

Nursing Pay in Private Industry, 1994

Registered nurses, among the best educated of the nursing occupations, earned, on average, considerably more than either licensed practical nurses or nursing assistants. Also, nursing employment is expected to grow significantly over the next decade, adding more than 1 million jobs to the economy.

BY MICHAEL A. MILLER

Between 1994 and 2005, the Bureau of Labor Statistics projects that the health services industry will grow by 3.1 million workers.¹ Included in this number will be more than 1 million new nursing jobs filled by 469,000 registered nurses, 197,000 licensed practical nurses, and 380,000 nursing assistants.²

The Bureau's 1994 survey of pay for nursing and non-nursing occupations in the private health services industry was conducted as part of its Occupational Compensation Survey program (OCS). The survey collected data on pay for nursing as well as non-nursing occupations. The OCS also studies occupational wages for over 150 selected metropolitan areas and non-metropolitan counties across the Nation.

This article reports pay data for three nursing occupations in private industry from the 1994 OCS: Registered nurses (including specialists and nurse anesthetists), licensed practical nurses, and nursing assistants. It also presents a broad overview of the nursing profession, examines the occupation's national employment, and looks at employment projections for the next decade. In addition, a

special section summarizes the job descriptions used by the OCS to match nurses to their jobs.

Among the survey findings are:

- Most nurses surveyed in the private sector worked in the private health services sub-sector.
- Nationally, pay for nurses in private industry did not vary substantially from pay for nurses in the same jobs in either the private health services sub-sector or the private hospitals sub-sector.
- Registered nurses who specialized in a particular medical discipline were paid higher wages than non-specialists, with nurse anesthetists having the highest average wage.
- Private sector nursing pay in major metropolitan areas was typically much higher than the national average for each of the three nursing occupations studied.

Pay for nurses

Across the various job levels of

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Table 1. Weekly pay for nurses, 1994

Occupation and level	All private industry		
	Total	Private health services	
		Total	Hospitals
Registered nurses			
I	\$590	\$589	\$589
II	711	711	719
II specialists	762	762	761
III	960	964	974
III anesthetists	1464	1464	1502
IV	982	982	978
Licensed practical nurses			
I	391	393	397
II	453	453	450
III	527	525	522
Nursing assistants			
I	236	237	310
II	272	273	312
III	349	348	371
IV	444	444	432

the three nursing occupations, pay for nurses in private health services did not vary significantly from pay for nurses in all private industry in 1994. Nursing pay in private hospitals did vary somewhat. The differences were typically small, however, exceeding 10 percent only for the first two job levels of nursing assistants.

The all private industry data in table 1 show that registered nurses, the most highly trained and skilled of the three nursing occupations, were the best paid. Among registered nurses, 90 percent worked at level II where they averaged \$711 a week nationwide.³ Registered nurse specialists, level II, averaged 7 percent more pay than non-specialists at level II, and nurse anesthetists earned one and one half times the amount other level III registered nurses earned, averaging \$1,464 per week. Over 9 in 10 licensed practical nurses were classified at level II, and these workers averaged \$453 per week. The most populous level of nursing assistants—again level II—averaged \$272 per week.

Pay for nurses in private health services in the larger metropolitan

areas was typically higher than the national average, and lower than the national average in smaller cities and non-metropolitan areas (table 2). For example, registered nurses, level II, averaged \$711 a week nationwide. In major metropolitan areas their wages were higher, up to \$1,013 in San Jose, California, but averaged less than \$600 in some non-metropolitan areas, such as Butler County, Missouri, and Carroll County, New Hampshire. Likewise, registered nurse specialists, level II, were typically paid more than the national average in larger metropolitan areas such as Boston, Massachusetts and New York, New York. For nurse anesthetists, level III, however, only a small portion of the metropolitan areas studied reported data, making it difficult to draw comparisons from one area to another.

The area differences seen in private health services for registered nurse, level II, in table 2, were repeated for licensed practical nurses and nursing assistants. For example, licensed practical nurses, level II, who averaged \$453 a week nationwide, earned considerably more in larger metropolitan areas, \$662 a

week in San Jose, California, for instance, but less than \$350 a week in some non-metropolitan areas. The same pattern was evident for nursing assistants, with New York City and Nassau-Suffolk counties, New York, paying the highest average wages.

Nationally, pay for registered nurses in private hospitals was about the same as it was for nurses in both private health services and all private industry (table 1). This is because private hospitals dominated employment for registered nurses. Nurse anesthetists affiliated with hospitals held the largest pay advantage, 3 percent, but because of possible sampling error, this difference may not be significant.

For each level of licensed practical nurse in private hospitals, pay was about the same across the three industry breakouts shown in table 1. But because hospitals employed less than two-fifths of the licensed practical nurses, their pay most likely was not the dominant influencing factor in the total average pay for nurses in all private industry.

On the other hand, nursing assistants, about one-fifth of whom

Table 2. Average weekly earnings¹ in nursing occupations, private health services, United States and selected areas, 1994

State, area, and reference month	Registered Nurses					Licensed Practical Nurses			Nursing Assistants		
	I	II	II Specialists	III	III Anesthetists	I	II	III	I	II	III
United States (September)	\$589	\$711	\$762	\$964	\$1,464	\$393	\$453	\$525	\$237	\$273	\$348
Alabama											
Mobile (July)	-	628	-	-	-	-	372	-	-	214	-
Arizona											
Apache County (November)	-	-	-	-	-	-	424	-	-	257	-
Phoenix (April)	-	647	-	-	-	-	461	-	-	268	336
Arkansas											
Little Rock-North Little Rock (December)	-	625	-	-	-	-	371	-	-	218	-
California											
Anaheim-Santa Ana (August)	593	822	915	-	-	-	576	-	-	282	-
Fresno (March)	-	751	-	-	-	-	484	536	-	255	345
Oxnard-Ventura (August)	-	793	-	-	-	-	541	-	-	255	-
Riverside-San Bernardino (May) ...	613	823	842	880	-	-	490	-	-	249	378
San Diego (October)	644	865	-	-	-	-	546	-	230	-	411
San Francisco (April)	-	969	-	-	-	-	613	-	-	302	406
San Jose (July)	801	1,013	-	-	-	-	662	-	-	343	487
San Luis Obispo County (September)	-	-	-	-	-	-	484	-	-	256	-
Visalia-Tulare-Porterville (July) ...	-	665	-	-	-	-	-	-	-	242	-
Colorado											
Colorado Springs (July)	-	-	-	-	-	-	407	-	-	251	-
Denver (December)	-	700	-	-	1,324	-	479	-	-	287	382
Connecticut											
Danbury (February)	652	-	-	-	-	-	623	-	-	346	-
Delaware											
Wilmington (December)	-	760	817	-	-	-	551	-	249	291	-
Florida											
Bradenton (April)	516	-	-	-	-	-	409	-	-	271	-
Miami-Hialeah (October)	-	710	785	969	-	-	466	555	224	269	322
Monroe County (August)	581	-	-	-	-	-	448	-	232	282	-
Orlando (December)	-	642	-	905	-	-	434	462	-	260	339
Tampa-St. Petersburg-Clearwater (July)	-	601	666	-	-	-	454	500	-	259	-
Georgia											
Atlanta (May)	540	674	-	847	-	-	434	-	200	260	339
Augusta (June)	-	676	-	-	-	-	433	-	-	238	-
Idaho											
Boise City (November)	-	-	-	-	-	-	443	-	-	259	-
Illinois											
Chicago (May)	-	740	818	910	1,232	-	512	537	-	265	386
Joliet (August)	565	684	-	-	-	-	504	-	-	271	-
Vermilion County (December)	-	-	-	-	-	-	396	-	-	228	-
Indiana											
Elkhart-Goshen (November)	-	-	-	-	-	-	515	-	-	269	319

See footnotes at end of table.

Table 2. Average weekly earnings¹ in nursing occupations, private health services, United States and selected areas, 1994 — Continued

State, area, and reference month	Registered Nurses					Licensed Practical Nurses			Nursing Assistants		
	I	II	II Specialists	III	III Anesthetists	I	II	III	I	II	III
Indiana											
Evansville (August)	-	\$588	-	-	-	-	\$442	-	-	\$246	\$298
Fort Wayne (February)	\$553	602	-	-	-	-	426	-	-	245	-
Indianapolis (July)	611	655	-	-	-	-	518	-	-	253	297
South Bend-Mishawaka (September)	-	662	-	-	-	-	470	-	-	243	320
Kentucky											
Louisville (June)	604	703	-	-	-	-	444	-	-	259	305
Louisiana											
New Orleans (July)	-	717	\$821	-	-	\$394	453	\$523	\$196	205	-
Shreveport (April)	-	624	-	-	-	-	404	-	160	209	-
Maryland											
Baltimore (March)	574	719	904	\$942	-	-	516	-	266	264	323
Massachusetts											
Boston (May)	678	904	1,002	1,182	\$1,439	-	623	-	-	368	394
Lawrence-Haverhill (October)	616	757	-	-	-	-	571	-	-	334	-
Worcester (September)	-	738	-	-	-	-	580	-	-	366	-
Minnesota											
St. Cloud (March)	-	-	-	-	-	-	405	-	-	268	-
Missouri											
Butler County (June)	-	509	-	-	-	-	338	-	-	199	-
Kansas City (September)	-	675	757	901	-	367	457	-	202	243	306
Montana											
Billings (September)	-	-	-	-	-	-	403	-	-	252	-
New Hampshire											
Carroll County (May)	-	543	-	-	-	-	-	-	-	-	-
New Jersey											
Bergen-Passaic (May)	678	866	-	-	-	-	645	669	-	346	354
Monmouth-Ocean (September)	-	755	-	-	-	-	525	-	-	336	-
New Mexico											
Albuquerque (September)	-	-	-	-	-	-	463	-	-	248	-
New York											
Delaware County (October)	-	574	-	-	-	-	348	-	-	249	-
Elmira (September)	-	-	-	-	-	-	385	-	-	-	316
Nassau-Suffolk (November)	826	887	-	-	-	513	591	-	-	414	465
New York (May)	-	955	1,077	1,164	1,381	-	564	-	306	433	448
Poughkeepsie (August)	579	-	-	-	-	-	467	-	-	326	-
Rochester (November)	-	645	-	-	-	-	453	-	-	305	-
North Carolina											
Charlotte-Gastonia-Rock Hill (September)	-	675	-	-	-	-	473	-	-	273	339
Ohio											
Cincinnati (May)	583	654	-	-	-	-	476	-	-	265	312
Cleveland (August)	-	719	854	-	1,463	-	494	-	-	290	-

See footnotes at end of table.

Table 2. Average weekly earnings¹ in nursing occupations, private health services, United States and selected areas, 1994 — Continued

State, area, and reference month	Registered Nurses					Licensed Practical Nurses			Nursing Assistants		
	I	II	II Specialists	III	III Anesthetists	I	II	III	I	II	III
Ohio											
Toledo (April)	-	\$639	-	-	-	-	\$451	-	-	\$248	-
Oregon											
Portland (July)	-	732	-	\$982	-	-	508	-	-	303	\$350
Pennsylvania											
Philadelphia (November)	\$674	775	\$841	987	\$1,359	-	557	-	\$286	308	404
Pittsburgh (April)	637	703	754	-	1,231	-	464	-	220	308	340
Scranton-Wilkes-Barre (November)	587	631	627	-	1,250	-	445	-	259	287	319
South Carolina											
Beaufort County (September)	-	-	-	-	-	-	445	-	-	230	-
Charleston (March)	-	-	-	-	-	-	423	-	-	220	-
Greenwood County (September) ...	-	-	-	-	-	-	390	-	-	217	-
Tennessee											
Memphis (November)	-	605	701	-	1,592	-	431	-	-	243	-
Texas											
Austin (June)	-	635	-	-	-	-	451	-	-	246	315
Corpus Christi (August)	494	623	667	-	-	-	431	-	-	204	-
Houston (March)	539	688	754	886	-	-	450	-	190	262	343
Longview-Marshall (July)	-	-	-	-	-	-	409	-	-	201	-
San Angelo (October)	-	581	-	-	-	-	370	-	-	211	-
San Antonio (June)	-	614	-	-	-	-	416	\$454	188	217	-
Utah											
Salt Lake City-Ogden (May)	-	650	-	792	-	-	401	-	262	260	-
Virginia											
Norfolk-Virginia Beach-Newport News (August)	538	637	-	-	1,335	\$373	411	-	-	250	-
Richmond-Petersburg (August)	-	672	-	-	-	-	437	-	-	252	334
Wisconsin											
Appleton-Oshkosh-Neenah (May)	-	649	704	-	-	-	429	-	-	286	-
Milwaukee (September)	579	709	755	919	-	-	508	-	-	291	386

¹ Excludes premium pay for overtime and for work on weekends, holidays, and late shifts. Also excluded are performance bonuses and lump-sum payments of the type negotiated in the auto and aerospace industries, as well as profit sharing payments, attendance bonuses, Christmas or yearend bonuses, and other nonproduction bonuses. Pay increases, but not bonuses, under cost-of-living clauses, and incentive payments,

however, are included.

NOTE: Dashes indicate that no data were reported or that data did not meet publication criteria. Areas and occupations do not appear on this table if they had no publishable data.

worked in hospitals, were paid noticeably more in hospitals for levels I, II, and III than in all private health services. Private hospitals paid 31 percent more than all private industry at level I and 15 percent more at the most populous level II. The pay advantage in hospitals fell to 6 percent at level III. At level IV, however, the situation for nursing assistants was different. In hospitals, where they represented seven-tenths of all level IV nursing assistants, pay fell slightly below the average for nursing assistants in all private industry.

Area differences in nursing pay in private hospitals were similar to the area pay differences in all private health services (table 3). Hospital nursing pay for level I registered nurses was typically higher than the national average (\$719 a week) in the larger metropolitan areas and lower than the national average in smaller cities and non-metropolitan areas. For example, in San Francisco, California, level II registered nurses earned \$1,083 a week but less than \$610 a week in some smaller metropolitan areas such as Fort Wayne, Indiana and San Angelo, Texas. The same pattern was evident for nursing assistants, with San Francisco, California, reporting the highest average wage for nursing assistants and Mobile, Alabama, the lowest.

Nursing employment

Because employment of nurses is so widespread, and almost the exclusive domain of women, information on the occupation's pay should be of interest to a large audience. In 1994, the Bureau's Current Population Survey (CPS)⁴, found that nurses held about 1 out of every 23 full-time jobs in the United States, and about 1 out of every 31 part-time jobs. Overall, the CPS found 4.0 million nurses among 123 million workers. Included in 87 million full-time workers were 2.8 million nurses. Among these were about 1.4 million registered nurses,

296,000 licensed practical nurses, and 1.2 million nursing assistants. Among 36 million part-time workers, the CPS found 1.1 million nurses, including 562,000 registered nurses, 101,000 licensed practical nurses, and 478,000 nursing assistants.

Most nurses were women. The CPS reported that women accounted for 92 percent of the full-time nursing population, second only to secretary, where virtually all the jobs were filled by women. Moreover, 1 out of every 15 women in the full-time private workforce was employed as a nurse, as was 1 out of every 18 women working part time. And while the teaching occupation also employed more women than nursing in 1994, its ratio of women to men was smaller than in nursing.

Nursing occupations

The OCS found considerably fewer nurses in the establishments it surveyed than the CPS found in the economy as a whole. This is primarily because it is limited to full-time nurses who matched the OCS job descriptions for nurses and who worked in private establishments employing at least 50 workers⁵.

Additionally, due to survey design limitations, OCS estimates of occupational employment serve as a general guide to size and composition of the occupations studied, rather than a precise measure of employment. Table 4 shows OCS data on full-time nursing employment in all private industry, private health services, and private hospitals. (Private health services is a subset of all private industry and private hospitals is a subset of private health services.)

In 1994, OCS found 1.4 million full-time nurses in private industry, virtually all in private health services (see table 4). Overall, the survey reported 569,000 registered nurses, including 19,000 registered nurse specialists, 6,000 nurse anesthetists, 227,000 licensed

practical nurses, and 594,000 non-skilled nursing assistants. While most nurses in private industry worked in health services, just over one-half of them worked in hospitals. Unlike the CPS, however, OCS does not break out employment by gender.

The majority of private industry nurses in each of the three nursing occupations studied worked in private health services. But nursing employment in hospitals, as a portion of nursing employment in all health services, varied by nursing occupation. For example, of registered nurses, 85 percent worked in hospitals, including nearly every specialist, level II, registered nurse level III, and registered nurse level IV. In contrast, 43 percent of licensed practical nurses and 23 percent of nursing assistants worked in hospitals.

Aside from hospitals, the OCS did not report on the types of establishments nurses worked in. But, according to the Bureau's *Occupational Outlook Quarterly*, about one quarter of licensed practical nurses worked in nursing homes and one-tenth worked in doctors' offices and clinics.⁶ Likewise, about one-half of nursing assistants work in nursing homes.

Employment outlook

Job opportunities in the nursing profession are expected to rise faster than the norm over the next decade and will continue to make nursing an attractive career choice. According to the Bureau's Division of Occupational Outlook, attrition, an aging population, and technological advancement will drive the demand for more and better trained nurses. In addition, individuals who are willing to continue their training, learn advanced techniques and procedures, and specialize in a particular field, will find additional opportunities to advance their careers.

For registered nurses, the majority of whom work in hospitals,

Table 3. Average weekly earnings¹ in nursing occupations, private hospitals, United States and selected areas, 1994

State, area, and reference month	Registered Nurses					Licensed Practical Nurses			Nursing Assistants		
	I	II	II Specialists	III	III Anesthetists	I	II	III	I	II	III
United States (September)	\$589	\$719	\$761	\$974	\$1,502	\$397	\$450	\$522	\$310	\$312	\$371
Alabama											
Mobile (July)	-	631	-	-	-	-	366	-	-	214	-
Arizona											
Phoenix (April)	-	648	-	-	-	-	448	-	-	289	-
Arkansas											
Little Rock-North Little Rock (December)	-	629	-	-	-	-	-	-	-	-	-
California											
Anaheim-Santa Ana (August)	603	834	905	-	-	-	563	-	-	341	-
Fresno (March)	-	765	-	-	-	-	498	-	-	-	-
Oxnard-Ventura (August)	-	809	-	-	-	-	530	-	-	336	-
Riverside-San Bernardino (May) ...	-	830	842	880	-	-	497	-	-	329	375
San Diego (October)	-	902	-	-	-	-	592	-	-	335	411
San Francisco (April)	-	1,083	-	-	-	-	686	-	-	492	465
San Jose (July)	808	1,049	-	-	-	-	674	-	-	480	-
Colorado											
Denver (December)	-	-	-	-	1,324	-	-	-	-	-	385
Delaware											
Wilmington (December)	-	-	887	-	-	-	552	-	-	332	-
Florida											
Miami-Hialeah (October)	-	715	785	969	-	-	460	-	-	281	-
Orlando (December)	-	646	-	-	-	-	439	-	-	-	342
Tampa-St. Petersburg-Clearwater (July)	-	613	666	-	-	-	418	-	-	256	-
Georgia											
Atlanta (May)	528	678	-	847	-	-	446	-	-	304	343
Augusta (June)	-	676	-	-	-	-	-	-	-	-	-
Idaho											
Boise City (November)	-	660	-	-	-	-	-	-	-	298	-
Illinois											
Chicago (May)	-	752	821	912	1,232	-	501	-	-	353	390
Joliet (August)	-	692	-	-	-	-	506	-	-	-	-
Indiana											
Evansville (August)	-	-	-	-	-	-	418	-	-	297	-
Fort Wayne (February)	-	605	-	-	-	-	435	-	-	295	-
Indianapolis (July)	-	657	-	-	-	-	481	-	-	300	-
South Bend-Mishawaka (September)	-	-	-	-	-	-	476	-	-	335	-
Kentucky											
Louisville (June)	-	705	-	-	-	-	438	-	-	288	-
Louisiana											
New Orleans (July)	-	718	825	-	-	394	481	-	233	266	-
Shreveport (April)	-	624	-	-	-	-	421	-	-	241	-

See footnotes at end of table.

Table 3. Average weekly earnings¹ in nursing occupations, private hospitals, United States and selected areas, 1994 — Continued

State, area, and reference month	Registered Nurses					Licensed Practical Nurses			Nursing Assistants		
	I	II	II Specialists	III	III Anesthetists	I	II	III	I	II	III
Maryland											
Baltimore (March)	-	\$723	\$913	\$927	-	-	\$513	-	-	\$318	\$336
Massachusetts											
Boston (May)	-	923	1,002	1,175	\$1,439	-	617	-	-	402	394
Lawrence-Haverhill (October)	-	770	-	-	-	-	611	-	-	353	-
Worcester (September)	-	739	-	-	-	-	585	-	-	378	-
Missouri											
Kansas City (September)	-	678	757	-	-	-	462	-	-	290	-
New Jersey											
Bergen-Passaic (May)	-	892	-	-	-	-	672	\$751	-	383	432
Monmouth-Ocean (September)	-	760	-	-	-	-	526	-	-	365	-
New Mexico											
Albuquerque (September)	-	-	-	-	-	-	-	-	-	266	-
New York											
Nassau-Suffolk (November)	-	907	-	-	-	-	615	-	-	449	465
New York (May)	-	969	1,080	1,164	1,381	-	570	-	-	446	450
Poughkeepsie (August)	-	-	-	-	-	-	481	-	-	-	-
Rochester (November)	-	643	-	-	-	-	454	-	-	322	-
North Carolina											
Charlotte-Gastonia-Rock Hill (September)	-	691	-	-	-	-	464	-	-	309	341
Ohio											
Cincinnati (May)	-	669	-	-	-	-	462	-	-	335	-
Cleveland (August)	-	735	854	-	1,465	-	489	-	-	375	-
Toledo (April)	-	644	-	-	-	-	458	-	-	336	-
Oregon											
Portland (July)	-	761	-	945	-	-	515	-	-	380	-
Pennsylvania											
Philadelphia (November)	-	775	841	987	1,359	-	543	-	-	393	408
Pittsburgh (April)	-	709	754	-	1,231	-	475	-	-	363	368
Scranton-Wilkes-Barre (November)	-	637	627	-	1,250	-	478	-	\$282	294	335
South Carolina											
Charleston (March)	-	-	-	-	-	-	425	-	-	-	-
Tennessee											
Memphis (November)	-	603	687	-	-	-	438	-	-	280	-
Texas											
Austin (June)	-	662	-	-	-	-	459	-	-	261	-
Corpus Christi (August)	\$494	621	667	-	-	-	414	-	-	231	-
Houston (March)	533	690	754	-	-	\$398	459	-	258	279	339
Longview-Marshall (July)	-	-	-	-	-	-	391	-	-	-	-
San Angelo (October)	-	583	-	-	-	-	-	-	-	-	-
San Antonio (June)	-	610	-	-	-	-	408	-	-	237	-

See footnotes at end of table.

Table 3. Average weekly earnings¹ in nursing occupations, private hospitals, United States and selected areas, 1994 — Continued

State, area, and reference month	Registered Nurses					Licensed Practical Nurses			Nursing Assistants		
	I	II	II Specialists	III	III Anesthetists	I	II	III	I	II	III
Utah											
Salt Lake City-Ogden (May)	-	-	-	-	-	-	-	-	-	\$294	-
Virginia											
Norfolk-Virginia Beach-Newport News (August)	-	\$643	-	-	\$1,335	-	\$426	-	-	286	-
Richmond-Petersburg (August)	-	679	-	-	-	-	446	-	-	287	-
Wisconsin											
Appleton-Oshkosh-Neenah (May)	-	666	-	-	-	-	440	-	-	314	-
Milwaukee (September)	\$579	720	\$757	\$919	-	-	475	-	-	338	\$387

¹ Excludes premium pay for overtime and for work on weekends, holidays, and late shifts. Also excluded are performance bonuses and lump-sum payments of the type negotiated in the auto and aerospace industries, as well as profit sharing payments, attendance bonuses, Christmas or yearend bonuses, and other nonproduction bonuses. Pay increases, but not bonuses, under cost-of-living clauses, and incentive payments,

however, are included.

NOTE: Dashes indicate that no data were reported or that data did not meet publication criteria. Areas and occupations do not appear on this table if they had no publishable data.

Table 4. Full-time nursing employment in private industry, 1994

Occupation and level	All private industry		
	Total	Private health services	
		Total	Hospitals
All nurses	1,390,814	1,330,794	699,945
Registered nurses	569,008	560,579	479,079
I	17,949	16,544	5,050
II	514,137	507,398	440,534
II specialist	18,715	18,712	18,252
III	11,061	10,854	9,547
III nurse anesthetist	6,259	6,186	4,838
IV	887	885	858
Licensed practical nurses	227,499	220,849	94,152
I	6,435	5,975	1,423
II	215,658	209,603	90,542
III	5,406	5,271	2,187
Nursing assistants	594,307	549,366	126,714
I	73,104	45,198	5,783
II	490,942	475,218	106,758
III	28,861	27,567	13,209

employment is expected to grow more slowly than in the past but still add 469,000 new jobs in the next 10 years in the public and private sectors. In addition, because the number of hospital nurses is large, replacement due to attrition and retirement will provide numerous job openings.

Employment of licensed practical nurses and nursing assistants is expected to grow much faster than the average, with nursing homes offering the most new jobs as the number of aged and disabled persons in need of rehabilitation and long-term care rises rapidly. In both the private and public sectors, nearly 197,000 new jobs are projected to open up for licensed practical nurses over the next decade and nearly 380,000 for nursing assistants.

In addition, new medical technology will provide nurses with new opportunities for career advancement in the coming decade. New technology will increase the number of medical treatments and procedures that nurses can perform and create a

need for more, and better trained, nurses. In some instances, technology will enable nurses to perform tasks previously done only by physicians. In other instances, it will allow some treatments and procedures previously done only in hospitals to be performed in doctors' offices, clinics, patients' homes, and nursing homes.

Occupational Compensation Survey program

In 1994, the Bureau enhanced the occupational compensation survey sample in order to publish data separately for nurses and workers in selected other occupations in private health services⁷, including private hospitals. BLS has published occupational wage data on private hospitals before, most recently in 1991⁸, but this is the first time data have been published for all of the private health services industry by BLS.

The survey was limited to full-time workers in establishments with 50 or more workers in the 48

contiguous States. Private households, agriculture, the Federal Government, and the self-employed were excluded. Occupational pay data, including health services, for the public sector are available from BLS upon request.⁹

The Occupational Compensation Survey controls for differences in job duties and responsibilities by stratifying workers into two or more "job levels." Each of the nursing jobs surveyed begins at entry level I and progresses through multiple levels, each calling for progressively more complex duties and responsibilities. Registered nurse consists of four job levels, and two specialist jobs. Registered nurse specialist equates to the duties and responsibilities of level II and nurse anesthetist equates to level III. Licensed practical nurse comprises three job levels and nursing assistants comprises four. The job descriptions, including leveling criteria, which were used to collect data for the nursing occupations surveyed, are summarized in the following section.

Job Descriptions for Nurses

Job descriptions used in the Occupational Compensation Survey to collect pay data for nurses' jobs are summarized below. The leveling criteria used are also included.

Registered nurse (RN)

These workers provide professional nursing care to patients in hospitals, nursing homes, clinics, health units, private residences, and community health organizations. (Visiting nurses are included.) They assist physicians with treatment; assess patient health problems and needs; develop and implement nursing care plans; maintain medical records; and assist patients in complying with a prescribed medical regimen. Their work may be specialized as, for example, operating room nurse, psychiatric nurse, nurse anesthetist, industrial nurse, nurse practitioner, and clinical nurse specialist. And they may supervise licensed practical nurses and nursing assistants.

OCS classifies RN's into levels based upon the following criteria:

Level 1. Provides comprehensive general nursing care to patients whose conditions and treatment are normally uncomplicated. Follows established procedures, standing orders, and doctor's instructions. Uses judgment in selecting guidelines appropriate to changing patient conditions. Routine duties are performed independently; variations from established routines are performed under specific instructions.

Level 2. Plans and provides comprehensive nursing care in accordance with professional nursing standards. Uses judgment in assessing patient conditions, interprets guidelines, and modifies patient care as necessary. Recognizes and determines proper action for medical emergencies, for

example, calls physician or takes pre-planned emergency measures.

Level 2 specialist. Plans and provides highly specialized patient care in a difficult specialty area, such as intensive care or critical care. In comparison with Registered Nurse 2, pay typically reflects advanced specialized training, experience, and certification. May assist higher level nurses in developing, evaluating, and revising nursing plans. May provide advice to lower level nursing staff in area of specialty.

Level 3. Plans and performs specialized and advanced nursing assignments of considerable difficulty. Uses expertise in assessing patient conditions and develops nursing plans which serve as a role model for others. Evaluation and observation skills are relied upon by physicians in developing and modifying treatment. Work extends beyond patient care to the evaluation of concepts, procedures, and program effectiveness.

Level 3 anesthetist. Recommends and administers general anesthetics intravenously, typically by inhalation, or by endotracheal intubation; induces patient anesthesia, and manages proper states of patient narcosis throughout prolonged surgeries. Determines the need for and administers parenteral fluids, including plasma and blood; administers stimulants as directed. May also administer local anesthetics, as needed.

Level 4. Plans, researches, develops, and implements new or modified techniques, methods, practices, and approaches in nursing care. Acts as consultant in area of specialization and is considered an expert or leader within specialty area. Consults with supervisor to develop decisions and

coordinates with other medical staff and community.

Licensed practical nurse (LPN)

LPN's provide practical or vocational nursing care to patients in hospitals, nursing homes, clinics, health units, homes, and community health organizations. They typically work under the supervision of a registered nurse or physician, and may supervise unlicensed nursing assistants.

OCS classifies LPN's into levels based upon the following criteria:

Level 1. Provides standard nursing care requiring some latitude for independent judgment and initiative to perform recurring duties. Supervisor provides additional instructions for unusual or difficult tasks. Deviations from specific guidelines must be authorized by the supervisor.

Level 2. Provides nursing care requiring an understanding of diseases and illnesses sufficient to enhance communication with physicians, registered nurses and patients. Follows general instructions in addition to established policies, practices, and procedures. Uses judgment to vary sequence of procedures based on patient's condition and previous instructions. Supervisory approval for requested deviations is given routinely. Guidance is provided for unusual occurrences.

Level 3. This level applies to two different work situations. In situation 1), LPN's provide nursing care for patients in various stages of dependency, setting priorities and deadlines for patient care, and modifying nursing care as necessary prior to notifying the supervisor. In situation 2), LPN's are assigned to a selected group of critically ill patients, for example, in hospital

intensive care or coronary care units. These assignments require LPN's to immediately recognize and respond to serious situations, sometimes prior to notifying an RN. However, their overall independence and authority is more limited than that described in situation 1 and supervisory approval is required for proposed deviations from established guidelines.

Nursing assistant (NA)

Nursing assistants provide personal and nursing care to patients in hospitals, nursing homes, resident care facilities, clinics, private homes, and community health organizations. Their duties include maintaining patient hygiene and supporting doctors and nurses in diagnostic procedures, technical treatments, patient charting and patient teaching. Their work does not require State licensure.

OCS classifies NA's into levels based upon the following definitions:

Level 1. Performs simple personal care and housekeeping tasks

requiring no previous training. Typical tasks include: bathing, dressing, feeding, lifting, escorting, and transporting patients; collecting laundry carts and food trays; taking and recording temperatures; and changing bed linen and cleaning patient's room. Follows detailed and specific instructions.

Level 2. In addition to providing personal care, performs common nursing procedures such as: observing and reporting on patient conditions; taking and recording vital signs; collecting and labeling specimens; sterilizing equipment; listening to and encouraging patients; giving baths; applying and changing compresses and non-sterile dressings; checking and replenishing supplies; securing admission data from patients; and assisting in controlling aggressive or disruptive behavior. Follows specific instructions; matters not covered are verified with the supervisor.

Level 3. Performs a variety of common nursing procedures as

described at level 2. Work requires prior experience or training to perform these procedures with some latitude for exercising independent initiative or limited judgment. May also: perform several procedures sequentially; chart patient care; administer prescribed medication and simple treatments; teach patient self care; and lead lower level nursing assistants.

Level 4. Applies advanced patient or resident care principles, procedures and techniques which require considerable training and experience. In addition to the work described at level 3, typical duties include: assisting professional staff in planning and evaluating patient or resident care; recognizing subtle changes in patient's condition and behavior and varying nursing care accordingly; catheterizing, irrigating and suctioning patients; monitoring IV fluids and alerting registered nurse when system needs attention; and performing minor operative and diagnostic procedures in a clinic. Supervisor describes limitations or priorities of work.

—ENDNOTES—

¹*Employment Outlook: 1994-2005, Job Quality and Other Aspects of Projected Employment Growth*, Bulletin 2472, Bureau of Labor Statistics, December 1995, p. 3.

²*Employment Outlook*, p. 13.

³ For all occupations studied, the Bureau ranked workers according to the level of duties and responsibility their jobs required. This ranking is known as "job leveling." Detailed job leveling information for the occupations surveyed is available upon request.

⁴The Current Population Survey (CPS) is conducted monthly by the Bureau of the Census for the Bureau of Labor Statistics. It is a sample survey of people 16 years of age and older and pro-

vides comprehensive data, including usual weekly earnings, on the labor force, classified by such characteristics as age, sex, race, family relationship, marital status, occupation, and industry attachment. The CPS is collected by trained interviewers from a sample of 50,000 households located in 754 sample areas chosen to represent all counties and independent cities in the 50 States and the District of Columbia.

⁵The OCS minimum employment refers to workers of all occupations; it is not limited to nurses.

⁶The reader is cautioned that employment figures from the *Occupational Outlook Quarterly* include nurses in the public sector as well as those

in private industry.

⁷Industry classifications in this article are defined in the U.S. Office of Management and Budget's *Standard Industrial Classification (SIC) Manual, 1987*. Private health services is SIC 80. Private hospitals, SIC 806, is a subset of private health services, along with doctors' offices, clinics, nursing homes, extended care facilities, laboratories, and miscellaneous health services.

⁸*Occupational Wage Survey, Hospitals, January 1991*, Bulletin 2392, Bureau of Labor Statistics, January 1992.

⁹See *Occupational Compensation Survey, National Summary, 1994*, Bulletin 2479, Bureau of Labor Statistics, June 1996.