooms (ORs) are also under-represented by Gen Z RNs; this may be a trend in Gen Z's preferences or simply reflect a specialty that they are just starting to advance into at this stage in their careers.

Med/surg, EDs and women's health/OB are in the center, with Gen Z representation similar to the overall average.

Gen Z RNs are prioritizing breaks and long stretches of days off work

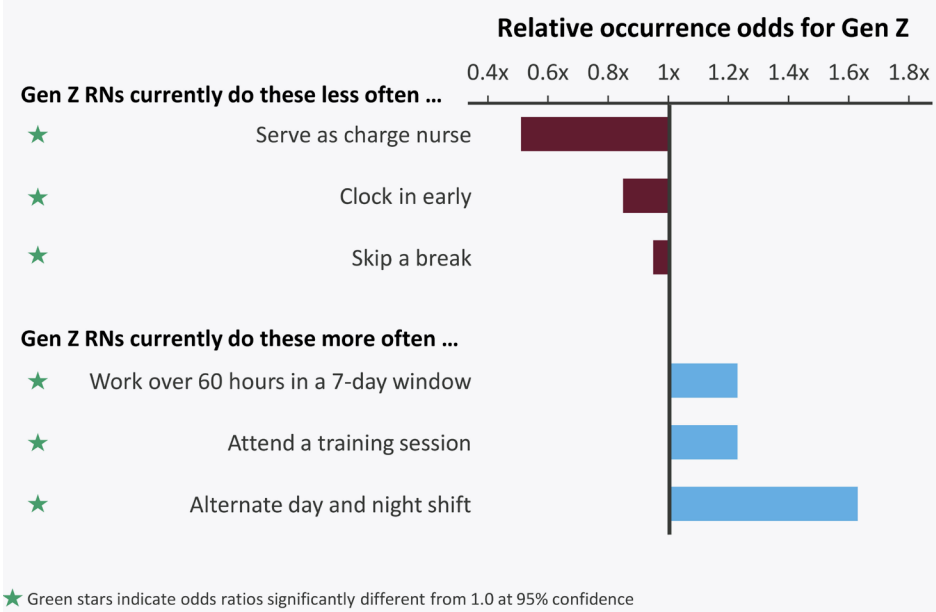
At this point in their career, Gen Z's work patterns also differ from those of older generations. As shown at the top of Figure 6, Gen Z RNs currently have lower odds of serving as charge nurses, which is likely because they are only beginning to enter leadership roles.

Gen Z RNs also currently have lower odds of clocking in early and skipping breaks; this could be a positive sign that Gen Z is prioritizing mental health and avoiding burnout. As detailed in a prior report, clocking in early and skipping breaks are examples of role overload. When these events are common on a team, it is predictive of higher turnover rates, especially among early-tenure RNs (Laudio Insights & AONL, Fall 2025).

KEY TAKEAWAY

Gen Z nurses are more likely than other generations to stay in a health system for up to 30 months; beyond that point, retention depends on how well organizations are adapting to maintain a focus on Gen Z's needs and priorities.

Prominent current role and shift differences between Gen Z RNs and RNs from prior generations



At this point in their career, Gen Z RNs have much higher odds of working over 60 hours a week, for example, than prior generations.

At this point in their career, they also have lower odds of clocking in early or skipping breaks, relative to prior generation RNs.

★ Green stars indicate odds ratios significantly different from 1.0 at 95% confidence
From a multi-level logistic regression model that adjusts for organizational structure, unit type, and employee tenure

Source: Laudio Insights

Figure 6

In contrast, Gen Z RNs currently have higher odds of attending training sessions and alternating day and night shifts, as shown at the bottom of the chart. Both of these may be due to the early stages of their career and could evolve over time.

They also have higher odds of working over 60 hours in a 7-day window, which occurs when an RN consolidates their shifts so that they can also consolidate more consecutive days off. If an RN schedules three 12-hour shifts at the end of one calendar week, takes a day off and then schedules another three at the beginning of the following week, they can take a full seven days off before repeating the cycle, without using any paid time off (PTO). Some organizations have policies preventing this, as it can be considered an unsafe practice (Bae, 2021). It may allow Gen Z RNs the ability to create sustainable careers for themselves—or they may inadvertently be setting themselves up for burnout. Moving into higher acuity areas early may give Gen Z RNs additional opportunities for this shift clustering.

All of these differences are statistically significant, as denoted by the green stars.

Analysis 2

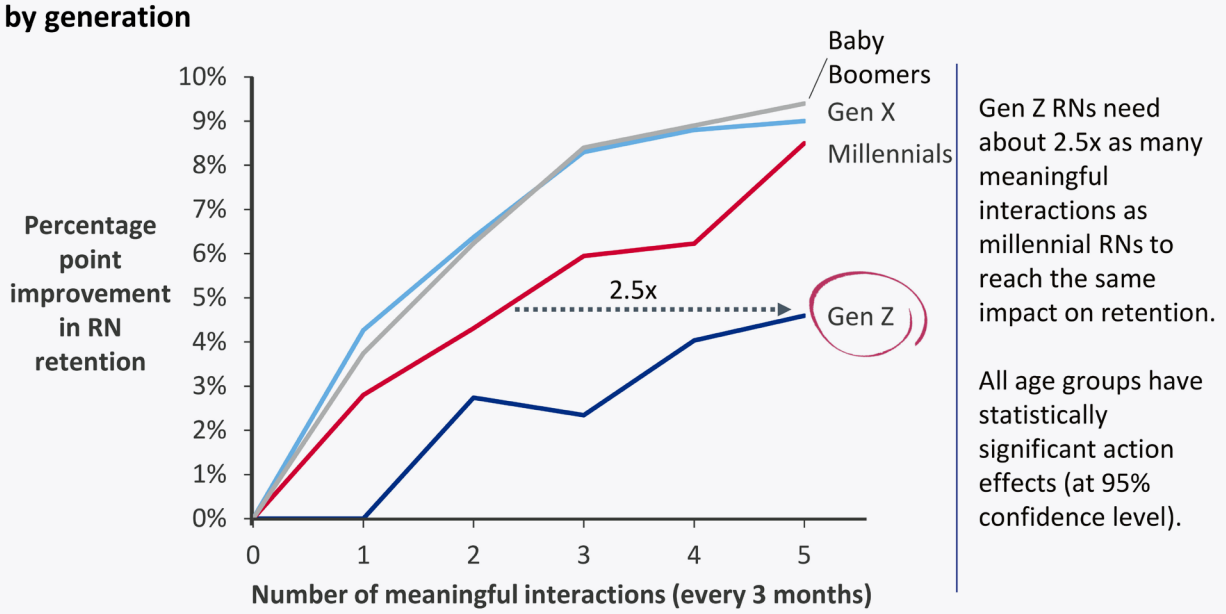
Gen Z RNs' need for more interactions with their managers

Gen Z RNs need about 2.5 times as many meaningful interactions with their managers, relative to older generations

This report marks the first publication of a new, statistically significant association between meaningful interactions and RN retention, stratified by generation. Figure 7 shows a dose-response curve, measuring the impact of increasing levels of manager-led meaningful interactions on changes in RN retention rates across the four generations.

Purposeful manager-employee interactions are documented exchanges (e.g., emails, texts, check ins, notes, or scheduled follow ups) that relate directly to an employee's work. These interactions may happen in person or electronically, but they go beyond social connections.

RN dose-response curve of meaningful interactions on retention rate, by generation



The analyses are from a Bayesian cross-classified hierarchical logistic regression model that accounts for repeated observations at the client, facility, manager, and individual level. Assumes 80% baseline retention rate.

Source: Laudio Insights

Figure 7

As denoted by the dark blue curve, one manager-led meaningful interaction every three months has no measurable change in retention for a Gen Z RN (i.e., it is below the threshold dose). Three meaningful interactions in a 3-month window are associated with about a 2.5 percentage-point improvement in retention; five interactions are associated with about a 5 percentage-point improvement.

In contrast, two meaningful interactions every three months are associated with a similar 5 percentage-point improvement for millennial RNs (the red curve), implying that Gen Z RNs need about 2.5 times as many interactions as millennial RNs.

This analysis is adjusted for tenure, department type and many other employee-oriented attributes; therefore, this does not measure the additional support that Gen Z RNs currently receive as they are more likely to be earlier in their tenure in an organization.

One meaningful interaction every three months is associated with a 5-percentage-point improvement for baby boomer and Gen X RNs (the light blue and grey curves, respectively); i.e., Gen Z RNs require five times as many interactions to achieve the same retention improvement as the oldest nursing team members.

KEY TAKEAWAY

Gen Z RNs need about 2.5x more work-focused interactions with their managers than millennials, and up to 5x more than Gen X and baby boomers. This creates a new leadership imperative for more frequent meaningful interactions.

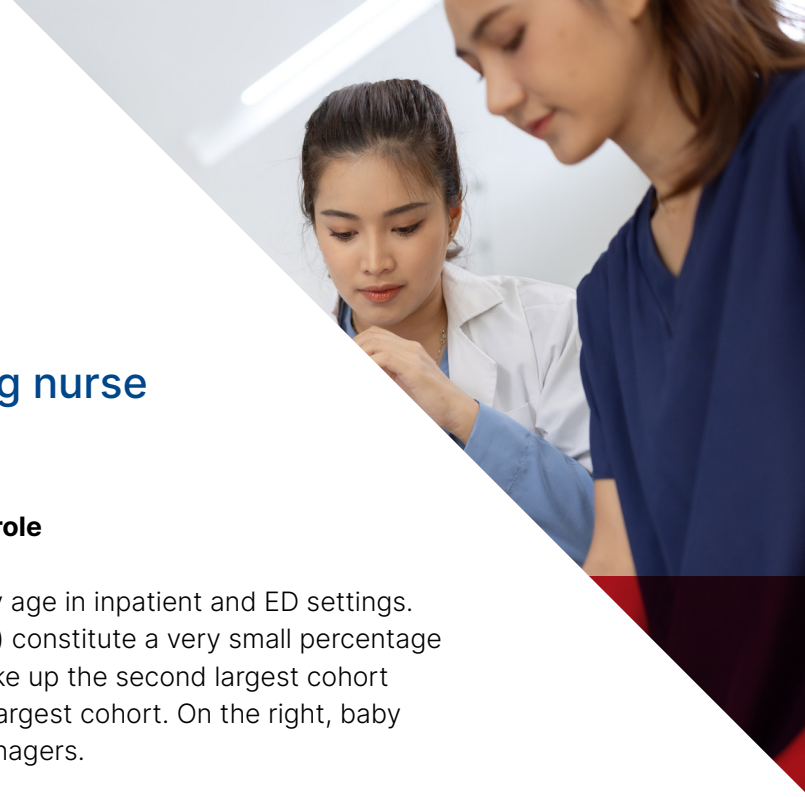
The implication is that managers are under new pressure to have shorter, more specific and more frequent interactions with Gen Z RNs just to maintain a similar level of retention as they do with older RNs. New processes, such as reduced reliance on annual reviews, as well as manager-centric software platforms, may be needed for nurse managers to lead at scale as Gen Z RNs continue to grow in the workforce.

It is not yet clear whether this increased relative need for interactions will continue as Gen Z grows older; indeed, this analysis could be identifying the increased feedback needs of younger people regardless of their generation. For nurse leaders, though, the implication is the same: regardless of whether it is due to specific Gen Z traits or simply because they are younger, Gen Z RNs need many more interactions than their older peers.

As shown in Figure 4, the baseline gap in post-30 month turnover between Gen Z and millennials is about 2 percentage points. This is very similar to the vertical gap shown in Figure 7 between the dark blue and the red lines. For example, a manager who has just one meaningful interaction with their team members every three months is associated with about 2.5% point retention improvement with their millennial RNs but no change from their Gen Z RNs.

The implication is that managers who increase the frequency of their interactions with their Gen Z RNs will see similar retention rates for Gen Z as the prior generation. Managers who cannot make the change will see, on average, higher turnover with their Gen Z RNs.

Details of the statistical models used for this analysis are in Appendix 3.



Analysis 3

Gen Z RNs' progress to becoming nurse managers

Gen Z RNs are not yet rising to the nurse manager role

Figure 8 shows the distribution of nurse managers by age in inpatient and ED settings. On the left side of the chart, Gen Z RNs (in dark blue) constitute a very small percentage of nurse managers overall. Millennial RNs (in red) make up the second largest cohort of nurse managers, while Gen X (in light blue) is the largest cohort. On the right, baby boomers (in grey) constitute the remaining nurse managers.

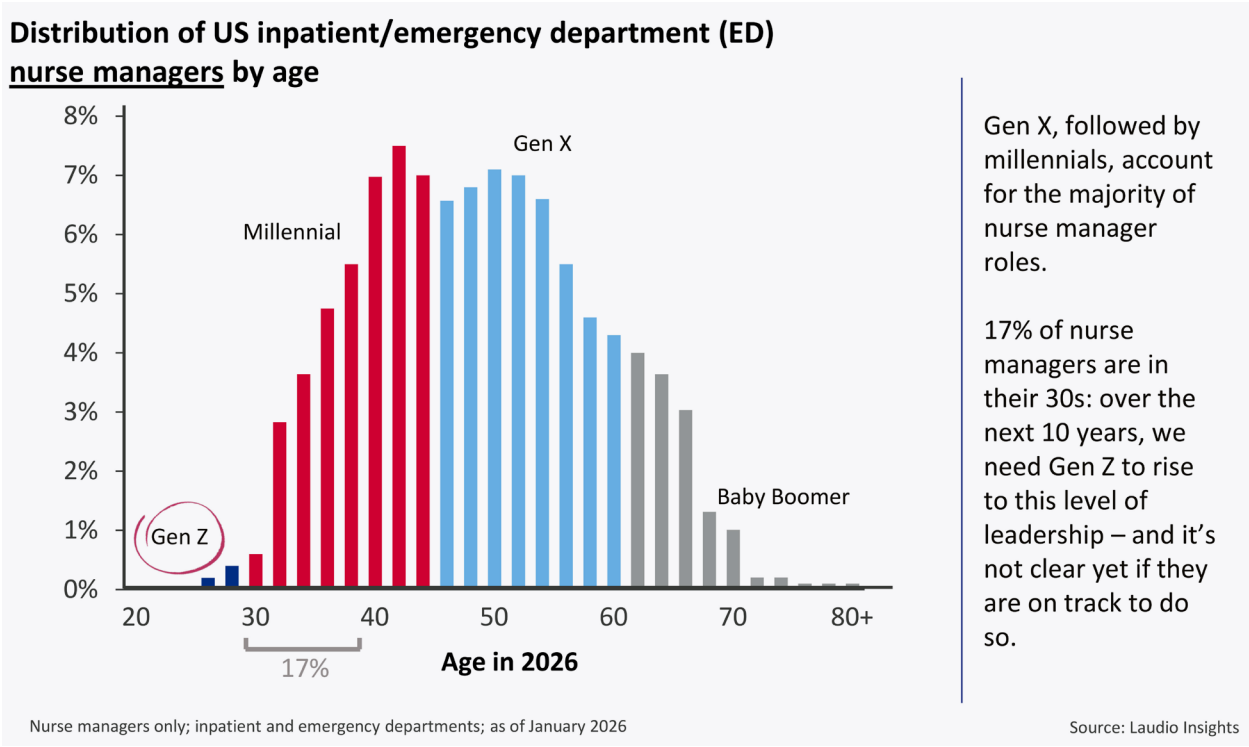


Figure 8

The oldest Gen Z members turn 30 in 2026. As shown in the callout below the distribution, 17% of nurse managers are in their 30s; this is the cohort that Gen Z will be moving into. It is not yet clear from the data whether Gen Z RNs are moving into formal leadership roles at the pace required to grow into this level of leadership over the next ten years.

However, Gen Z RNs are on track to become managers over the next few years

Gen Z RNs are stepping into charge nurse roles at a pace that appears consistent with prior generations. This implies that Gen Z RNs are likely to be willing to step into the nurse manager role over the next few years. Interviews with nurse leaders suggested this willingness is grounded in understanding what readiness for the leadership role looks like.

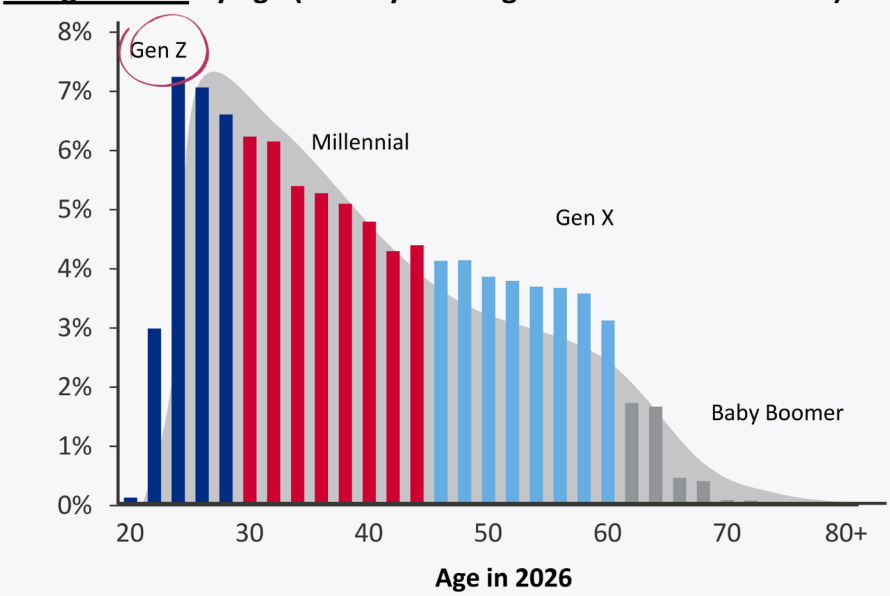
Figure 9 shows the distribution of RNs who serve as charge nurses by age. The grey curve underneath the bar chart shows the distribution of RNs overall by age; the charge nurse distribution is very similar to the overall RN distribution, implying that Gen Z RNs are stepping into early leadership roles at a pace consistent with their overall presence in the workplace.

As discussed earlier in Figure 6, Gen Z RNs are less likely to be a charge nurse overall (i.e., there is less dark blue in the chart than red and light blue) but that is a function of their generation just beginning to enter the leadership window.

KEY TAKEAWAY

Gen Z RNs are willing to step into leadership roles, but they need to know what readiness looks like.

Distribution of US inpatient/emergency department (ED) charge nurses by age (overlayed on age distribution of all RNs)



The age distribution of RNs who serve as charge (in the bar chart) follows a similar distribution of all RNs (in the grey curve behind the bar chart).

This implies Gen Z are stepping up into charge roles at a representative level.

Only includes RNs who serve as charge 40+ hours per month; inpatient and emergency departments; as of January 2026

Source: Laudio Insights

Figure 9

Overview of the nurse executive and manager interviews

Gen Z is now the fastest-growing and second-largest segment of the nursing workforce. Their rapid rise is fundamentally reshaping the leadership challenges facing health care organizations. For nurse executives and nurse managers, this is not a typical generational transition, rather, it's a strategic inflection point. Organizations must examine every dimension of how they design work, lead, support teams and develop nurses throughout their careers to ensure they can both attract and retain this new generation while continuing to meet the clinical, financial and community obligations of modern health care.

From December 2025 through January 2026, researchers conducted in-depth interviews with eight nurse executives and seven nurse managers from health systems that have hired and retained large numbers of Gen Z RNs and demonstrated consistently high levels of engagement with these team members. Participants were recruited based on their willingness to share their experiences and perspectives, representing a convenience sample of leaders from organizations recognized for strong front-line engagement practice. These organizations represent a cross-section of geographic regions, care settings and organizational models with a common commitment to creating environments where Gen Z RNs can thrive.

Researchers asked participants to describe what they are seeing from Gen Z RNs in terms of workplace expectations, motivations and stressors and how those expectations are challenging long-standing assumptions about leadership, scheduling, feedback, professional development and team culture. Leaders also shared the strategies, structures and innovations they use to better align the needs and aspirations of Gen Z RNs with the operational realities of their organizations, and the care needs of the patients and communities they serve.

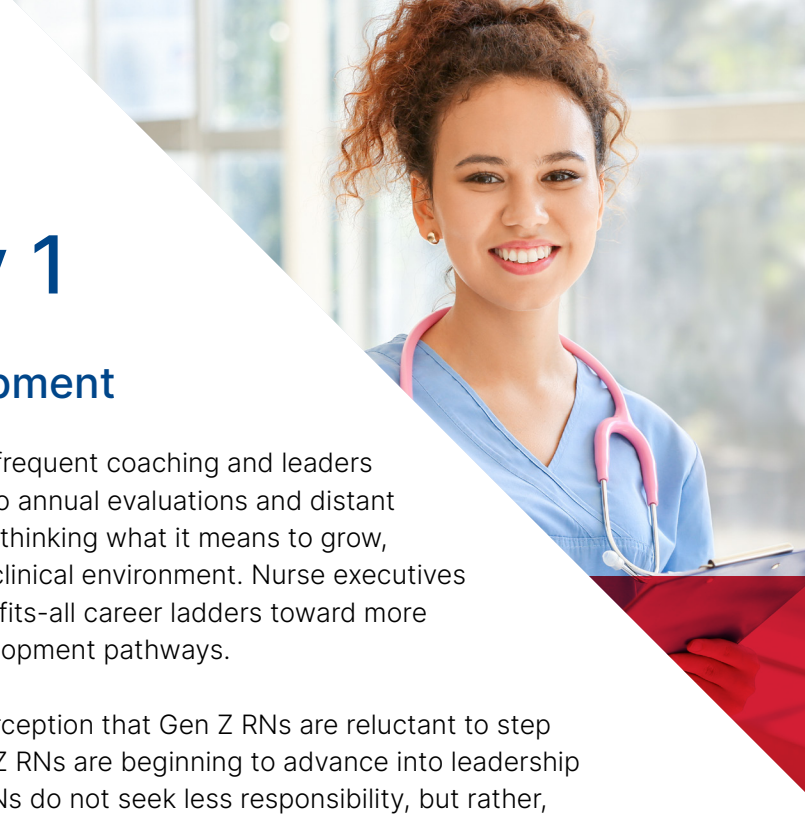
Five Priorities for Engaging Gen Z in Your Workforce

Throughout the interviews, five priorities emerged for integrating and engaging Gen Z RNs in the health care workforce:

1. Personalize professional development
2. Adapt organizational structures and systems
3. Modernize communication
4. Prioritize wellness and flexibility
5. Advocate for mental health

In the sections below, the brick icon  indicates foundational actions and the light bulb icon  indicates innovative ideas.

Managers and executives provided all of the actions proposed below. Quotes from the nurse leader interviews support themes.



Executive Priority 1

Personalize professional development

Gen Z RNs are seeking visible growth opportunities, frequent coaching and leaders who actively invest in their progression as opposed to annual evaluations and distant promotion tracks. Consequently, nurse leaders are rethinking what it means to grow, coach and develop Gen Z RNs in a rapidly changing clinical environment. Nurse executives and managers described a shift away from one-size-fits-all career ladders toward more individualized, skills-based and purpose-driven development pathways.

Insights from this analysis challenge the common perception that Gen Z RNs are reluctant to step into leadership. As reflected in Figures 8 and 9, Gen Z RNs are beginning to advance into leadership roles. Nurse leader interviews revealed that Gen Z RNs do not seek less responsibility, but rather, greater confidence, preparation and support. Gen Z RNs want to understand what "ready" looks like, how their current skills align with leadership expectations and what development steps will help them succeed. When leaders make those pathways clear and provide encouragement and coaching, Gen Z RNs are far more willing to step forward.

> *"New grad Gen Z nurses want to see options and a path from the very beginning."*

At the same time, interviewees emphasized that the fundamentals of effective leadership have not changed. Trust, fairness, presence, follow-through and authentic care for staff remain just as important as they have always been. Interviewees shared that what has changed is Gen Z RNs' willingness to hold leaders accountable to those standards. Gen Z RNs are more likely to speak up when leaders do not communicate clearly, fail to follow through or behave in ways that conflict with stated values. As a result, leadership credibility and consistency have become even more critical to engagement and retention.

> *"When I was a new nurse years ago, we didn't discuss the 'why,' but with Gen Z, every time we communicate, we connect it back to them and explain the 'why.'"*

Leaders also noted that meeting these expectations is not simply a matter of individual effort; rather, it requires commitment and investment across the organization. Health systems must ensure nurse managers are equipped with the tools, data and systems needed to support the kind of frequent, meaningful connection Gen Z RNs expect.

> *"Favor brief real-time conversations that provide feedback in the moment rather than formal, retrospective meetings in an office."*

At the same time, executives acknowledged the growing administrative, operational and compliance responsibilities that continue to accumulate for front-line managers. Without intentional efforts to reduce unnecessary burden and prioritize time for coaching, development and relationship building, even the strongest leaders will struggle to meet Gen Z's needs. High-performing organizations are, therefore, investing not only in leadership development but also in redefining the manager role to make connection, coaching and talent development protected parts of leader standard work.

> *"Organizations that have not meaningfully invested in their nurse managers will face significant challenges in engaging and retaining Gen Z nurses."*

Clarify role expectations and career pathways from Day 1
Make competencies, advancement criteria and development milestones transparent when welcoming them as new hires, so Gen Z nurses can see how to progress.

Early integration into professional governance
Intentionally integrate Gen Z nurses into professional governance as a primary pathway for voice and influence in their work and professional practice. Provide clear entry points, mentorship and options to inspire and encourage their collaboration with the team. Include virtual participation so nurses can contribute without sacrificing personal time and ensure leaders visibly act on front-line recommendations.

Standardize "in-the-moment" coaching as the default
Coach while rounding and during real work whenever possible. Gen Z RNs absorb and accept feedback better when it's timely and tied to the moment.

Build two-way feedback into preceptorship models
Invite Gen Z RNs to provide structured feedback to their preceptors early and regularly, using a simple, consistent format that helps normalize and build comfort with both giving and receiving feedback as a routine part of professional practice. Ensure consistent communication of how feedback is being addressed to demonstrate how their input is being considered.

Coach all leaders to model consistency, transparency and fairness
Reinforce the criticality of leadership fundamentals (e.g., presence, fairness and keeping commitments) and AONL Nurse Leader Core Competencies because Gen Z RNs will call out inconsistency quickly.

Create growth opportunities based on skills, not tenure
Define what "ready" looks like for charge, preceptor and specialty roles using competency behaviors and skills, not tenure. Offer simple development steps to close gaps. Where possible, complement seniority models with competency-based eligibility for shifts, assignments and development roles to better align with Gen Z RNs' career expectations.

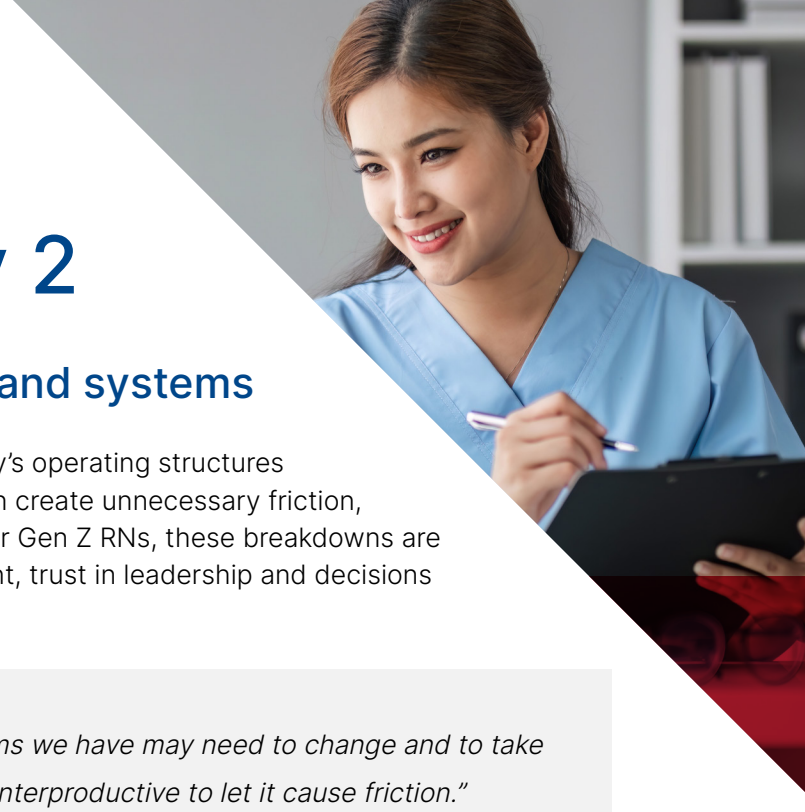
Use structured, psychologically safe feedback and coaching frameworks
Equip nurse managers with simple, repeatable tools that make feedback clear and actionable without causing defensiveness. Frameworks such as WISE (Well-timed, Intentional, Strengths-based, Empowering) or Start/Stop/Continue help normalize continuous feedback, clarify expectations and translate coaching into specific, manageable next steps for Gen Z RNs.

Augment residency programs with a "residency-to-practice" transition pathway
Use a nurse advisory board of faculty, recent graduates and current residents to design what comes after residency. Adopt AONL's Transition to Nurse Manager Practice program as a turn-key option. Add post-graduation specialty-based transition pathways and mentor visibility and clear next steps for skill development and certification to ensure Gen Z RNs always know what's next and how they are progressing.

Support "portfolio careers" and non-linear development paths
Recognize that Gen Z RNs may pursue advanced degrees, side businesses or part-time roles alongside direct patient care. Create internal pathways that allow them to stay connected to the organization while growing. For example: ask those who are exploring entrepreneurial paths if they'd be interested in leading a small system innovation team or quality improvement group.

Implement "pathway to leadership" programs
Offer structured leadership exposure for Gen Z RNs before they formally step into management roles. Develop programs for nurses who are considering leadership. Introduce AONL Nurse Leader Core Competencies so they can build confidence, clarify interest and enter leadership roles better prepared.

Create nurse career advisors to personalize skills-based advancement
Establish dedicated nurse career advisors who partner with unit managers to guide Gen Z nurses through individualized, skills-based pathways aligned with demonstrated competencies, interests and growth.



Executive Priority 2

Adapt organizational structures and systems

Nurse leaders consistently shared that many of today's operating structures were designed for a different era of nursing and often create unnecessary friction, inefficiency and frustration for newer generations. For Gen Z RNs, these breakdowns are not just inconvenient; they directly affect engagement, trust in leadership and decisions about whether to stay.

> *"The first step is to start to see that the systems we have may need to change and to take that responsibility on ourselves; it is counterproductive to let it cause friction."*

Interviewees noted that many core elements of today's health care operating model were originally built around the expectations of earlier generations, who often placed a high value on long-term organizational loyalty, delayed career rewards and personal sacrifice in service of future opportunity. In contrast, Gen Z RNs bring a stronger expectation that professional growth, meaningful work and personal well-being should be experienced in the present, not deferred to some distant point in their careers. These differing expectations are not a question of commitment, but of how work, life and career progression are balanced.

As a result, Gen Z RNs are particularly attuned to misalignment between what organizations say they value (e.g., teamwork, patient-centered care and clinician well-being) and what their systems actually reinforce. When patient care is chronically understaffed, documentation is redundant or technology makes work harder instead of easier, this generation is more likely to question whether the organization is truly committed to sustaining its people.

> *"Our task is not to make Gen Z fit the system we inherited, but to reshape that system around the workforce that will lead it into the future."*

Innovative organizations are actively re-engineering their operating environments to better support both nurses and nurse managers. This includes redesigning staffing models, streamlining workflows, integrating technologies and clarifying roles so that care teams can function more effectively. Leaders emphasized that improving systems is not simply about efficiency; crucially, it is about signaling respect for nurses' time, expertise and well-being. By aligning people, process and technology, these organizations are creating workplaces where Gen Z RNs can focus on caring for patients, developing professionally and building long-term careers rather than fighting the system to get their work done.

Align systems with stated organizational values
Ensure staffing models, scheduling rules and workload expectations reinforce what leaders say they value about well-being, career development and patient-centered care. Gen Z RNs are quick to notice when policies and practices contradict the culture the organization promotes.

Reduce unnecessary administrative burden on nurse managers
Streamline reporting, compliance tasks and manual workarounds so front-line leaders have time to support their teams and resolve operational barriers.

Embed recognition into everyday systems
Implement digital or manual systems to help managers consistently capture and highlight contributions, teamwork and skill growth of individual team members' daily work. Find opportunities to recognize small wins; this is especially important for Gen Z.

Provide consistent access to clinical and operational support
Ensure charge nurses, educators and on-call resources are available so Gen Z nurses do not feel isolated when challenges arise.

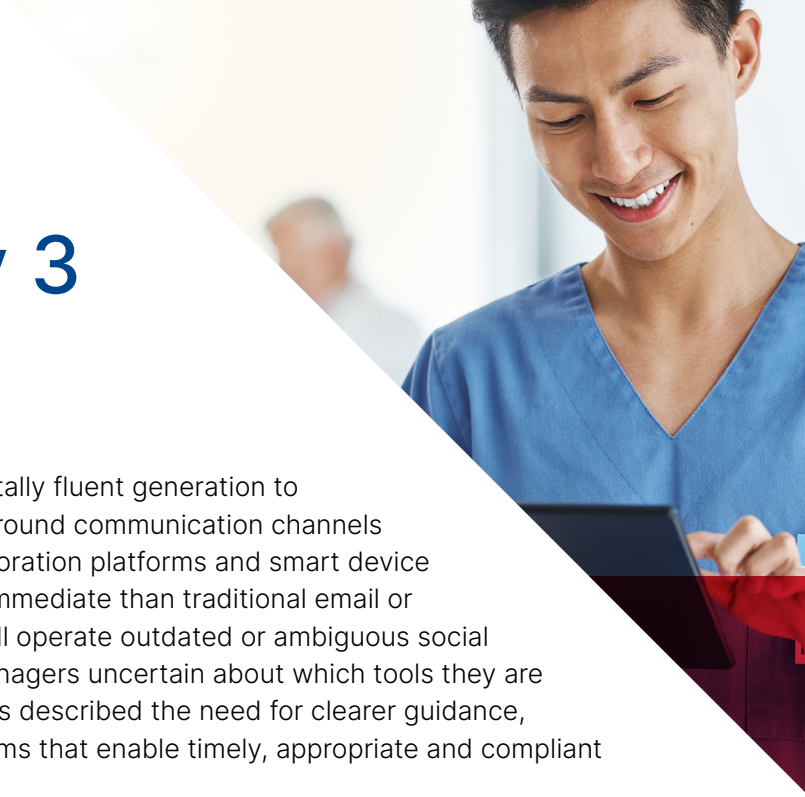
Use real-time workforce data to surface system gaps
Integrate scheduling, staffing and human resources data to identify where workloads, overtime or missed breaks are signaling structural stress for Gen Z RNs and their managers.

Build Gen Z fluency among today's nurse leaders
Invest in helping current nurse managers and executives understand who Gen Z RNs are, how they communicate, what they value and how they experience work. As the evidence base for Gen Z RNs' preferences continues to evolve, organizations can use interviews, workforce data and front-line insights to equip leaders with practical, generation-specific tools that strengthen trust, coaching and retention.

Modernize performance management with continuous, "Gen Z-aligned" check-ins
Move beyond annual reviews to frequent, brief check-ins that capture what Gen Z RNs are experiencing, what support they need and how they are progressing. Use short, digital pulse questions and regular manager touchpoints to surface issues, recognize strengths and guide development in real time.

Redesign systems to enable a clinical "lattice"
Modernize HR policies, compensation and role design to replace traditional vertical clinical ladders with skill-based clinical lattices. Align job descriptions, compensation and total rewards, credentialing and performance management with demonstrated proficiency rather than tenure. Create clear pathways that allow nurses to lattice across inpatient, ambulatory and specialty settings, building a structural foundation for flexible career movement and a truly competency-based operating model.

Partner across nursing and HR executives to build a competency-based talent and leadership system
Nurse executives and Chief Human Resources Officers should jointly lead the transition from traditional, tenure-driven structures to a competency-based operating model that integrates modern performance management, competency-based role progression and innovative leadership development pathways.



Executive Priority 3

Modernize communication

Interviewees emphasized that Gen Z is the most digitally fluent generation to enter the nursing workforce and their expectations around communication channels reflect that reality. Texting, secure messaging, collaboration platforms and smart device app-based interactions often feel more natural and immediate than traditional email or visual board communications. Many organizations still operate outdated or ambiguous social media and communication policies, leaving nurse managers uncertain about which tools they are permitted to use to connect with their teams. Leaders described the need for clearer guidance, modernized policies and enterprise-approved platforms that enable timely, appropriate and compliant communication across multiple channels.

At the same time, nurse managers are expected to communicate simultaneously with baby boomer, Gen X, millennial and Gen Z RNs while each have their own preferences and expectations. High-performing organizations are, therefore, moving toward multi-channel communication strategies, recognizing that no single modality will meet everyone's needs and that leaders require tools, training and a tailored approach to navigate this complexity effectively.

> *"I've heard negative comments from Gen Z about how much email is used in our organization; it seems to them to be an archaic form of communication."*

Importantly, interviewed leaders cautioned against a common misconception that Gen Z prefers digital communication at the expense of human connection. While technology is a natural part of how this generation communicates, Gen Z RNs consistently express a strong desire for face-to-face, one-on-one interactions with their managers. Those personal conversations, whether about performance, well-being or career aspirations, are central to building trust and engagement; their importance cannot be overstated. High-performing organizations are intentionally modernizing both their communication platforms and practices, so communication is clear, timely, multi-channel and relational—balancing digital efficiency with meaningful human connection.

Explain the "why" behind decisions and provide feedback
Frame requests regarding policy or other process changes with clear context and purpose so that Gen Z RNs understand how their work connects to patient care, safety and team success.

Understand Gen Z's preferred communication and learning channels
Intentionally assess how Gen Z nurses prefer to communicate and learn, including the use of apps, secure messaging, podcasts, micro-videos and in-person interactions.

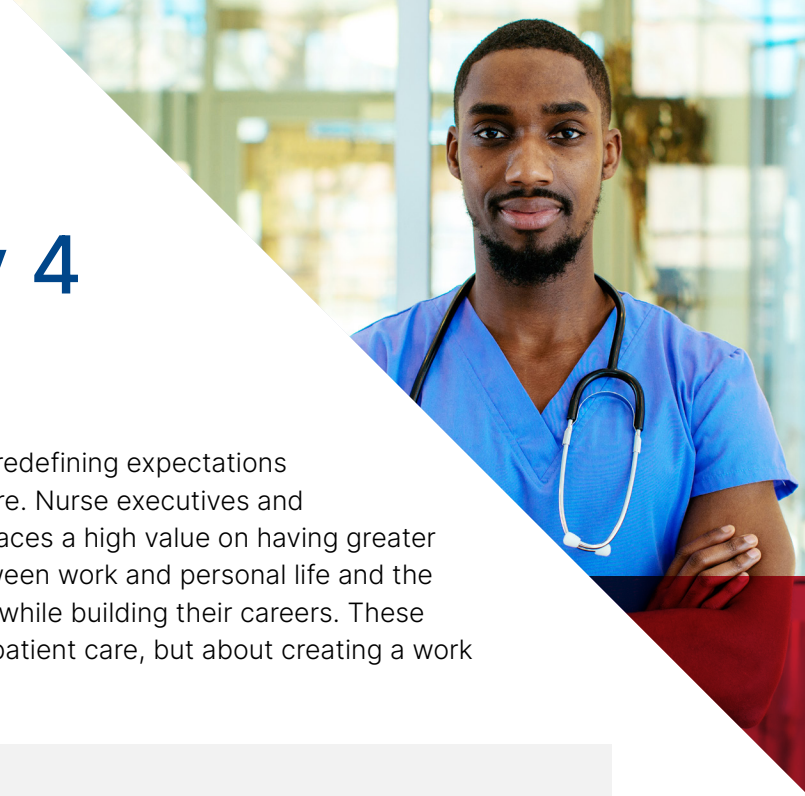
Modernize communication policies and approved platforms
Update social media, messaging and collaboration policies so they reflect how Gen Z RNs actually communicate while remaining secure and compliant. Clearly define which platforms leaders are permitted to use to engage their teams.

Deploy enterprise-approved digital communication hubs
Provide managers with mobile-first, Gen Z–friendly platforms for announcements, recognition, scheduling updates and education. This reduces reliance on email as the primary channel. In partnership with IT, integrate an enterprise-approved, AI-enabled "chat" capability that allows nurses to easily search, ask questions and retrieve policies, procedures and just-in-time guidance.

Engage Gen Z communication mentors (sometimes known as "reverse mentoring")
Pair senior nursing and HR leaders with Gen Z RNs or early career clinicians who can serve as communication and social media mentors, helping leaders understand which channels to use, how to frame messages and what language builds credibility and trust with Gen Z staff.

Create "generational personas" to personalize communication and education
Partner with marketing and communications teams to conduct nurse focus groups and develop marketing "nurse personas" based on role, career stage and communication preferences. Use these personas to guide how the organization delivers information, education and updates—shifting from one-size-fits-all messaging to short, mobile-friendly, just-in-time content tailored to how different nurses prefer to learn and engage.

Partner with academic institutions to co-design communication strategies
Collaborate with nursing schools and academic partners to share insights, tools and best practices on how Gen Z RNs learn, communicate and engage. Because academic partners are often the first to work with Gen Z RNs, health systems can leverage their experience to align messaging, feedback styles and learning approaches across the education-to-practice continuum—creating a more seamless and engaging transition into the workforce.



Executive Priority 4

Prioritize wellness and flexibility

This focus area reflects how strongly Gen Z RNs are redefining expectations around work, flexibility and sustainability in health care. Nurse executives and managers consistently shared that this generation places a high value on having greater control over their schedules, clearer boundaries between work and personal life and the ability to maintain physical and emotional well-being while building their careers. These expectations are not about reduced commitment to patient care, but about creating a work experience that is sustainable over time.

> *"With every career decision, Gen Z weighs the opportunity against the potential impact on their mental health and wellbeing, which is different from prior generations."*

Interviewees noted that many traditional scheduling models were designed around assumptions that nurses would tolerate long hours, frequent overtime and rigid shift structures in exchange for long-term career advancement and job security. Gen Z RNs, by contrast, expect flexibility, transparency and fairness in how organizations assign work and manage time off. They are more likely to question staffing practices that consistently result in burnout, missed breaks or unpredictable schedules and they are also more willing to seek alternative roles or employers when those conditions persist.

> *"Because Gen Z nurses place a high value on family, hobbies and personal interests, leaders must intentionally design work that aligns with (rather than competes with) their broader priorities."*

Interviewees also highlighted the added complexity in unionized environments, where seniority-based scheduling and job protections influence workforce stability and fairness. While these structures provide meaningful benefits, they can sometimes limit flexibility for newer nurses and make it harder to accommodate the scheduling preferences and well-being priorities of Gen Z RNs.

Leaders described the importance of working collaboratively with labor partners to explore more flexible approaches that preserve equity while also supporting a more sustainable and engaging work experience for all generations. In unionized environments, nurse executives should work collaboratively to balance seniority-based protections with the flexibility needed to support Gen Z nurses and overall workforce well-being.

Nurse leader interviewees stressed that prioritizing work-life balance is a commitment that starts with leaders. Nurse managers set expectations, protect time off, address chronic understaffing and advocate for their teams. Health systems that treat work-life balance as a strategic priority are better positioned to retain Gen Z RNs and build a more resilient and sustainable nursing workforce.

Establish predictable, transparent scheduling practices
Use clear rules for shift assignments, overtime and time off approvals so that nurses understand how and why the organization makes decisions to support equitable experiences.

Protect breaks, PTO and recovery time
Ensure nurses can take scheduled breaks and use earned PTO, reinforcing that recovery time is essential to safe practice and long-term retention.

Set clear expectations around availability and boundaries
Clarify when the organization expects nurses to be reachable and when they are not, helping prevent constant connectivity from eroding well-being.

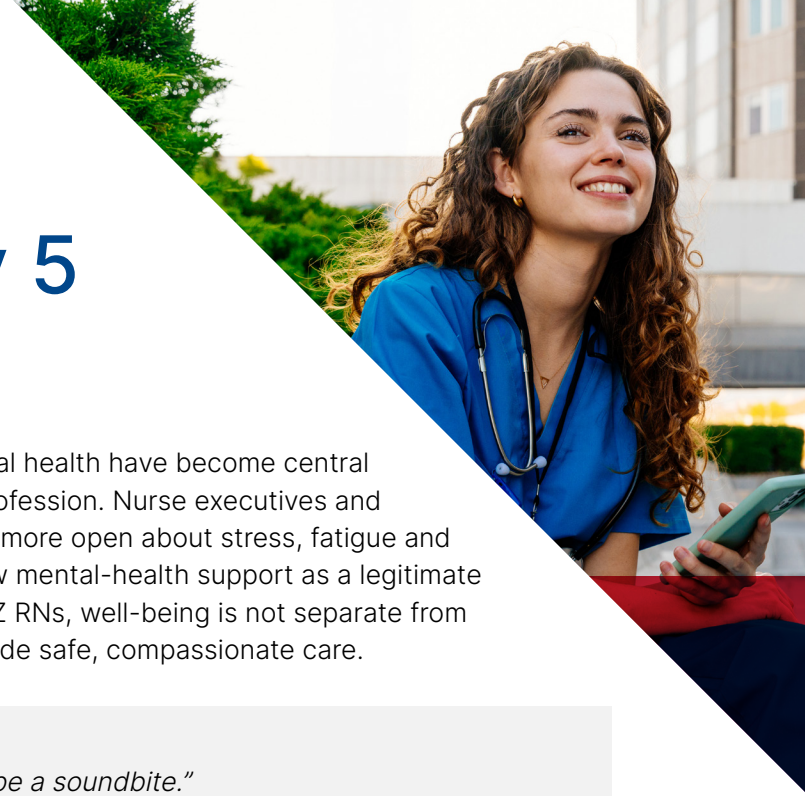
Engage labor partners in supporting sustainability
In unionized environments, work collaboratively to balance seniority-based protections with the flexibility needed to support Gen-Z nurses and overall workforce well-being.

Offer flexible shift and role designs
As possible, expand options such as 4-, 6-, 8- and 12-hour shifts, job-sharing and internal float pools to better match Gen Z RNs' needs for flexibility while maintaining continuity of care.

Use technology-enabled self-scheduling
Use app-based and e-scheduling as the default staffing approach. Move away from last-minute phone calls to "beg" staff to work while standardizing transparent rules for shift assignments, overtime and time off so that nurses experience scheduling as fair, predictable and easy to navigate.

Pilot new models of coverage and support
Test team-based staffing, night-shift advanced practice support and charge nurse roles without patient care assignments to reduce stress and increase sustainability for Gen-Z nurses.

Establish a "Gen Z Advisory Council" for leadership insight
Create a standing group of Gen Z RNs who regularly advise executives and nurse leaders on work–life balance, communication and career expectations, ensuring organizational decisions are grounded in the lived experience of the generation.



Executive Priority 5

Advocate for mental health

Emotional well-being, psychological safety and mental health have become central to workforce strategy as Gen Z enters the nursing profession. Nurse executives and managers consistently shared that this generation is more open about stress, fatigue and emotional strain; similarly, they are more likely to view mental-health support as a legitimate and necessary part of a healthy workplace. For Gen Z RNs, well-being is not separate from performance; it is foundational to their ability to provide safe, compassionate care.

> *"Well-being can't be a soundbite."*

Leaders noted that many Gen Z RNs are beginning their careers in an era marked by extraordinary clinical intensity, staffing shortages and sustained system-level stress. At the same time, they are less willing than previous generations to normalize burnout as an unavoidable cost of working in health care. When organizations fail to acknowledge emotional strain or provide meaningful support, Gen Z RNs are more likely to disengage or leave. This is not out of lack of commitment, but out of a desire to protect their long-term health and professional viability.

> *"Having access to a centralized wellness team—comprised of social workers and therapists—allows me to request timely, professional check-ins whenever I am worried about a team member."*

Importantly, interviewees stressed that organizations cannot treat wellness as an individual responsibility alone. The design of work, the adequacy of staffing, the consistency of leadership support and the availability of mental-health resources all shape whether nurses can sustain themselves over time. Health systems that integrate wellness into leadership expectations, operational decisions and workforce strategy are better positioned to engage and retain Gen Z RNs and to build healthier, more sustainable care environments for all generations.

Normalize conversations about stress, trauma and mental health
Provide safe, stigma-free ways to ask for help. Establish policies and practices that encourage nurses to seek support without fear of judgment or negative career consequences. Create expectations that nurse managers regularly check in on emotional well-being.

Make reassurance after high-stress or emotional events a standard practice
Check in after patient deaths, adverse events, conflict or traumatic situations to acknowledge the emotional impact.

Train managers to recognize early signs of distress
Equip leaders with the skills to notice changes in behavior, performance or engagement that may signal burnout, anxiety or emotional strain.

Create protected mental-health and recovery time
Allow and de-stigmatize the use of PTO or designated leave for mental-health days and ensure staffing plans can absorb these absences without penalizing teams.

Deploy mental-health rounding and rapid-response support teams
Establish dedicated wellness teams that proactively round on units, debrief after traumatic events and provide rapid access to peer support, chaplaincy, social work, and/or counseling when nurses are in distress. Ensure that clear, detailed information about available resources and the steps required to access them is consistently visible and easy to find.

Use data to identify workload and burnout risk early
Integrate time-and-attendance, staffing and PTO data to flag patterns of fatigue, missed breaks or excessive overtime so that leaders can intervene proactively.

Embed emotional intelligence and psychological safety into leader development
Train managers on how to hold supportive conversations, de-escalate conflict and help Gen Z RNs process stress without disengaging from their work.

Create a network of Ethics Resource Nurses
Train front-line nurses as Ethics Resource Nurses (ERNs) who serve as unit-based experts for ethical dilemmas, moral distress and conflict arising from high-stress clinical and operational situations. These nurses can provide real-time peer support, support teams through ethically complex decisions and help connect staff to formal organizational ethics committees and other resources, making ethical support visible, accessible and embedded in daily care.

Design a “safe-to-work” experience, not just a secure campus
Move beyond physical security to create a true sense of safety for Gen Z RNs before, during and after each shift. Combine visible campus patrols, weapon detection and rapid security response with proactive rounding by security and wellness teams, clear expectations for patient and family behavior, early identification of volatile situations and ongoing data collection and monitoring. When nurses can see and feel that the organization anticipates and addresses risks, trust, well-being and retention increase.

Conclusion

The findings in this report highlight a pivotal moment for health systems: a new generation of RNs is not only fast-growing but also changing the role of nursing leadership that has supported prior generations. This new generation is also on the cusp of stepping into the nurse manager role themselves, paving the way for greater change and influence. By pairing the report's statistical trends and insights with tactics that support Gen Z RNs' unique needs and leadership development opportunities, health systems can co-develop impactful new innovations in career growth, scheduling, recognition, coaching and culture.

Contributors

Claire M. Zangerle DNP, MBA, RN, NEA-BC, FAONL, FAAN
Chief Executive Officer, American Organization for Nursing Leadership (AONL)
Chief Nursing Executive, American Hospital Association (AHA)

Tim Darling
President, Laudio Insights

Joel D. Ray MSN, RN, NEA-BC
Colonel, USAF, NC, retired
Chief Nursing Officer, UNC Health Rex, retired
Chief Clinical Advisor, Laudio

Joni L. Watson DNP, MBA, RN, OCN
Senior Director, Professional Practice, AONL

Rose O. Sherman EdD, RN, NEA-BC, FAAN

Ama Mathewos MPA, BSN, RN, NEA-BC, CTACC

Andy Johnson PhD
Lead Statistician, Laudio

Sudip Raj Koirala
Analytics Team Lead, Laudio

Sandhya Shahi
Analytics Manager, Laudio

Laxman Khati
Analytics and AI Engineer, Laudio

Jill Ragsdale
Chief HR Advisor, Laudio

Catherine Wilkosz RN, BSN, MSc
Vice President of Strategic Content, Laudio

Nurse Leader Interviews

Executives:

Kathy Baker PhD, RN, NE-BC

Gerald W. Bryant DNP, RN

Shakira Henderson PhD, DNP, MS, MPH, EMBA, IBCLC, RNC-NIC

Cynthia Latney DHA(c), MSN, RN, NE-BC

Brennan Lewis DNP, APRN, PCNS-BC, NEA-BC

Christopher McLarty DNP, ACNP-BC

Janice Walker DHA, MBA-HCM, BSN, RN, NEA-BC

Angie Wright MSN-L, RN

Managers:

Rebecca Boop DNP, RN

Courtney Bullard MSN, RN-BC

Jessica Fears RN

Courtney Kay BSN, RN

Nora Kramer BSN, RN, CCRN

Autumn Yordy BSN, RN, CCRN

Appendix 1

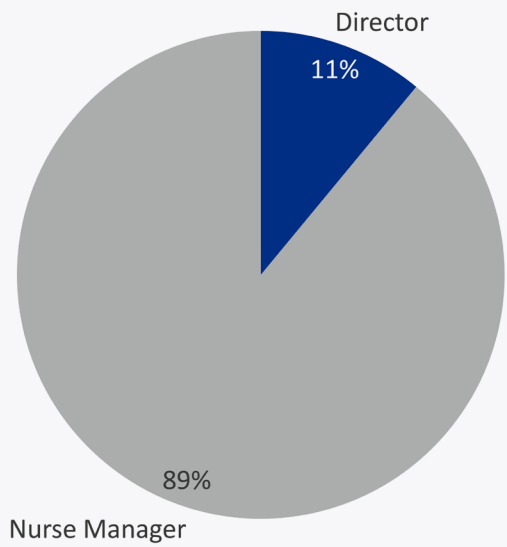
Nurse Manager Job Titles

This report uses the term "nurse manager" to refer to any leader of a patient-facing department. Typically, all team members report to the nurse manager directly. Some nurse managers have the specific role(s) of assistant nurse managers reporting to them. Assistant nurse managers also have direct reports but do not manage anyone with a nurse manager title.

Of these "nurse managers," some organizations use "director" instead of "manager" as their title (Figure 10).

Overall, 11% of nurse managers in this report sample have "director" as a job title. For the purposes of this data analysis and report, Laudio Insights included all these individuals in the sample.

Distribution of "nurse managers", as defined in this report, by job title



In this report, the term "nurse managers" refers to anyone who is responsible for the operation of a cost center; typically, they have most of the team members reporting to them directly

By this definition, 11% of these "nurse managers" have "director" as a job title

Source: Laudio Insights

Figure 10

Appendix 2

Distribution of nurse managers in the data set by geography, facility ANCC Magnet® status, facility bed size and specialty

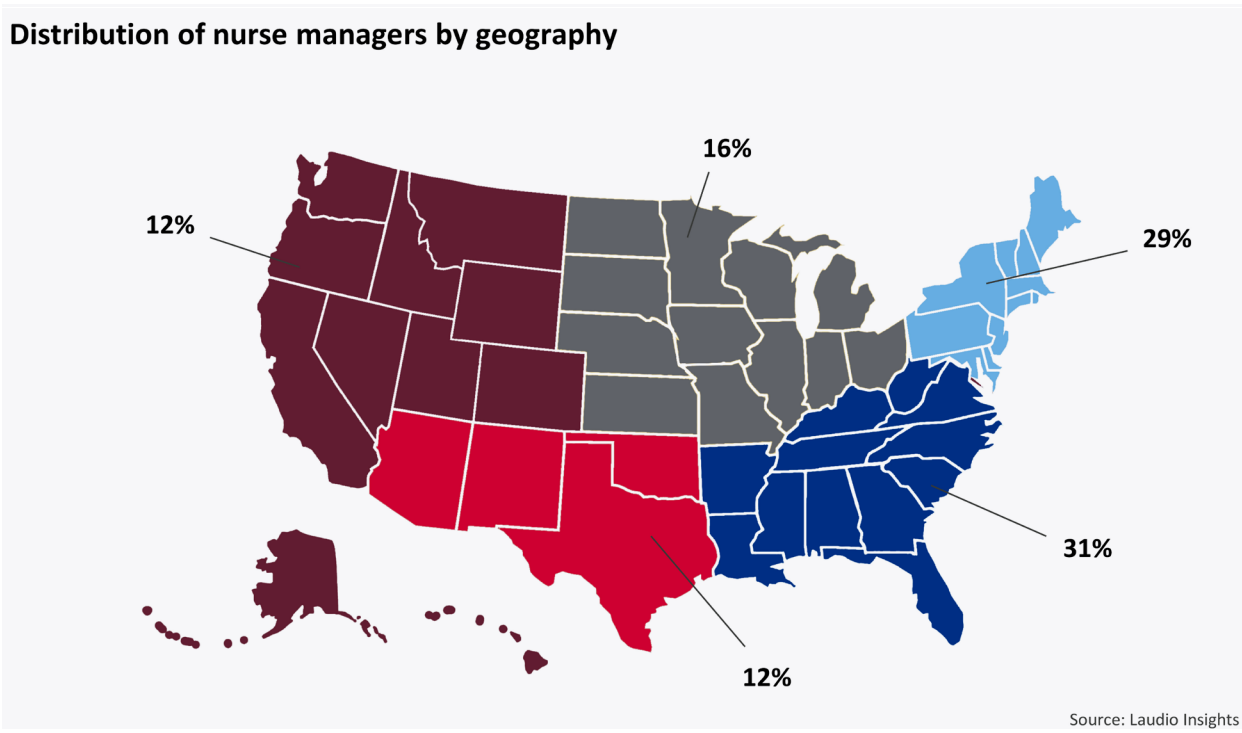


Figure 11

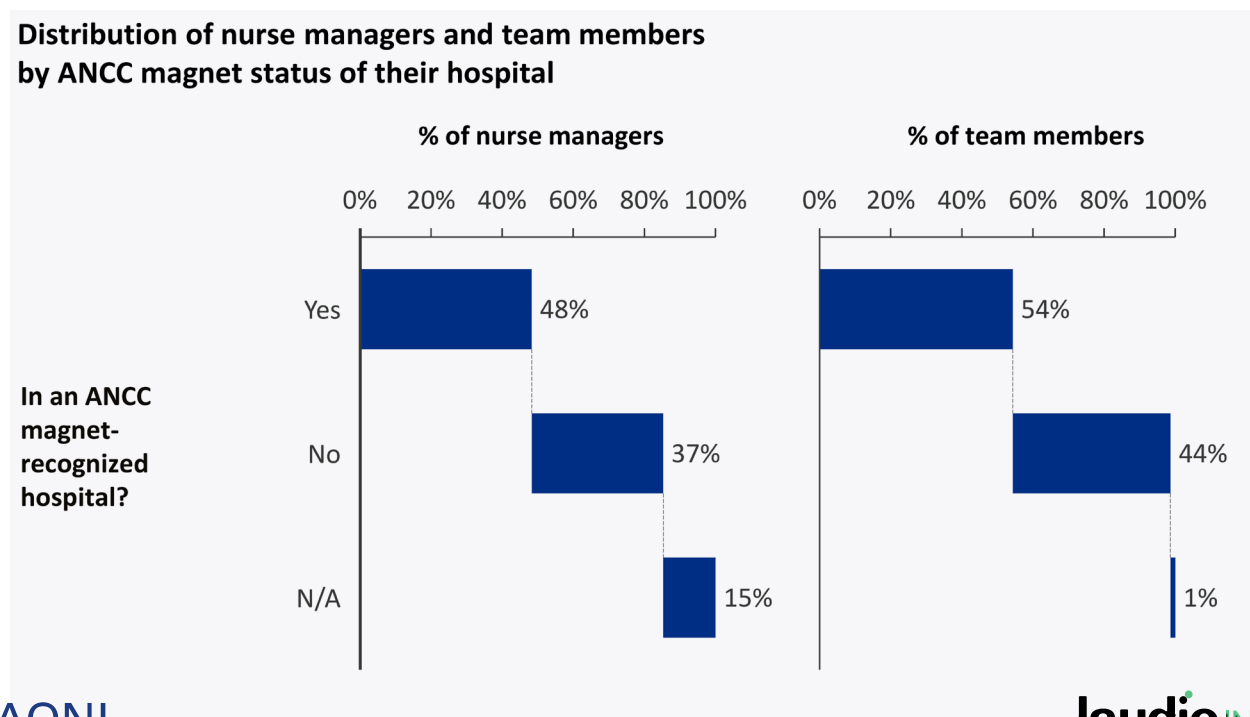


Figure 12

Appendix 3

Additional details of the data set and models used in analyses

Details on the regression analysis

For the statistically significant finding, Laudio Insights used a Bayesian multi-level logistic regression model (MLwiN 3.07) with non-informative priors to estimate RN retention as a function of a collection of employee, manager and facility attributes as well as documented manager-employee interactions. These models include random effects to account for hierarchical clustering due to organizational structure (i.e., employees within managers within facilities within organizations). Attributes include employee age, specialty and tenure, among others. Laudio Insights excluded per diem employees from the sample.

This analysis estimates RN retention as a function of manager change and residual variation at the system, facility, manager and individual level. Laudio Insights assessed variation within each level using random intercept terms.

Appendix 4

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