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## Nursing, Psychiatric, and Home Health Aides

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(O\*NET 31-1011.00, 31-1012.00, 31-1013.00)

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### Significant Points

- Numerous job openings and excellent job opportunities are expected.
- Most jobs are in nursing and residential care facilities, hospitals, and home health care services.
- This occupation is characterized by modest entry requirements, low pay, high physical and emotional demands, and limited advancement opportunities.

### Nature of the Work

Nursing and psychiatric aides help care for physically or mentally ill, injured, disabled, or infirm individuals in hospitals, nursing care facilities, and mental health settings. Home health aides have duties that are similar, but they work in patients' homes or residential care facilities. Nursing aides and home health aides are among the occupations commonly referred to as direct care workers, due to their role in working with patients who need long-term care. The specific care they give depends on their specialty.

*Nursing aides*—also known as nurse aides, nursing assistants, certified nursing assistants, geriatric aides, unlicensed assistive personnel, orderlies, or hospital attendants—provide hands-on care and perform routine tasks under the supervision of nursing and medical staff. Specific tasks vary, with aides handling many aspects of a patient's care. They often help patients to eat, dress, and bathe. They also answer calls for help, deliver messages, serve meals, make beds, and tidy up rooms. Aides sometimes are responsible for taking a patient's temperature, pulse rate, respiration rate, or blood pressure. They also may help provide care to patients by helping them get into and out of bed and walk, escorting them to operating and examining rooms, or providing skin care. Some aides help other medical staff by setting up equipment, storing and moving supplies, and assisting with some procedures. Aides also observe patients' physical, mental, and emotional conditions and report any change to the nursing or medical staff.

Nurse aides employed in nursing care facilities often are the principal caregivers, having far more contact with residents than do other members of the staff. Because some residents may stay in a nursing care facility for months or even years, aides develop ongoing relationships with them and interact with them in a positive, caring way.

*Home health aides* help elderly, convalescent, or disabled persons live in their own homes instead of health care facilities. Under the direction of nursing or medical staff, they provide health-related services, such as administering oral medications. (Personal and home care aides, who provide mainly housekeeping and routine personal care services, are discussed elsewhere in the *Handbook*.) Like nursing aides, home health aides may check patients' pulse rate, temperature, and respiration rate; help with simple prescribed exercises; and help patients to get in and out of bed, bathe, dress, and groom. Occasionally, they

change nonsterile dressings, give massages and provide skin care, or assist with braces and artificial limbs. Experienced home health aides, with training, also may assist with medical equipment such as ventilators, which help patients breathe.

Most home health aides work with elderly or disabled persons who need more extensive care than family or friends can provide. Some help discharged hospital patients who have relatively short-term needs.

In home health agencies, a registered nurse, physical therapist, or social worker usually assigns specific duties to and supervises home health aides, who keep records of the services they perform and record each patient's condition and progress. The aides report changes in a patient's condition to the supervisor or case manager.

*Psychiatric aides*, also known as mental health assistants or psychiatric nursing assistants, care for mentally impaired or emotionally disturbed individuals. They work under a team that may include psychiatrists, psychologists, psychiatric nurses, social workers, and therapists. In addition to helping patients to dress, bathe, groom themselves, and eat, psychiatric aides socialize with them and lead them in educational and recreational activities. Psychiatric aides may play card games or other games with patients, watch television with them, or participate in group activities, such as playing sports or going on field trips. They observe patients and report any physical or behavioral signs that might be important for the professional staff to know. They accompany patients to and from therapy and treatment. Because they have such close contact with patients, psychiatric aides can have a great deal of influence on their outlook and treatment.

**Work environment.** Work as an aide can be physically demanding. Aides spend many hours standing and walking, and they often face heavy workloads. Aides must guard against back injury because they may have to move patients into and out of bed or help them to stand or walk. It is important for aides to be trained in and to follow the proper procedures for lifting and moving patients. Aides also may face hazards from



*Aides help care for physically or mentally ill, injured, disabled, or infirm individuals in a variety of settings.*

minor infections and major diseases, such as hepatitis, but can avoid infections by following proper procedures.

Aides also perform tasks that some may consider unpleasant, such as emptying bedpans and changing soiled bed linens. The patients they care for may be disoriented, irritable, or uncooperative. Psychiatric aides must be prepared to care for patients whose illness may cause violent behavior. Although their work can be emotionally demanding, many aides gain satisfaction from assisting those in need.

Home health aides may go to the same patient's home for months or even years. However, most aides work with a number of different patients, each job lasting a few hours, days, or weeks. Home health aides often visit multiple patients on the same day.

Home health aides generally work alone, with periodic visits from their supervisor. They receive detailed instructions explaining when to visit patients and what services to perform. Aides are individually responsible for getting to patients' homes, and they may spend a good portion of the working day traveling from one patient to another. Because mechanical lifting devices available in institutional settings are not as frequently available in patients' homes, home health aides must take extra care to avoid injuries resulting from overexertion when they assist patients.

Most full-time aides work about 40 hours per week, but because patients need care 24 hours a day, some aides work evenings, nights, weekends, and holidays. In 2006, 23 percent of aides worked part time compared with 15 percent of all workers.

### **Training, Other Qualifications, and Advancement**

In many cases, a high school diploma or equivalent is necessary for a job as a nursing or psychiatric aide. However, a high school diploma generally is not required for jobs as home health aides. Specific qualifications vary by occupation, State laws, and work setting. Advancement opportunities are limited.

**Education and training.** Nursing and psychiatric aide training is offered in high schools, vocational-technical centers, some nursing care facilities, and some community colleges. Courses cover body mechanics, nutrition, anatomy and physiology, infection control, communication skills, and resident rights. Personal care skills, such as how to help patients to bathe, eat, and groom themselves, also are taught. Hospitals may require previous experience as a nursing aide or home health aide. Some States also require psychiatric aides to complete a formal training program. However, most psychiatric aides learn their skills on the job from experienced workers.

Home health aides are generally not required to have a high school diploma. They usually are trained on the job by registered nurses, licensed practical nurses, or experienced aides. Also, clients may prefer that tasks are done a certain way, and make those suggestions to the home health aide. A competency evaluation may be required to ensure the aide can perform the required tasks.

Some employers provide classroom instruction for newly hired aides, while others rely exclusively on informal on-the-job instruction by a licensed nurse or an experienced aide. Such training may last from several days to a few months. Aides also may attend lectures, workshops, and in-service training.

**Licensure and certification.** The Federal Government has guidelines for home health aides whose employers receive reimbursement from Medicare. Federal law requires home health aides to pass a competency test covering a wide range of areas. A home health aide may receive training before taking the competency test. In addition, the National Association for Home Care and Hospice offers voluntary certification for home health aides. Some States also require aides to be licensed.

Similar Federal requirements exist for nurse aides who work in nursing care facilities. These aides must complete a minimum of 75 hours of state-approved training and pass a competency evaluation. Aides who complete the program are known as certified nurse assistants (CNAs) and are placed on the State registry of nurse aides.

**Other qualifications.** Aides must be in good health. A physical examination, including State-regulated tests such as those for tuberculosis, may be required. A criminal background check also is usually required for employment.

Applicants should be tactful, patient, understanding, emotionally stable, and dependable and should have a desire to help people. They also should be able to work as part of a team, have good communication skills, and be willing to perform repetitive, routine tasks. Home health aides should be honest and discreet because they work in private homes. They also will need access to a car or public transportation to reach patients' homes.

**Advancement.** Opportunities for advancement within these occupations are limited. Aides generally need additional formal training or education to enter other health occupations. The most common health care occupations for former aides are licensed practical nurse, registered nurse, and medical assistant.

For some individuals, these occupations serve as entry-level jobs. For example, some high school and college students gain experience working in these occupations while attending school. In addition, experience as an aide can help individuals decide whether to pursue a career in health care.

### **Employment**

Nursing, psychiatric, and home health aides held about 2.3 million jobs in 2006. Nursing aides held the most jobs—approximately 1.4 million. Home health aides held roughly 787,000 jobs, and psychiatric aides held about 62,000 jobs. About 52 percent of nursing aides worked in nursing and residential care facilities and another 29 percent worked in hospitals. Home health aides were mainly employed by home health care services, nursing and residential care facilities and social assistance agencies. About 47 percent of all psychiatric aides worked in hospitals, primarily in psychiatric and substance abuse hospitals, although some also worked in the psychiatric units of general medical and surgical hospitals. Others were employed in State government agencies; residential mental retardation, mental health, and substance abuse facilities; and nursing and residential care facilities.

### **Job Outlook**

Excellent job opportunities for nursing, psychiatric, and home health aides will arise from a combination of rapid employment growth and the need to replace the many workers who leave the occupation each year.

**Projections data from the National Employment Matrix**

Occupational Title	SOC Code	Employment, 2006	Projected employment, 2016	Change, 2006-16	
				Number	Percent
Nursing, psychiatric, and home health aides .....	31-1000	2,296,000	2,944,000	647,000	28
Home health aides.....	31-1011	787,000	1,171,000	384,000	49
Nursing aides, orderlies, and attendants .....	31-1012	1,447,000	1,711,000	264,000	18
Psychiatric aides.....	31-1013	62,000	62,000	0	0

NOTE: Data in this table are rounded. See the discussion of the employment projections table in the *Handbook* introductory chapter on *Occupational Information Included in the Handbook*.

**Employment change.** Overall employment of nursing, psychiatric, and home health aides is projected to grow 28 percent between 2006 and 2016, much faster than the average for all occupations. However, growth will vary for the individual occupations. Home health aides are expected to gain jobs faster than other aides as a result of growing demand for home services from an aging population and efforts to contain costs by moving patients out of hospitals and nursing care facilities as quickly as possible. Consumer preference for care in the home and improvements in medical technologies for in-home treatment also will contribute to much-faster-than-average employment growth for home health aides.

Nursing aide employment will not grow as fast as home health aide employment, largely because nursing aides are concentrated in relatively slower-growing industries. Employment of nursing aides is expected to grow faster than the average for all occupations through 2016, in response to the long-term care needs of an increasing elderly population. Financial pressures on hospitals to discharge patients as soon as possible should boost admissions to nursing care facilities. As a result, job openings will be more numerous in nursing and residential care facilities than in hospitals. Modern medical technology also will drive demand for nursing aides because as the technology saves and extends more lives, it increases the need for long-term care provided by aides.

Little or no change is expected in employment of psychiatric aides—the smallest of the three occupations. Most psychiatric aides currently work in hospitals, but the industries most likely to see growth will be residential facilities for people with developmental disabilities, mental illness, and substance abuse problems. There is a long-term trend toward treating psychiatric patients outside of hospitals because it is more cost effective and allows patients to live more independent lives. Demand for psychiatric aides in residential facilities will rise in response to the increase in the number of older persons, many of whom will require mental health services. Growing demand for these workers also rests on an increasing number of mentally disabled adults who were formerly cared for by their elderly parents and who will continue to need care. Job growth also could be affected by changes in government funding of programs for the mentally ill.

**Job prospects.** High replacement needs for nursing, psychiatric, and home health aides reflect modest entry requirements, low pay, high physical and emotional demands, and limited opportunities for advancement within the occupation. For these same reasons, the number of people looking to enter the occupation will be limited. Many aides leave the occupation to attend training programs for other health care occupations. Therefore,

people who are interested in, and suited for, this work should have excellent job opportunities.

**Earnings**

Median hourly earnings of nursing aides, orderlies, and attendants were \$10.67 in May 2006. The middle 50 percent earned between \$9.09 and \$12.80 an hour. The lowest 10 percent earned less than \$7.78, and the highest 10 percent earned more than \$14.99 an hour. Median hourly earnings in the industries employing the largest numbers of nursing aides, orderlies, and attendants in May 2006 were:

Local government .....	\$12.15
Employment services .....	11.47
General medical and surgical hospitals.....	11.06
Nursing care facilities .....	10.37
Community care facilities for the elderly .....	10.07

Nursing and psychiatric aides in hospitals generally receive at least 1 week of paid vacation after 1 year of service. Paid holidays and sick leave, hospital and medical benefits, extra pay for late-shift work, and pension plans also are available to many hospital employees and to some nursing care facility employees.

Median hourly earnings of home health aides were \$9.34 in May 2006. The middle 50 percent earned between \$7.99 and \$10.90 an hour. The lowest 10 percent earned less than \$7.06, and the highest 10 percent earned more than \$13.00 an hour. Median hourly earnings in the industries employing the largest numbers of home health aides in May 2006 were:

Nursing care facilities .....	\$9.76
Residential mental retardation facilities.....	9.34
Services for the elderly and persons with disabilities.....	9.26
Home health care services .....	9.14
Community care facilities for the elderly .....	8.87

Home health aides receive slight pay increases with experience and added responsibility. Usually, they are paid only for the time worked in the home, not for travel time between jobs, and must pay for their travel costs from their earnings. Most employers hire only on-call hourly workers and provide no benefits.

Median hourly earnings of psychiatric aides were \$11.49 in May 2006. The middle 50 percent earned between \$9.20 and \$14.46 an hour. The lowest 10 percent earned less than \$7.75, and the highest 10 percent earned more than \$17.32 an hour.

Median hourly earnings in the industries employing the largest numbers of psychiatric aides in May 2006 were:

State government.....	\$13.27
General medical and surgical hospitals.....	12.31
Psychiatric and substance abuse hospitals .....	11.76
Residential mental health and substance abuse facilities.....	9.65
Residential mental retardation facilities.....	8.80

**Related Occupations**

Nursing, psychiatric, and home health aides help people who need routine care or treatment. So do child care workers, licensed practical and licensed vocational nurses, medical assistants, occupational therapist assistants and aides, personal and home care aides, physical therapist assistants and aides, radiation therapists, and registered nurses. Social and human service assistants, who sometimes work with mental health patients, do work similar to that of psychiatric aides.

**Sources of Additional Information**

Information about employment opportunities may be obtained from local hospitals, nursing care facilities, home health care

agencies, psychiatric facilities, State boards of nursing, and local offices of the State employment service.

Information on licensing requirements for nursing and home health aides, and lists of State-approved nursing aide programs are available from State departments of public health, departments of occupational licensing, boards of nursing, and home care associations.

For more information on training and requirements for home health aides, contact:

➤ National Association for Home Care and Hospice, 228 7th St.SE., Washington, DC 20003.

Internet: <http://www.nahc.org>

For more information on the home health care industry, contact:

➤ Visiting Nurse Associations of America, 8403 Colesville Rd., Suite 1550, Silver Spring, MD 20910-6374.

Internet: <http://www.vnaa.org>

For more information on the health care workforce, contact:

➤ The Center for the Health Professions, 3333 California St., San Francisco, CA 94118.

Internet: <http://www.futurehealth.ucsf.edu>