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Iowa Practical Nursing Sub-Study

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A STUDY OF PRACTICAL NURSES WHO HAVE BEEN
LICENSED IN IOWA BUT ARE NOT PRESENTLY EMPLOYED IN
IOWA AS PRACTICAL NURSES

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in cooperation with

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PREFACE

Definition of Terms Used

For purpose of clarification from the outset, several special terms are defined preceeding the report of this study.

Nursing:--Nursing is defined

"as one of the resources in a community for the care of the sick, the prevention of illness, and the promotion of health which is carried on under medical authority. Its distinctive function is the close and individualized service to the patient which may vary with his state of health from one of dependence, in which the nurse performs for him what he cannot do for himself, through supportive and rehabilitative care, physical and emotional, to self-direction of his own health. Nursing is primarily patient-centered. It gives service directly through treatment, general physical care, and health instruction to the patient and his family and through the coordination of nursing with other community services essential to the patient's health needs."⁸

Registered Nurse:

Graduate of an educational program in nursing who has been licensed to practice professional nursing.

Professional nurse:

Mildred L. Montag defines the professional nurse "as the nurse prepared to carry out a range of functions which are highly complex and dependent upon expertness and skill acquired through long periods of training. Her functions include:

1. the identification or diagnosis of the nursing problem and the recognition of its many related aspects.
2. the decision upon a course of action to be followed for the solution of the problem.
3. with assistance of the other members of the nursing and health team, both interprofessional and intraprofessional, the development of a satisfactory plan of nursing care, including therapeutic treatments for which the physician has delegated responsibility to the nurse.
4. the continued direction of the program of nursing toward its optimum accomplishment, and the performance of those aspects which demand the skill and judgement which she is best prepared to use.

8. Joint Curriculum Conference, Report of the Proceedings of the Conference, November 13, 14, 15, 1960 National League for Nursing, New York, 1951), p. 21.

5. the evaluation of the process and the results of nursing for the continuous improvement of care of the patient and the practice of nursing."⁹

Licensed practical nurse:

"A person licensed as a practical nurse practitioner prepared for two roles:

1. Under the supervision of a registered professional nurse or physician, to give nursing care to patients in situations relatively free of scientific complexity.
2. In a close working relationship, to assist registered professional nurses in giving nursing care to patients in more complex situations."¹⁰

Practical nursing program:

"This program, usually one year in length, is self-contained, complete and satisfactory for its own purpose, preparing exclusively for practical nursing. Its objective is to prepare a worker who will share in giving direct care to patients. The practical nursing program is intended for individuals who will find satisfaction

1. in nursing functions consistent with short-term preparation, and
2. in practicing nursing within a limited range of situations for which patients require care.

A program leading to a certificate or diploma in practical nursing may be organized and operated under public education, hospitals, or other community agencies. Most are administered through the public school system. The next largest number are controlled by hospitals. A few are under universities, colleges, and community agencies."¹¹

Licensed in good standing:

Once ever issued a license to practice the licensee holds this status unless his license is legally revoked for just cause.

Current licensure:

Licensed in good standing with license initially issued or renewed for the current year. The law provides for annual renewal and current licensure is required when engaged in nursing practice.

9. Mildred L. Montag, The Education of Nursing Technicians (New York: G. P. Putnum's Sons, 1961), pp. 4-5.

10. Nursing Education Programs Today (National League for Nursing, New York, 1962), pp. 9-10

11. Ibid., p. 9.

Inactive licensure:

Licensed in good standing but licensee voluntarily does not renew license for current year. Licensee may not practice nursing while holding an inactive license.

Licensed by endorsement:

Licensed by the Iowa Board of Nursing to practice nursing in Iowa by virtue of holding a valid license in another state.

Board of Nursing out-of-state certification:

Act of the Iowa Board of Nursing sending credentials of an Iowa licensee to a Board of Nursing in another state for application for licensure in that other state.

State Board of Nursing (or Board of Nurse Examiners):

The regulatory board of each state which is responsible for the educational standards of professional and practical nursing programs. It approves schools of nursing in the state and renews licenses for professional and practical nurses. In Iowa, this official board is known as the Iowa Board of Nursing.

State Division of Vocational Education:

The division of a state department of education which cooperates with public education institutions as they administer practical nursing programs partially funded by state and federal funds appropriated for this purpose.

State-approved practical nursing programs:

Programs approved by the State Board of Nursing. Programs operated in cooperation with the State Division of Vocational Education must also be approved by this Division. Only graduates of programs approved by the State Board of Nursing are eligible for examination to become licensed as practical nurses. (In California and Texas graduates are licensed as vocational nurses.)

State board examination:

A written examination administered by the State Board of Nursing. Upon passing this examination graduates become eligible for licensure as practical nurses and may use the title "Licensed Practical Nurse." (The title "Licensed Vocational Nurse" is used in California and Texas.)

An Integrated Longitudinal Study of Practical Nursing (PNS):

A 39-month research project being conducted currently by the University of Illinois in cooperation with The University of Iowa and funded by the U.S. Office of Education. This project is commonly referred to as the "Practical Nursing Study". Reference to this research project is by the abbreviation PNS.

Iowa Practical Nursing Sub-Study (IPNSS):

is the common term used for the study reported on the following pages of this publication. It is a complete research study in itself but is supplemental to the PNS. In this report, this study is referred to by the abbreviation, IPNSS.

Sub-group classifications:

PNS and IPNSS subjects grouped by licensure status, place of residence, and preparatory basis for licensure.

1. CIED group: Currently licensed, In-state resident, licensed on the basis of Education.
2. COED group: Currently licensed, Out-of-state resident, licensed on the basis of Education.
3. IIED group: Inactive licensure, In-state resident, licensed on the basis of Education.
4. IOED group: Inactive licensure, Out-of-state resident, licensed on basis of Education.
5. CIX group: Currently licensed, In-state resident, licensed on the basis of experience.
6. COX group: Currently licensed, Out-of-state resident, licensed on the basis of experience.
7. IIX group: Inactive licensure, In-state resident, licensed on the basis of experience.
8. IOX group: Inactive licensure, Out-of-state resident, licensed on basis of experience.

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CHAPTER I

INTRODUCTION

Nursing is challenged to increase its complement of skilled practitioners in response to the ever-growing demands of modern society. Among factors influencing these demands are (1) increased population, (2) expanding medical knowledge, (3) greater public awareness of preventive and therapeutic health measures, (4) increasing number and use of available medical insurance plans, and (5) recent federal legislation which subsidizes health care for specific sub-groups of the population.

Demands for nursing service exceed the capacity of existing programs in nursing education to supply graduates in sufficient numbers to meet the needs. By 1970, it has been estimated, 270,000 additional nurses will be needed over and above the normally expected increase in nursing resources. This prediction was made even prior to the enactment of the Medicare provisions in the Social Security Amendments of 1965 (Public Law 89-97, Title XVIII). This legislation provides for hospital insurance for people age 65 and over, covering hospitalization and related services such as post-hospital extended care and home health services.

In an attempt to meet these ever-increasing needs for nursing service, qualified nursing personnel must be prepared in even greater numbers. This includes licensed practical nurses who are integral members of the nursing team.

Throughout the country there are relatively uniform practical nurse licensure provisions and educational programs to prepare practical nurses. All fifty states and the territories now provide for licensure of this

practitioner. Legislation and procedures for the approval of educational programs have been established. Presently there are approximately 1000 approved programs of practical nurse education from which new licensees have graduated.

The statutes of the State of Iowa have provided for licensure of practical nurses by the Iowa Board of Nursing since July 1, 1949 and require annual renewal for the practitioner of practical nursing to be currently licensed in good standing. During the first two years following initiation of licensure requirements the majority of persons were granted licensure under a "waiver" provided by a grandfather clause in the law which permitted licensure on the basis of experience and recommendation. During this same period of time, one-year educational programs to prepare practical nurses were improved and expanded and this growth continues. Since July 1, 1951 it is possible to be licensed by the Iowa Board of Nursing in one of two ways; graduation from an approved program in practical nursing or, completion of a specified portion of an approved program in professional nursing. In the latter case, permission to sit for the licensure examination is determined by the Iowa Board of Nursing only after its evaluation deems the educational experiences of the applicant to be sufficiently adequate to portend safe nursing care.

In Iowa there are 22 programs of practical nurse education, all approved by the Iowa Board of Nursing. Nineteen of these receive partial support from funds administered by the Division of Vocational Education, Iowa Department of Public Instruction. The remaining three are administered by private, parochial hospitals.

Requirements for admission to Iowa programs in practical nursing from July 1, 1949 through June 30, 1964 included: (1) a minimum age of 18 to

assure candidates would meet the required age of 19 to apply for licensure after satisfactorily completing the one-year program. The maximum age for admission was usually 55. (2) evidence of having had an educational background of a minimum of 10 grades of schooling satisfactorily completed. There was no provision for educational equivalency.

On July 1, 1964 the Iowa Nurse Practice Act was changed by statute to require: (1) a minimum licensure age of 18 which permitted admission to programs at age 17. The maximum age remains at usually 55. (2) a high school diploma or its equivalency determined by achievement at the 12th grade level on the General Education Development (GED) Test.

Background of the Study

On June 1, 1965 the United States Office of Education, under provisions of the Vocational Education Act of 1963, Section 4(c), approved Project Number 5-0126, Contract Number 5-85-038, entitled An Integrated, Longitudinal Study of Practical Nursing (hereafter referred to as the PNS). The University of Illinois is the prime contractor and The University of Iowa, under sub-contract, is cooperating throughout the entire 39-month period of the PNS which will continue through August 31, 1968.

Dr. Robert M. Tomlinson, Department of Vocational-Technical Education, College of Education, University of Illinois, is the Principal Investigator. Elizabeth E. Kerr, Director, Program in Health Occupations Education, Division of Medical Services, The University of Iowa, is the Associate Investigator. Miss Kerr also serves as Head State Consultant, Health Occupations Education Section, Division of Vocational Education, Iowa Department of Public Instruction and is Director of this study (Iowa Practical Nurse Sub-Study, hereafter referred to as IPNSS).

The long-range goal of the PNS is the improvement of nursing services through the improvement of student selection procedures in programs of practical nursing, the educational programs themselves (including curriculum and instructional staff) and the utilization of graduates. This study will not attempt to implement changes but will provide new knowledge and relationships in a meaningful manner that may be applied by those directly responsible for preparing practical nurses and utilizing their services.

The PNS is being conducted in three phases with the inclusive dates and objectives of each as follows:

PHASE I. - September 1965 to September 1966:

Objective: to identify the knowledges, functions, and occupational patterns of a selected sample of practical nurses who are licensed on the basis of having attended an approved nursing education program.

PHASE II. - January 1966 to February 1968:

Objectives: (1) to determine the characteristics of all applicants to, students in, and graduates of selected programs of practical nursing and to identify their relationships, and (2) to determine the characteristics of a selected sample of programs of practical nursing to identify those criteria related to student success and the occupational patterns of graduates.

PHASE III. - January 1968 to July 1968:

Objective: to do a follow-up of applicants, dropouts, and graduates of the selected programs to determine relationships between the characteristics of the individuals, the programs into which they sought admission or did attend, and their current employment situations.

The PNS is structured to operate concurrently in Illinois and Iowa with a research team working in each State. Throughout the three phases, The University of Iowa is responsible for those aspects related to Iowa.

Phase I was based on the identification of all persons ever licensed to practice practical nursing in Illinois and Iowa. In Iowa, information was obtained from the Iowa Board of Nursing to identify the number of licenses issued each year from the initial license in 1949 through December 31, 1965. See Table 1.

TABLE 1
NUMBER OF PRACTICAL NURSE LICENSES
ISSUED IN IOWA BY YEAR

(Estimated to nearest 10 with total corrected in 1965 figure)

<u>YEAR</u>	<u>NUMBER</u>	<u>YEAR</u>	<u>NUMBER</u>
1949 - - - -	160	1958 - - - -	160
1950 - - - -	670	1959 - - - -	190
1951 - - - -	670	1960 - - - -	220
1952 - - - -	50	1961 - - - -	280
1953 - - - -	30	1962 - - - -	280
1954 - - - -	70	1963 - - - -	330
1955 - - - -	80	1964 - - - -	430
1956 - - - -	180	1965 - - - -	436
1957 - - - -	110		

Of the 4,346 practical nurses ever issued a license in Iowa, 80% (3,480) held a current license in Iowa in 1965. Of these 3,480, 3,020 also gave current addresses in Iowa.

With the exception of Dubuque, the geographic distribution of all practical nurses licensed in Iowa through July, 1965 is proportional to the existence of a practical nurse education program in a community and the length of time that program has been in existence. Size of community does not appear to be an important factor. See Tables 2 and 3.

TABLE 2
GEOGRAPHIC DISTRIBUTION OF PRACTICAL NURSES
LICENSED IN IOWA
(As of July, 1965)

LOCATION	NUMBER	%	10% SAMPLE IN PNS	1960 CENSUS (IN 1,000's)	% OF TOTAL IOWA POP. 1960 CENSUS
IOWA:					
DES MOINES	284	9.4	26	209	7.6
WATERLOO	159	5.3	12	72	2.6
CEDAR RAPIDS	93	3.1	9	92	3.3
IOWA CITY	90	3.0	7	33	1.2
SIOUX CITY	82	2.7	8	89	3.2
OTTUMWA	78	2.6	6	34	1.2
DUBUQUE	77	2.5	9	57	2.2
DAVENPORT	77	2.5	6	89	3.2
MARSHALLTOWN	72	2.4	8	23	.8
CLARINDA	53	1.8	5	6	.2
OTHERS IN IOWA	1,600	53.1	167	2,055	74.5
ILLINOIS	104	3.5	11	-	-
OUT-OF-STATE(not including Illinois)	244	8.1	23	-	-
	3,013	100.0	297	2,759	100.0

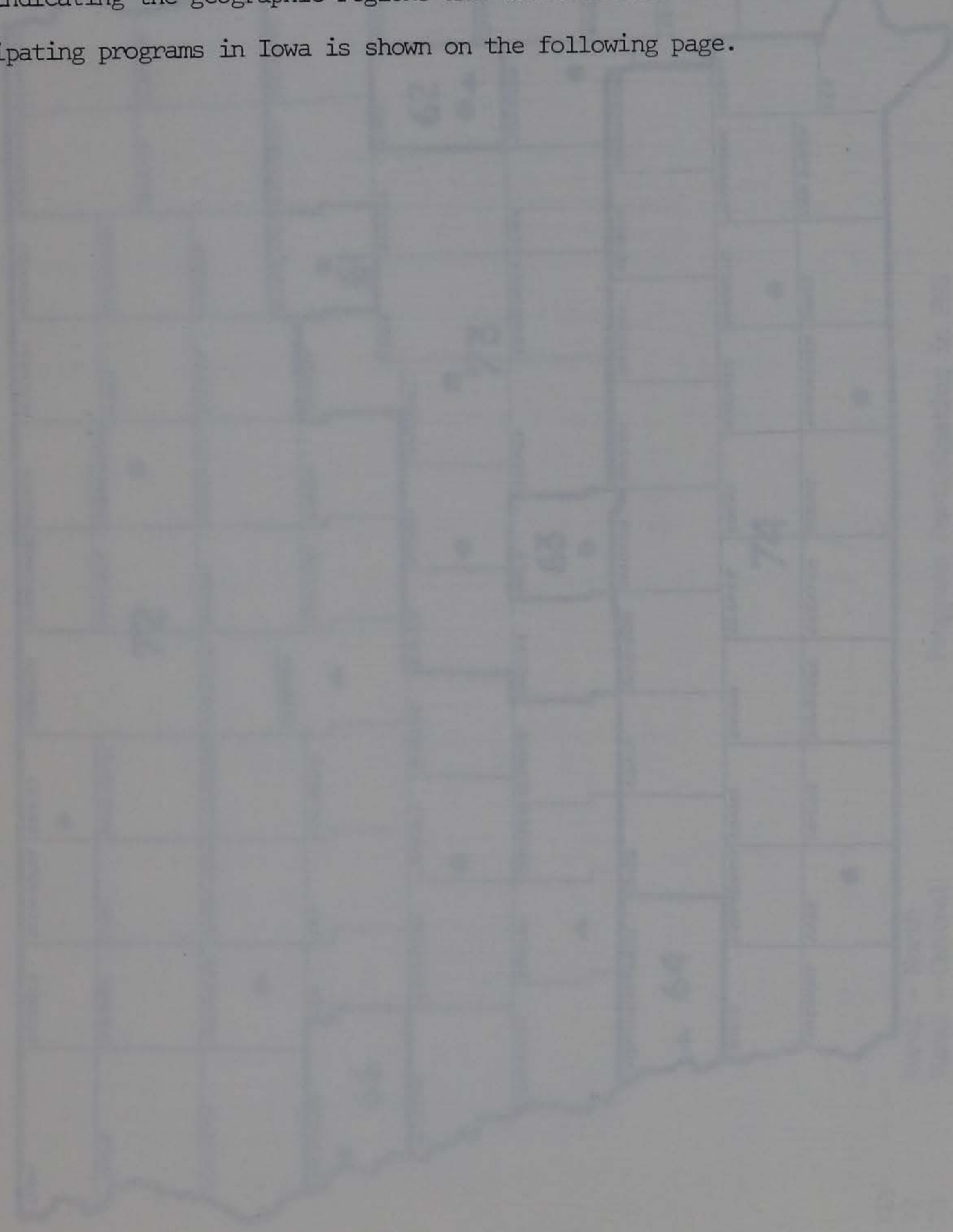
TABLE 3
 SIXTEEN IOWA PROGRAMS IN PRACTICAL NURSING
 BY LOCATION, TYPE OF ADMINISTRATION AND YEARS IN OPERATION (1965)

LOCATION	TYPE OF ADMINISTRATION	YEARS OF OPERATION THROUGH SEPT. 1, 1966
Marshalltown	Private Parochial	17
Iowa City	Public	14
Cedar Rapids	Private Parochial	13
Clarinda	Public	11
Waterloo	Public	9
Des Moines	Public	8
Carroll	Private Parochial	8
Davenport	Public	6
Clinton	Public	4
Mason City	Public	4
Ottumwa	Public	4
Ames	Public	3
Centerville	Public	3
Sioux City	Public	3
Burlington	Public	1
Estherville	Public	1
TOTALS	16 13 3	109

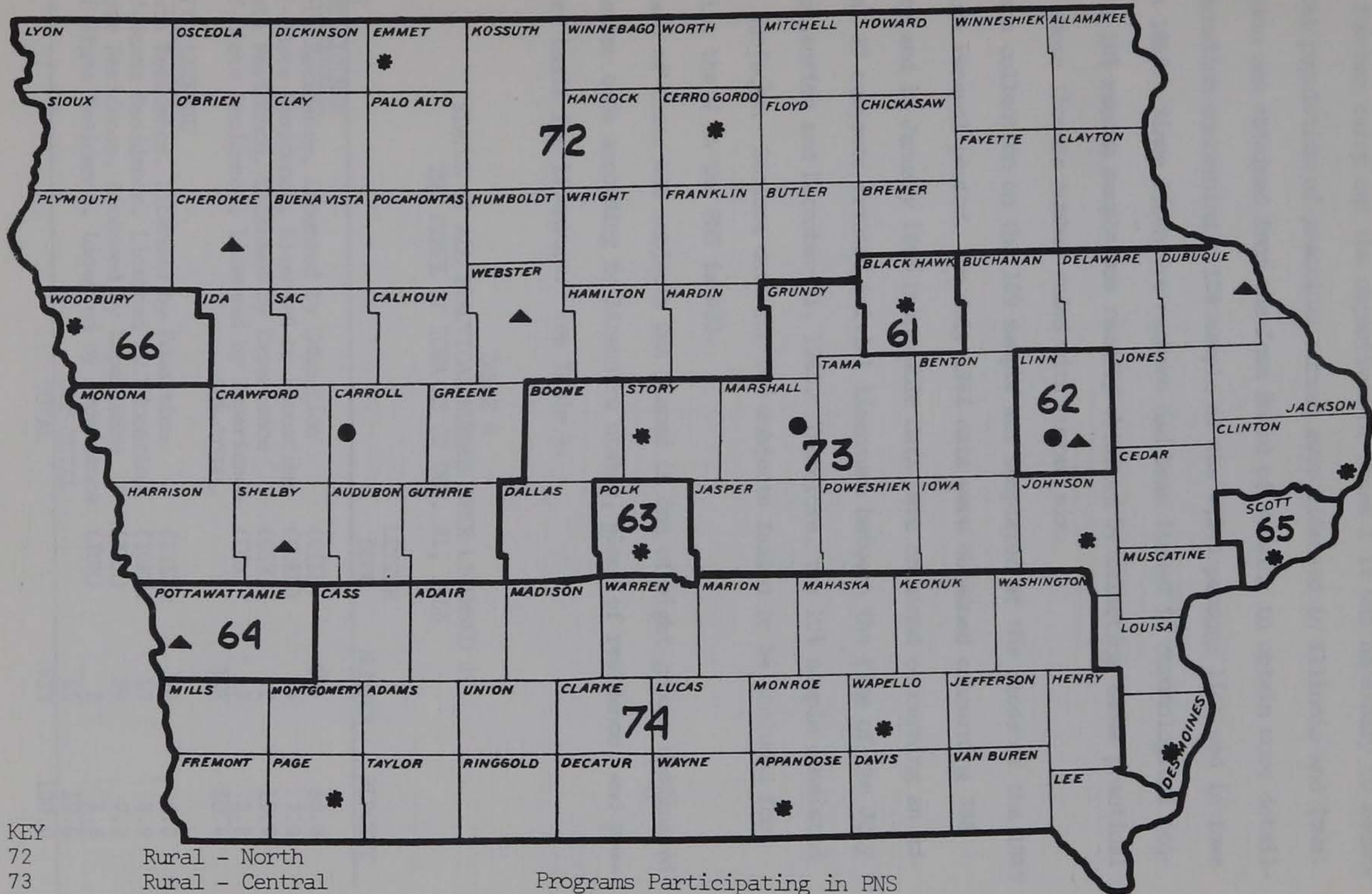
For Phase II of the PNS, all practical nurse education programs in Iowa, public and private, were contacted as possible participants. To qualify for participation, it was necessary that a program had graduated at least one class prior to September 1, 1965. All sixteen programs in operation in Iowa qualified, wished to participate and were accepted. Twenty nine of the 32 qualified programs in Illinois were included, making a total of 45 participating programs.

Phase III of the PNS is to start in 1967 and there will be no further reference to it in this report.

Since mobility of the subjects was to be studied in all three phases of the PNS, each of the two States was divided into geographic regions. A map indicating the geographic regions and the locations of the sixteen participating programs in Iowa is shown on the following page.



GEOGRAPHIC REGIONS AND LOCATIONS OF
SIXTEEN IOWA PRACTICAL NURSING PROGRAMS IN PNS



KEY

- 72 Rural - North
- 73 Rural - Central
- 74 Rural - South
- 61, 62, 64 Metropolitan - Not
- 65, 66 Including Des Moines
- 63 Des Moines

Programs Participating in PNS

Public

Private - Parochial

Programs Established Since PNS



To further carry out the objectives of Phase I it was necessary to reduce the total population of practical nurses ever licensed in Illinois and Iowa. Permission was obtained from the Iowa Board of Nursing to obtain more detailed information concerning a 10% sample of the 4,346 persons licensed in Iowa through 1965. Since licensure numbers had been issued in chronological sequence, a 10% random sample was readily obtained by selecting those practical nurses whose license number ended with number six.

Data collection on the 10% sample was completed at the close of the 1965 licensure renewal period. In July 1965 data were obtained concerning 398 subjects and in January 1966 comparable data were obtained concerning an additional 37 subjects granted initial licensure between the time of the July data collection and December 31, 1965. Therefore, the 10% sample consisted of 435 subjects. Because data for two subjects failed to be included for analysis, the N in the PNS is 433.

Each of these 433 subjects was placed in one of eight groups designated by a letter code according to licensure status, place of residence, and preparatory basis for licensure. See Table 4.

TABLE 4
STATUS OF ALL PRACTICAL NURSES EVER LICENSED BY
THE STATE OF IOWA AS OF DEC. 31, 1965

STATUS	LETTER CODE	NUMBER	PERCENT
<u>CURRENT LICENSE</u>			
In-State Residence, Licensed by Education	(CIED)	220	50.8
Out-of-State Residence, Licensed by Education	(COED)	34	7.9
In-State Residence, Licensed by Experience	(CIX)	82	18.9
Out-of-State Residence, Licensed by Experience	(COX)	12	2.8
	SUB-TOTAL	348	80.4
<u>INACTIVE LICENSE</u>			
In-State Residence, Licensed by Education	(IIED)	26	6.0
Out-of-State Residence, Licensed by Education	(IOED)	17	3.9
In-State Residence, Licensed by Experience	(IIX)	34	7.9
Out-of-State Residence, Licensed by Experience	(IOX)	8	1.8
	SUB-TOTAL	85	19.6
	TOTAL	433	100.0

(NOTE: Official records report six known deceased and there are likely additional such cases not identified. All have been included in the appropriate group on the preceding page.)

For the remainder of this report, reference to these groups will be made by letter code as shown in Table 4 on the preceding page.

Table 5 shows the ages of the PNS sample at initial licensure.

TABLE 5
AGE OF PRACTICAL NURSES AT INITIAL LICENSURE BY STATUS
(PNS 10% SAMPLE)

AGE	LICENSED BY EDUCATION									
	CIED		COED		IIED		IOED		TOTAL	
	N	%	N	%	N	%	N	%	N	%
19 or under	38	17	5	15	4	15	1	6	48	16
20 - 24	83	38	11	32	17	65	9	53	120	41
25 - 29	10	5	3	9	2	8	3	17	18	6
30 - 34	18	8	2	6	2	8	-	-	22	7
35 - 39	13	6	1	3	-	-	-	-	14	5
40 - 44	24	11	8	23	-	-	-	-	32	11
45 - 49	15	7	2	6	1	4	2	12	20	7
50 - 54	14	6	2	6	-	-	-	-	16	5
55 - 59	5	2	-	-	-	-	2	12	7	2
60 and over	-	-	-	-	-	-	-	-	-	-
Total %		100		100		100		100		100
Sub-totals & %	220	74	34	11	26	9	17	6	297	100

AGE	LICENSED BY EXPERIENCE									
	CIX		COX		IIX		IOX		TOTAL	
	N	%	N	%	N	%	N	%	N	%
19 or under	-	-	-	-	1	3	-	-	1	1
20 - 24	3	4	1	8	2	6	1	12	7	5
25 - 29	4	5	1	8	1	3	-	-	6	4
30 - 34	8	10	3	26	-	-	1	13	12	9
35 - 39	5	6	1	8	3	8	-	-	9	7
40 - 44	10	12	1	8	-	-	2	25	13	10
45 - 49	13	16	3	26	1	3	-	-	17	12
50 - 54	17	21	1	8	6	18	4	50	28	21
55 - 59	16	19	1	8	5	15	-	-	22	16
60 and over	6	7	-	-	15	44	-	-	21	15
Total %		100		100		100		100		100
Sub-totals & %	82	60	12	9	34	25	8	6	136	100
GRAND TOTALS	302	70	46	10	60	14	25	6	433	100

Table 6 shows the age of the PNS sample as of 1965.

TABLE 6
AGE IN 1965 BY LICENSURE STATUS

LICENSED BY EDUCATION

AGE	CIED	%	COED	%	IIED	%	IOED	%	TOTAL EDUC.	%
19 or under	11	5	-	-	-	-	-	-	11	4
20 - 24	71	33	10	29	4	15	3	18	88	30
25 - 29	37	17	4	12	9	35	4	23	54	18
30 - 34	14	6	5	14	7	27	4	23	30	10
35 - 39	19	9	-	-	4	15	2	12	25	8
40 - 44	16	7	4	12	-	-	-	-	20	7
45 - 49	18	8	3	9	1	4	-	-	22	7
50 - 54	18	8	4	12	-	-	-	-	22	7
55 - 59	11	5	4	12	1	4	3	18	19	7
60 and over	5	2	-	-	-	-	1	6	6	2
Total %		100.0		100.0		100.0		100.0		100.0
Sub-totals ε %	220	74.1	34	11.4	26	8.8	17	5.7	297	100.0

LICENSED BY EXPERIENCE

AGE	CIX	%	COX	%	IIX	%	IOX	%	TOTAL EDUC.	%
19 or under	-	-	-	-	-	-	-	-	-	-
20 - 24	-	-	-	-	-	-	-	-	-	-
25 - 29	-	-	-	-	-	-	-	-	-	-
30 - 34	1	1	-	-	1	3	1	12.5	3	2
35 - 39	3	3	1	8	2	6	-	-	6	4
40 - 44	4	5	-	-	2	6	-	-	6	4
45 - 49	8	10	4	34	-	-	1	12.5	13	10
50 - 54	4	5	1	8	4	12	-	-	9	7
55 - 59	13	16	1	8	-	-	2	25.0	16	12
60 and over	49	60	5	42	25	73	4	50.0	83	61
Total %		100.0		100.0		100.0		100.0		100.0
Sub-totals ε %	82	60	12	9	34	25	8	6	136	100.0
GRAND TOTALS	302	70	46	10	60	14	25	6	433	100.0

The age trends in the above table reflect the two-year "waiver" period when licensure was permitted on the basis of experience through June 30, 1951. Sixty-one percent of the group licensed by experience are now 60 years of age or over. Only 15 of this group of 136 are under age 45.

Table 7 shows the educational preparation of those in the PNS who qualified for licensure on the basis of having attended an approved nursing education program.

TABLE 7
EDUCATIONAL PREPARATION FOR PRACTICAL NURSING

EDUCATIONAL PREPARATION	CIED		COED		IIED		IOED		TOTAL	
	N	%	N	%	N	%	N	%	N	%
Completed Iowa Prac. Nsg. Prog.	154	70	19	56	11	42	8	47	192	65
Completed Out-of-State Prac. Nsg. Prog.	25	11	1	3	6	23	4	24	36	12
Attended Professional Nsg. Prog.	41	19	14	41	9	35	5	29	69	23
TOTALS	220	100	34	100	26	100	17	100	297	100

To obtain more detailed information on the CIED group than was available from the records of the Iowa Board of Nursing, direct contact was made with 100% of its 220 subjects.

Of the 220 which includes six men, 154 (70%) received their practical nurse education in Iowa practical nursing programs and 25 (11%) in out-of-state practical nursing programs. Forty-one (19%) were issued licenses on the basis of having attended a program of professional nursing.

Additional information concerning each included whether or not he was presently employed as a practical nurse. Seventy percent (155) were so employed in Iowa, 58% (127) full-time and 13% (28) part-time.

There seem to be two significant factors contributing to the present unemployment of 47 (21%) of the CIED group: (1) Of the 41 (19%) licensed on the basis of having attended a professional nursing program, 15 (37%) of that group were unemployed. (2) Of the 51 (23%) who completed practical nursing programs in Iowa metropolitan areas other than Des Moines, 14 (27%) were unemployed. See Table 8 on the following page.

TABLE 8
EDUCATIONAL PREPARATION AND PRESENT EMPLOYMENT STATUS OF THE CIED GROUP
(PNS)

Educational Basis for Licensure	Unemployed		LPN Full-Time		LPN Part-time		Employed Non-Health		Moved Out of State-Employed		Moved Out of State-Unemp.		TOTAL	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Attended Prog. in Prof. Nsg.	15	32	18	14	7	25	-	-	-	-	1	8	41	19
Out-of-State Prac. Nsg. Prog.	4	8	12	10	5	18	-	-	2	67	2	17	25	11
Iowa Rural - South (Centerville, Clarinda, Ottumwa)	-	-	14	11	3	11	1	34	-	-	-	-	18	8
Iowa Rural-Central (Ames, Marshalltown, Iowa City, Burlington, Clinton)	7	15	27	21	5	18	1	33	-	-	2	17	42	19
Iowa Rural-North (Estherville, Mason City, Carroll)	5	11	10	8	1	3	-	-	1	33	1	8	19	9
Iowa Metropolitan (Davenport, Sioux City, Cedar Rapids, Waterloo)	14	30	28	22	5	18	1	33	-	-	4	33	51	23
Iowa - Des Moines	2	4	18	14	2	7	-	-	-	-	2	17	24	11
	47	100	127	100	28	100	3	100	3	100	12	100	220	100

The Problem

All areas of Iowa report a shortage of available nurses. Until such time as approved nursing education programs in our State prepare an adequate supply of practitioners to alleviate this shortage, it is imperative that all qualified nursing personnel be utilized to the fullest extent possible.

The number of practical nurses currently licensed in Iowa does not reflect a true picture of practical nurse employment in the State. The group of practical nurses licensed in Iowa but presently not employed as practical nurses in our State indicates there is under-utilization of prepared nursing personnel.

What factors influence this under-utilization and how can this situation be improved?

CHAPTER II

THE STUDY

Purpose of the Study

In view of the problem it seemed advisable to further study the practical nurses in the PNS who have been licensed in Iowa on the basis of educational preparation but are not presently employed as practical nurses in this State to:

1. describe the social, educational and occupational characteristics of this group,
2. determine factors which tend to influence the employment status of this group, and
3. to provide information about future employment plans of this group.

Identification of Subjects

As shown in Table 8, sixty-five (29%) of the CIED group (220) are unemployed, employed in non-health occupations, or moved out of Iowa. Also, according to Table 4 it can be assumed that the COED group (34) and the IIED group (26) are not contributing to nursing care in Iowa. These 125 practical nurses represent a potential source of additional nursing personnel in Iowa and are the subjects in this study.

Procedure and Method of the Study

Data from the PNS provided the basis for the conduct of this study, The Iowa Practical Nursing Sub-Study (IPNSS).

1. Data concerning subjects in the PNS who were licensed on the basis of educational preparation were reviewed.

2. An instrument to collect pertinent data was developed.
3. A format for coding collected data was designed.
4. The instrument and coding procedure were pilot-tested with a sample of unemployed licensed practical nurses in Illinois and revised as necessary.
5. The questionnaire (Appendix C) was mailed to the 125 subjects. It was covered by a letter (Appendix B) explaining the purpose of this study, seeking their cooperation, and assuring them of anonymity in the report of the study. A stamped return envelope was enclosed. Two weeks later a duplicate questionnaire and follow-up letter (Appendix D) were sent to those who had not yet responded.
6. Areas investigated include:
 - a. Background characteristics including age, sex, rural or urban residence, education, size of family, ages of children, employment pattern, and present employment status.
 - b. Reasons for leaving the work force (i.e., marriage, family responsibilities, pregnancy, influence of husband, job dissatisfaction, low pay, etc.)
 - c. Factors important in determining possible re-entry into the work force (i.e., financial need, desire for contacts outside the home, change in family responsibilities, increased salaries, better working conditions, etc.)
7. The data collected were coded and key-punched for analysis.
8. Data were analyzed by frequency counts and percentages. Because the N was low, percentages were rounded out to a whole number and cross comparisons for interrelationships were limited.
9. A final report was written for printing and dissemination.

CHAPTER III

REPORT OF THE FINDINGS

Ten of the 125 subjects were never contacted (3 of the CIED group, 4 of the COED group, and 3 of the IIED group). Their questionnaires were returned by mail stamped, "moved and left no forwarding address". Further follow-up with the Iowa Board of Nursing and attempted person-to-person telephone calls failed to locate them.

Ninety (72%) of the 125 questionnaires mailed were completed and returned. One respondent of the IIED group was eliminated from the study when she reported she was licensed on the basis of experience and had never attended a nursing education program. Two subjects returned questionnaires with neither name nor license number identification. As a result, they could not be classified into any sub-group and are not included in the study. Therefore, this report is based on an N of 87, representing 70% of the original 125. See Table 9.

TABLE 9
QUESTIONNAIRES SENT AND RETURNED

Status-Group	N in PNS	IPNSS Questionnaires		
		Sent	Ret'd & Valid	% Ret'd & Valid
CIED	220	65	52	80
COED	34	34	21	62
IIED	26	26	14	54
TOTALS	280	125	87	70

Characteristics of the Group

The group is predominately of rural background. Thirty-eight percent were born of farm families and 14% born of families living in communities with less than 2,500 population. Sixty-seven percent were born in communities of less than 5,000 population. See Table 10.

TABLE 10
SIZE OF TOWN IN WHICH BORN

POPULATION	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Rural	16	31	7	34	10	72	33	38
Less than 2,500	10	19	1	5	1	7	12	14
2,500 5,000	8	15	3	14	2	14	13	15
5,000 10,000	4	8	3	14	-	-	7	8
10,000 20,000	3	6	1	5	-	-	4	4
20,000 50,000	3	6	3	14	-	-	6	7
50,000 100,000	8	15	3	14	1	7	12	14
	52	100	21	100	14	100	87	100

Fifteen of the fathers were reported deceased or retired with no past occupation identified. Of those identified, about one-half (49%) were farmers, 38% were skilled or semi-skilled workers in non-health occupations and nine percent were unskilled workers in non-health occupations. Four percent were professionals, one a physician. See Table 11.

TABLE 11
FATHER'S OCCUPATION

	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Farmer	17	33	8	53	10	77	35	49
Skilled(Non-Health)	10	19	4	27	-	-	14	19
Semi-skilled(Non-Health)	8	15	3	20	3	23	14	19
Unskilled(Non-Health)	6	12	-	-	-	-	6	9
Professional(Non-Health)	2	4	-	-	-	-	2	3
Professional(Health, M.D. Etc.)	1	2	-	-	-	-	1	1
	44	100	15	100	13	100	72	100

The majority of mothers (74%) are non-employed housewives. Twenty-six percent are employed outside the home. Among these, the majority are in semi-skilled non-health related occupations. Six percent are unskilled workers and six percent are professionals in non-health occupations. See Table 12.

TABLE 12
MOTHER'S OCCUPATION

	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Housewife-Non-Employed	39	75	14	67	11	79	64	74
Professional(Non-Health)	3	6	1	5	1	7	5	6
Skilled(Health Related)	-	-	1	5	-	-	1	1
Skilled(Non-Health)	2	4	-	-	-	-	2	2
Semi-Skilled(Health Related)	1	2	-	-	-	-	1	1
Semi-Skilled(Non-Health)	4	7	2	9	2	14	8	9
Unskilled(Health Related)	1	2	-	-	-	-	1	1
Unskilled(Non-Health)	2	4	3	14	-	-	5	6
	52	100	21	100	14	100	87	100

Among parent's whose educational attainment was reported, the greatest percentage (34%) achieved only eight years of schooling and the next largest percentage (26%) achieved only 12 years. More mothers than fathers completed high school. Thirteen percent of the fathers and 10% of the mothers completed between 13 and 18 years of schoolings. See Tables 13 and 14.

TABLE 13
FATHER'S EDUCATIONAL ATTAINMENT

YEARS	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Less than 8	5	10	6	30	3	21	14	17
8	17	34	5	25	5	36	27	32
9	1	2	2	10	-	-	3	4
10	3	6	2	10	1	7	6	7
11	3	6	2	10	-	-	5	6
12	13	26	2	10	3	22	18	21
13	1	2	1	5	1	7	3	4
14	4	8	-	-	-	-	4	5
15	1	2	-	-	-	-	1	1
16	1	2	-	-	1	7	2	2
18	1	2	-	-	-	-	1	1
	50	100	20	100	14	100	84	100

Note: Two in the CIED group and one in the IIED group were unable to identify the educational attainment of fathers.

TABLE 14
MOTHER'S EDUCATIONAL ATTAINMENT

YEARS OF SCHOOLING	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Less than 8	3	6	2	10	-	-	5	6
8	17	33	8	38	6	43	31	36
9	2	4	1	5	1	7	4	5
10	3	6	2	9	1	7	6	7
11	3	6	1	5	-	-	4	5
12	15	29	6	28	5	36	26	31
13	2	4	1	5	-	-	3	3
14	1	2	-	-	1	7	2	2
15	2	4	-	-	-	-	2	2
16	3	6	-	-	-	-	3	3
	51	100	21	100	14	100	86	100

Note: One in the CIED group was unable to identify the educational attainment of mother.

Eight percent were the only child in the family. Thirty-nine percent had two-three siblings, 35% had four-five and 18% had more than five.

See Table 15.

TABLE 15
NUMBER OF SIBLINGS

SIBLINGS	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Only Child	3	6	2	10	2	15	7	8
2-3	23	44	8	38	3	21	34	39
4-5	19	37	8	38	3	21	30	35
More than 5	7	13	3	14	6	43	16	18
	52	100	21	100	14	100	87	100

In 1965, the youngest age among respondents was 20. Sixty-three percent were between the ages of 20 and 29, 20% were between 30 and 39, 1.0% between 40 and 49 and seven percent were over 50. Data from the PNS showed five subjects in its CIED group (220) currently licensed in 1965 were 60 or over. See Table 6 on page 12. Of these five, three indicated they were Iowa residents and unemployed. These three individuals are among the seven subjects in this study who are over 60. See Table 16.

TABLE 16
AGE IN 1965 BY LICENSURE STATUS

AGE	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
19 or less	-	-	-	-	-	-	-	-
20-24	17	33	9	42	2	14	28	33
25-29	18	34	2	10	6	43	26	30
30-34	3	6	3	14	3	22	9	11
35-39	5	9	1	5	2	14	8	9
40-44	3	6	3	14	-	-	6	7
45-49	1	2	2	10	-	-	3	3
50-54	2	4	1	5	-	-	3	3
55-59	-	-	-	-	1	7	1	1
60 and over	3	6	-	-	-	-	3	3
	52	100	21	100	14	100	87	100

There was a high degree of employment prior to becoming licensed as practical nurses. Of those responding, 59% held either one or two jobs and 86% held at least one. Fourteen percent were never employed. See Table 17.

TABLE 17
NUMBER OF JOBS HELD BEFORE LICENSURE AS A PRACTICAL NURSE

NO. JOBS	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
0	4	8	3	15	5	36	12	14
1	24	46	4	20	5	36	33	39
2	10	19	6	30	1	7	17	20
3	7	13	1	5	2	14	10	12
4	2	4	1	5	1	7	4	5
5	2	4	1	5	-	-	3	3
6	1	2	2	10	-	-	3	3
7	1	2	-	-	-	-	1	1
8	1	2	2	10	-	-	3	3
	52	100	20	100	14	100	86	100

Note: One in the COED group did not respond to this item.

It appears that earlier employment experiences in health-related occupations tended to influence seeking educational preparation for practical nursing.

Eighty-seven percent indicated employment experience(s) prior to becoming a L.P.N. Of these, 88% had experience in health-related and 12% in only non-health-related occupations. Thirteen percent had not been employed prior to becoming a LPN. See Table 18.

TABLE 18
EMPLOYMENT BEFORE LICENSURE AS A PRACTICAL NURSE

OCCUPATIONS	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Never Employed	4	8	3	15	4	31	11	13
Only Health Related	28	54	9	45	6	46	43	51
Only Non-Health Related	5	9	3	15	1	8	9	10
Both Health and Non-Health Related	15	29	5	25	2	15	22	26
	52	100	20	100	13	100	85	100

Note: One in the COED group and one in the IIED group did not respond to this item.

Over one-half (55%) were between 15-19 years of age when they made the decision to become a practical nurse. Eight percent made the decision at ages less than 15 and four percent at ages over 50. See Table 19.

TABLE 19
AGE WHEN DECIDED TO BECOME A PRACTICAL NURSE

AGE	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Under 15	6	13	-	-	-	-	6	8
15-19	27	56	7	41	9	69	43	55
20-24	6	13	1	6	3	23	10	13
25-29	1	2	2	11	-	-	3	4
30-34	2	4	3	18	-	-	5	6
35-39	2	4	-	-	-	-	2	3
40-44	1	2	3	18	1	8	5	6
45-49	1	2	-	-	-	-	1	1
Over 50	2	4	1	6	-	-	3	4
	48	100	17	100	13	100	78	100

Note: Four in the CIED group, four in the COED group and one in the IIED group did not respond to this item.

Mass media (newspapers, radio, t.v., etc.) were the greatest sources of information through which respondents became acquainted with the preparatory nursing program they attended. Twenty-three percent learned of the program through these media. Following closely in comparatively equal frequencies as sources of information were friends, health occupations personnel, high-school counselors and relatives. See Table 20.

TABLE 20
HOW ACQUAINTED WITH PRACTICAL NURSE PROGRAM ATTENDED

SOURCE OF INFORMATION	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Mass Media	12	27	2	15	2	17	16	23
Someone In Health Occ.	9	20	2	15	1	8	12	17
Friends	6	14	4	31	2	17	12	17
Teacher-Counselor	7	16	1	8	2	17	10	15
Relative	5	11	2	15	3	25	10	15
Prac. Nse. Program Near								
Home	3	7	1	8	1	8	5	7
R.N. or M.D.	2	5	1	8	1	8	4	6
	44	100	13	100	12	100	69	100

Note: Eight each in the CIED and COED groups and two in the IIED group did not respond to this item.

Of the total group, seven percent achieved only through 11 grades and therefore were licensed prior to July 1, 1964. Ninety three percent completed a minimum of 12 grades. Fifty one percent achieved only to the level of high-school completion or its equivalency and 42 percent completed 1-3 additional years. None had achieved a baccalaureate degree. See Table 21.

TABLE 21
EDUCATIONAL ACHIEVEMENT PRIOR TO ADMISSION TO PRACTICAL NURSING PROGRAM

YEARS	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
10	1	2	-	-	-	-	1	1
11	2	4	2	9	1	7	5	6
12	29	55	9	43	6	43	44	51
13	16	31	7	34	6	43	29	33
14	2	4	2	9	1	7	5	6
15	1	2	1	5	-	-	2	2
16	-	-	-	-	-	-	-	-
17	1	2	-	-	-	-	1	1
	52	100	21	100	14	100	87	100

Twenty-six percent were employed while enrolled in a preparatory nursing program and 74% were not employed during this time. The 82 responding to this item were the same 82 who identified sources of financial support while enrolled for their nursing education. The only financial source for 72% was parents or relatives and for 24% it was personal earnings. Only four percent were supported through governmental agencies. See Tables 22 and 23.

TABLE 22
WORKED WHILE IN PREPARATORY PROGRAM

RESPONSE	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Yes	12	24	7	39	2	15	21	26
No	39	76	11	61	11	85	61	74
	51	100	18	100	13	100	82	100

Note: One each in the CIED and IIED group and three in the COED group did not respond to this item.

TABLE 23
SOURCE OF SUPPORT WHILE IN PREPARATORY PROGRAM

SOURCE	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Parents or Relatives	35	70	13	68	11	84	59	72
Self Earnings	13	26	6	32	1	8	20	24
Government Agency	2	4	-	-	1	8	3	4
	50	100	19	100	13	100	82	100

Note: Two each in the CIED and COED group and one in the IIED group did not respond to this item.

Sixty-four percent were licensed on the basis of having completed a program in practical nursing, 54% in Iowa programs and 10% in programs out-of-state. Thirty-six percent were licensed on the basis of having attended a program in professional nursing. See Table 24.

TABLE 24
EDUCATIONAL BASIS FOR IOWA LICENSURE

NURSING PREPARATION	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Compl. Iowa Prac. Nsg. Prog.	30	58	11	52	6	43	47	54
Compl. Out-of-State Prac. Nsg. Prog.	7	13	-	-	2	14	9	10
Attended Prof. Nsg. Prog.	15	29	10	48	6	43	31	36
	52	100	21	100	14	100	87	100

Age at initial licensure in Iowa shows sixty-six percent were under age 24, 14% were 25-34 and six percent were 45-54. One respondent was between 55 and 59 and none over 59. See Table 25.

TABLE 25
AGE AT LICENSURE

AGE	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
19 or less	9	17	3	14	4	29	16	18
20-24	27	52	6	29	9	64	42	48
25-29	2	4	2	9	-	-	4	5
30-34	5	9	3	14	-	-	8	9
35-39	2	4	1	5	-	-	3	4
40-44	3	6	5	24	-	-	8	9
45-49	-	-	-	-	1	7	1	1
50-54	3	6	1	5	-	-	4	5
55-59	1	2	-	-	-	-	1	1
60 and over	-	-	-	-	-	-	-	-
	52	100	21	100	14	100	87	100

The year in which respondents were initially licensed is shown in Table 26.

TABLE 26
YEAR OF INITIAL LICENSURE

YEAR	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
1950	1	2	-	-	-	-	1	1
1951	1	2	2	10	2	14	5	6
1952	1	2	1	5	-	-	2	2
1953	1	2	-	-	-	-	1	1
1954	-	-	1	5	1	7	2	2
1955	5	10	-	-	1	7	6	7
1956	2	3	1	5	4	30	7	8
1957	2	3	2	9	2	14	6	7
1958	3	6	3	14	1	7	7	8
1959	4	8	2	9	1	7	7	8
1960	5	10	-	-	-	-	5	6
1961	4	8	1	5	2	14	7	8
1962	7	13	1	5	-	-	8	9
1963	7	13	3	14	-	-	10	12
1964	4	8	1	5	-	-	5	6
1965	5	10	3	14	-	-	8	9
	52	100	21	100	14	100	87	100

Table 27 shows the year respondents were first employed as licensed practical nurses. Five percent have never been employed as a practical nurse.

See Table 27.

TABLE 27
YEAR FIRST EMPLOYED AS LPN

YEAR	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Never as LPN	3	6	1	5	1	7	5	5
1950	1	2	1	5	-	-	2	2
1951	2	4	-	-	1	7	3	4
1952	2	4	-	-	1	7	3	4
1953	-	-	-	-	-	-	-	-
1954	-	-	2	11	1	7	3	4
1955	3	6	-	-	3	23	6	7
1956	1	2	1	5	2	14	4	5
1957	2	4	2	11	1	7	5	5
1958	3	6	2	11	1	7	6	7
1959	6	12	3	16	-	-	9	11
1960	1	2	-	-	2	14	3	4
1961	7	13	1	5	1	7	9	11
1962	6	11	1	5	-	-	7	8
1963	8	15	3	16	-	-	11	13
1964	4	7	1	5	-	-	5	5
1965	2	4	1	5	-	-	3	4
1966	1	2	-	-	-	-	1	1
	52	100	19	100	14	100	85	100

Note: Two in the COED group did not respond to this item.

Eighty five percent of the respondents are presently married. Of the ninety three percent either presently married or married at one time, 83% had been married three years or more. See Tables 28 and 29.

TABLE 28
PRESENT MARITAL STATUS

STATUS	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Religious Order	2	4	-	-	-	-	2	2
Single	2	4	1	4	1	7	4	5
Married	47	90	14	66	13	93	74	85
Divorced	1	2	2	10	-	-	3	4
Separated	-	-	2	10	-	-	2	2
Widowed	-	-	2	10	-	-	2	2
	52	100	21	100	14	100	87	100

TABLE 29
NUMBER OF YEARS MARRIED

	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
1-3 Years	8	17	4	21	1	8	13	17
3-5 Years	13	28	5	26	2	17	20	26
6-10 Years	14	30	4	21	4	33	22	28
10 or More	6	13	3	16	5	42	14	18
20 or More	4	8	2	11	-	-	6	8
30 or More	2	4	1	5	-	-	3	3
	47	100	19	100	12	100	78	100

Note: One in each of the CIED, COED, and IIED groups did not respond to this item and six had never married.

Among the respondents there are a large number of children most of whom are young in age. Seventy-eight percent have one child or more. One has eight children all under age 10. Sixty-five percent have 1-3, 12% have 4-7, and 22% have none. The children of 52% are all under 6 years of age, of seven percent are all between 6-11, of seven percent are all between 12-17, and of nine percent are all 18 or over. An additional three percent have one child in each of these age ranges. See Tables 30 and 31.

TABLE 30
NUMBER OF CHILDREN

NUMBER	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
None	9	17	8	38	2	14.3	19	22
1	13	25	3	14	1	7.1	17	20
2	16	31	6	29	1	7.1	23	27
3	10	19	1	5	5	35.8	16	18
4	3	6	3	14	2	14.3	8	9
5	1	2	-	-	-	-	1	1
6	-	-	-	-	2	14.3	2	2
7	-	-	-	-	-	-	-	-
8 or More	-	-	-	-	1	7.1	1	1
	52	100	21	100	14	100.0	87	100

TABLE 31
AGES OF CHILDREN

AGES	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
No Children	9	17	8	38	2	14	19	22
Under 6	34	65	3	14	8	58	45	52
6-11	1	2	3	14	2	14	6	7
12-17	3	6	2	10	1	7	6	7
18 + Over	4	8	4	19	-	-	8	9
One In Each Above Range	1	2	1	5	1	7	3	3
	52	100	21	100	14	100	87	100

The mobility rates of individuals in the total group has been relatively low. Nearly one-half (46%) live at the same address as at the time they were initially licensed. Thirty percent have had only one address change since initial licensure and this could be a move ranging in distance from across the street to out-of-state. See Table 32.

TABLE 32
NUMBER OF ADDRESSES SINCE INITIAL LICENSURE (AS OF 1965)

NUMBER	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
1	24	46	8	38	8	57	40	46
2	14	27	9	43	3	22	26	30
3	9	17	2	9	2	14	13	15
4	4	8	1	5	1	7	6	7
5	1	2	1	5	-	-	2	2
	52	100	21	100	14	100	87	100

Comparatively stable geographically, they have also been relatively stable in their employment as practical nurses since initial licensure. Of the 82 responding to this item, 94% have been employed in at least one position as a L.P.N. Thirty-seven percent have held only the one position, 24% have held only two, 15% have held three and 18% have held between four and eight positions. Six percent have never worked as a practical nurse. See Table 33.

TABLE 33
NUMBER OF JOBS AS L.P.N.

NUMBER	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
0	2	4	1	5	2	15	5	6
1	17	35	7	36	6	43	30	37
2	15	31	2	11	3	21	20	24
3	4	8	5	26	3	21	12	15
4	6	12	2	11	-	-	8	10
5	3	6	2	11	-	-	5	6
6	1	2	-	-	-	-	1	1
7	-	-	-	-	-	-	-	-
8	1	2	-	-	-	-	1	1
	49	100	19	100	14	100	82	100

Note: Three in the CIED group and two in the COED group did not respond to this item.

The distance between place of birth and present residence shows thirty-one percent still reside in the same place or within a 25 mile distance, 29% live between 25 and 100 miles and 40% live over 100 miles from their places of birth.

TABLE 34
DISTANCE OF PRESENT RESIDENCE FROM PLACE OF BIRTH

MILES	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Same Place	5	10	-	-	3	21	8	9
25 or Less	10	19	4	19	5	36	19	22
25-50	9	18	3	14	-	-	12	14
50-100	7	13	3	14	3	21	13	15
100-200	7	13	2	10	1	7	10	11
200 or More	14	27	9	43	2	15	25	29
	52	100	21	100	14	100	87	100

Thirty-nine percent live 50 miles or less from the nursing program in which they were prepared, 24% live between 50-100 miles, 10% between 100-200 miles and 27% live 200 miles or over. Comparing these figures with the low number of addresses since licensure (See Table 32, page 31), it appears that when one does move, the move is a distant one. See Table 35.

TABLE 35
DISTANCE PRESENT RESIDENCE FROM NURSING PROGRAM ATTENDED

MILES	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
This City	10	21	0	-	2	14	12	15
25-less	5	10	6	35	1	7	12	15
25-50	5	10	1	6	1	7	7	9
50-100	11	23	2	12	6	43	19	24
100-200	4	9	1	6	3	22	8	10
200 -	13	27	7	41	1	7	21	27
	48	100	17	100	14	100	79	100

Note: Four in each of the CIED and COED groups did not respond to this item.

The above two tables indicate a relatively low mobility from place of birth, through location of preparatory program, to present residence.

At the time data were collected for the PNS in 1965, these 87 subjects were unemployed or gave out-of-state addresses. Employment status and place of residence of some changed between then and July, 1966 when the data for this sub-study were collected.

Solicitation of the reason for leaving Iowa was primarily aimed at the COED group 24% of whom, in the interim, have returned to Iowa. All of the IIED group are still in Iowa but in this same interim, 15% of the CIED group have left Iowa. As a result, 73% of the total group are now in Iowa and 27% are out-of-state. Of those presently out-of-state, 67% gave "marriage" as the reason for leaving Iowa, 17% left because of influence of parents, relatives, or employer, 12% because of opportunity for experience and four percent because of salary increase. See Table 36.

TABLE 36
REASON FOR LEAVING IOWA

	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Now in Iowa	44	85	5	24	14	100	63	73
Marriage	6	11	10	48	-	-	16	18
Opportunity for Exper.	-	-	3	14	-	-	3	4
Influence of Relative	-	-	2	9	-	-	2	2
Influence of Parents	-	-	1	5	-	-	1	1
Influence of Employer	1	2	-	-	-	-	1	1
Oppor. for Salary Increase	1	2	-	-	-	-	1	1
	52	100	21	100	14	100	87	100

Factors Influencing Employment Status

This group's picture of employment as practical nurses has also changed since the time of the PNS data collection in 1965 when the subjects of this sub-study were shown to be either unemployed or out-of-state and not contributing to practical nursing in Iowa at that time.

Of the CIED group 29% have returned to practical nursing, 10% full-time and 19% part-time; 12% are employed in health-related and other kinds of occupations, and 59% remain unemployed.

Of the COED group, 33% are now practicing practical nursing full-time, five percent are employed full-time in a health-related and 14% full-time in non-health related occupations. Forty-eight percent remain unemployed.

Of the IIED group, 23% are now employed as practical nurses, eight percent full-time and 15% part-time. One of the subjects became educated in professional nursing and is practicing full-time as a registered professional nurse. Seventy-seven percent remain unemployed.

Since one is now a full-time professional nurse, there are 86 remaining practical nurse subjects in this sub-study. Of these 86, 30% have returned to practical nursing, 16% full-time and 14% part-time; three percent are employed full-time in other health related fields, eight percent in non-health related fields and 59% remain unemployed. Therefore, 70% are not employed as practical nurses. See Table 37.

TABLE 37
PRESENT EMPLOYMENT STATUS

PRESENT EMPLOYMENT STATUS	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
LPN Full-Time	5	10	7	33	1	8	13	16
LPN Part-Time	10	19	-	-	2	15	12	14
Other Health Full-Time	2	4	1	5	-	-	3	3
Non-Health Full-Time	1	2	3	14	-	-	4	5
Non-Health Part-Time	3	6	-	-	-	-	3	3
Unemployed	31	59	10	48	10	77	51	59
	52	100	21	100	13	100	86	100

Of those presently employed, 49% are employed in general hospitals, three percent in psychiatric hospitals, nine percent in nursing homes and 11% in doctors' offices. Twenty-eight percent reported present employment in non-health institutions. See Table 38.

TABLE 38
EMPLOYMENT LOCATIONS OF SUBJECTS PRESENTLY EMPLOYED

EMPLOYER	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
General Hospital	13	62	3	27	1	33	17	49
Psych. Hospital	1	5	-	-	-	-	1	3
Nursing Home	1	5	1	9	1	34	3	9
Doctors' Office	-	-	3	27	1	33	4	11
Other	6	28	4	37	-	-	10	28
	21	100	11	100	3	100	35	100

Note: Thirty-one in the CIED group, and 10 in each of the COED and IIED groups reported being presently unemployed (Table 37). Therefore, no present employment location was identified by these 51 respondents.

Of the 61 presently not employed as practical nurses, 69% reported family responsibilities as the primary reason for not working and 11% gave this as the secondary reason. Eight percent reported their primary reason is that their husbands do not wish them to work and 26% gave this as the secondary reason. Six percent gave low LPN salary as the primary reason and 20% gave this as the secondary reason. See Table 39.

TABLE 39
PRIMARY AND SECONDARY REASONS FOR UNEMPLOYMENT AS A PRACTICAL NURSE

REASON	CIED		COED		IIED		TOTAL									
	Pri.	Sec.	Pri.	Sec.	Pri.	Sec.	Pri.	Sec.								
	N	%	N	%	N	%	N	%								
Personal Heal.	1	3	-	-	1	7	-	-	1	10	1	10	3	5	1	2
Fam. Respon.	25	67	5	14	8	58	2	14	9	90	-	-	42	69	7	11
Husband Does- Not Want Me To Work	4	11	9	24	1	7	2	14	-	-	5	50	5	8	16	26
LPN Salary Not Adequate	3	8	9	24	1	7	3	22	-	-	-	-	4	6	12	20
Distance From Home	1	3	3	8	-	-	1	7	-	-	1	10	1	2	5	8
Feel Not Ac- cepted As LPN	1	3	1	3	-	-	-	-	-	-	-	-	1	2	1	2
Unable To Work Shift Avail.	-	-	1	3	-	-	-	-	-	-	-	-	-	-	1	2
Other	-	-	2	5	2	14	-	-	-	-	-	-	2	3	2	3
No Response	2	5	7	19	1	7	6	43	-	-	3	30	3	5	16	26
	37	100	37	100	14	100	14	100	10	100	10	100	61	100	61	100

Of the two indicating "other" as the primary reason, they stated:

- (1) "I would need to acquire licensure in Illinois so am now working full-time as a secretary", and
- (2) "I recently returned to Iowa from Illinois and have not yet renewed my license".

The three "other" given as secondary reasons are:

- (1) "Am self-employed. I own and operate a hotel",
- (2) "Am a full-time airline stewardess", and
- (3) "I am not working as a LPN because my employer will permit me to function only as a nurse aide".

All 14% who are now employed as part-time practical nurses and gave addresses in Iowa (See Table 37) indicate they plan this employment status to continue. See Table 40.

TABLE 40
FAMILY RESPONSIBILITIES OF ALL PRESENTLY EMPLOYED PART-TIME AS PRACTICAL NURSES

NUMBER	GROUP	
3	CIED	One Child, Under 6 Years of Age
2	CIED	Two Children Both Under 6 Years of Age
3	CIED	Three Children All Under 6 Years of Age
1	IIED	Eight Children, Ranging in Age From 2-10 Years
1	CIED	Part-Time Teaching in Addition to Part-Time as LPN
1	IIED	Pregnant
1	CIED	Impaired Health
12		

Future Employment Plans

Fifty-seven percent reported the primary reason they would consider returning to employment is a change in family responsibilities. Thirteen percent gave this as the secondary reason. Sixteen percent reported supplementing of family income to be their primary reason; and 26% gave this as the secondary reason. Seven percent gave increase in LPN salary as the primary reason and 24% gave it as the secondary reason. See Table 41.

TABLE 41
PRIMARY AND SECONDARY REASONS FOR POTENTIAL RETURN TO EMPLOYMENT AS A
PRACTICAL NURSE

	CIED		COED		IIED		TOTAL									
	Pri. N	Sec. %	Pri. N	Sec. %	Pri. N	Sec. %	Fri N	Sec. %								
Enjoy Work or Contact Outside Home	4	11	7	18	1	7	1	7	1	10	3	30	6	10	11	18
Suppl. Fam. Income	8	21	9	24	2	14	4	29	-	-	3	30	10	16	16	26
Change in Family Respon.	18	49	8	22	9	65	-	-	8	80	-	-	35	57	8	13
Increase in LPN Salary	4	11	8	22	-	-	5	35	-	-	2	20	4	7	15	24
Improved Working Relations With Nsg. Person.	1	3	1	3	-	-	-	-	-	-	-	-	1	2	1	2
Other	-	-	1	3	-	-	-	-	-	-	-	-	-	-	1	2
No Resp.	2	5	3	8	2	14	4	29	1	10	2	20	5	8	9	15
	37	100	37	100	14	100	14	100	10	100	10	100	61	100	61	100

The one subject giving "other" as the primary reason is retired with two children over 30 years of age but reported she would return to practical nursing in an emergency such as a major disaster or war.

Of the number not employed as practical nurses, 73% plan to return to practical nursing and 23% plan no future employment. Two percent will return to work but not as practical nurses, two percent are undecided. See Table 42.

TABLE 42
PRESENTLY UNEMPLOYED LPNS' PLANS FOR FUTURE EMPLOYMENT

	CIED		COED		IIED		TOTAL	
	N	%	N	%	N	%	N	%
Do Not Plan to Work	6	19	3	25	3	33	12	23
Return to Prac. Nsg.	25	81	9	75	4	45	38	73
Return But Not to Prac. Nsg.	-	-	-	-	1	11	1	2
Undecided	-	-	-	-	1	11	1	2
	31	100	12	100	9	100	52	100

Note: Six in the CIED group, two in the COED group and one in the IIED group did not respond to this item.

This data shows that the group still unemployed as practical nurses should not be considered consistently and permanently out of the practical nurse work force.

The study indicates that practical nurses who have been unemployed for a period of six months or longer are not considered consistently and permanently out of the practical nurse work force. This finding is significant because it suggests that these nurses may be able to re-enter the workforce if appropriate support and training are provided.

All of the subjects who were unemployed for a period of six months or longer were interviewed. The majority of these subjects were unemployed for a period of six to twelve months, and they had a high level of motivation to return to work.

On an average, they obtained a higher level of education than their parents had. This indicates that these nurses are committed to their profession and are willing to invest in their own education.

Over one-half of the subjects who were unemployed for a period of six months or longer had a high level of motivation to return to work. This finding is significant because it suggests that these nurses are committed to their profession and are willing to invest in their own education.

A large percentage of the subjects who were unemployed for a period of six months or longer had a high level of motivation to return to work. This finding is significant because it suggests that these nurses are committed to their profession and are willing to invest in their own education.

Many subjects in the study reported that they were unemployed for a period of six months or longer. This finding is significant because it suggests that these nurses are committed to their profession and are willing to invest in their own education.

Finally, over one-third of the subjects who were unemployed for a period of six months or longer had a high level of motivation to return to work. This finding is significant because it suggests that these nurses are committed to their profession and are willing to invest in their own education.

In 1981, one-third of the group who were unemployed for a period of six months or longer had a high level of motivation to return to work. This finding is significant because it suggests that these nurses are committed to their profession and are willing to invest in their own education.

CHAPTER IV

SUMMARY AND CONCLUSIONS

This study concerns practical nurses who have been licensed in Iowa but are not presently employed as practical nurses in Iowa. The purpose was to determine: social and educational characteristics, their reasons for present unemployment and their plans for future employment as practical nurses in this State.

All of the subjects are women and the majority came from a rural background. Predominately, their fathers were farmers, their mothers were not employed outside the home, and they had from two to five siblings.

On an average, they attained a higher level of education than their parents but none had completed a baccalaureate degree.

Over one-half made their decisions to become practical nurses between the ages of 15 and 19 and first became acquainted with their preparatory program through mass media, particularly newspapers.

A large percentage of the group held at least one job before becoming licensed practical nurses and these jobs were primarily in health-related occupations.

During enrollment in nursing programs, the majority were financially supported by parents and relatives and a minority worked part-time to help finance their nursing education.

Slightly over one-third of the subjects were licensed as practical nurses on the basis of having attended a program in professional nursing.

In 1965, one-fifth of the group were 19 years of age and by far the greatest number were between 20 and 29. Few were over 55.

Eighty-five percent have been married at least three years. Three-fourths of the subjects have children and nearly one-half of these others have children who are all under six years of age.

Geographic mobility of practical nurses from place of birth to the location of their nursing preparatory program and between jobs since licensure is relatively low. They tended to go to nursing education programs and to have been employed as nurses near their home communities.

For the majority, past employment has been in general hospitals. In decreasing order of frequency, the remainder were employed in doctors' offices, nursing homes and psychiatric hospitals.

The vast majority of practical nurses ever licensed in Iowa continue to live in Iowa. Among those who do move out-of-state, "marriage" is given as the predominant reason.

In late 1965 these subjects indicated they were not employed as practical nurses in Iowa. Six months later, when the data were collected for this study, about one-third of the group had returned to practical nursing in this State.

For those who continue not to be employed as practical nurses in Iowa, it appears there is little that outside sources can do to facilitate their return to employment at this time. Among reasons given for their present unemployment, "family responsibilities" far excels any other. The great majority also indicated their return to work hinges on this same factor but that as their children mature in age and family responsibilities lessen, they plan to return to employment as practical nurses. Salaries do not seem to be a major factor in their decision to return. Very few indicated they definitely do not plan to return to practical nursing in the future.

Marriage, with its accompanying potential mobility, and motherhood, with its accompanying responsibilities, will no doubt continue to influence the

number of unemployed practical nurses. Many, however, will eventually return to active practice in this field. This cycle will unquestionably continue among practical nurses in Iowa.

The great majority are neither consistently nor permanently out of the practical nurse work force. Rather, they have been a comparatively stable group of workers to date. Over time, however, the aging process will demand prepared nurses for necessary replacements. Added to the present need for more available nursing service personnel in Iowa, a need which will continue and grow in the future, it is evident that the educational preparation of nurses for Iowa must be augmented.

CHAPTER V

RECOMMENDATIONS

The conclusions result in the following recommendations for Iowa:

1. that nurses for all fields of nursing be prepared in larger numbers,
2. that these nurses be prepared in approved educational programs in professional nursing, technical nursing, and practical nursing,
3. that applicants to these programs be better informed of the available types of educational preparation for nursing so that each can more effectively select the type of program for which his abilities and motivation are best suited,
4. that nursing education programs in Iowa be expanded in size and/or increased in number to provide additional available nursing personnel, and
5. that these programs be expanded in size and increased in number only when and where quality educational programs are assured.

ILLINOIS
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PRACTICAL BUSINESS
STUDY

11. Proposals

APPENDIX

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**PRACTICAL NURSING
STUDY**

(A Prospectus)

The research and evaluation described herein
is being performed pursuant to a contract
with the
United States Department of
Health, Education, and Welfare,
Office of Education

Supported by:

Division of Vocational and Technical Education
United States Office of Education
Department of Health, Education, and Welfare
Contract No. 5-85-038

FOREWORD

This is a Prospectus of a study supported by the United States Department of Health, Education, and Welfare, Office of Education. The research project is the responsibility of the University of Illinois, College of Education, with cooperation from the University of Iowa, Programs in Health Occupations Education. Some members of the research staff will have a background and experience in nursing education and nursing service.

An advisory committee representing professional associations and agencies will be utilized for guidance and consultation.

This study is concerned with determining the nature of the population of licensed practical nurses, their employment patterns and preferences, the recruitment and selection of students of practical nursing and the programs through which they are prepared, as well as the relationships among identifiable characteristics of individuals and their employment patterns as practitioners of practical nursing. It will include individuals, programs, and employment settings in the states of Illinois and Iowa.

All data collected will be held in strict confidence by the professional research staff. Upon completion of the study, the final report will be made available to all participating programs, agencies, and organizations. No individual or specific institution or agency will be identified by name in the reports.

Robert M. Tomlinson, Director

INTRODUCTION

The health occupations field is one of the most rapidly expanding areas in terms of demand for technical advancement and personnel. Despite the accelerated development of nursing programs and the attempts to augment the recruitment of personnel to meet past and present nursing needs, a critical shortage continues to exist in both quantity and quality at all levels of nursing. The increase in population and the growing need for services exceeds the increase in educational programs and student enrollment in programs. A restructuring of the knowledges, skills, and functions of traditional nursing patterns is also taking place.

One of the greatest single changes is the emerging role of the prepared, licensed practical nurse as a member of the nursing team. It is only in relatively recent times that programs of practical nurse education are reaching a level of maturity and stability of operation.

PURPOSES OF THE STUDY

The long-range goal of the study is the improvement of the nursing services through the improvement of the selection process, educational programs (including curriculum and the instructional staff) and better utilization of prepared personnel. This study will not attempt to implement changes, but will provide new knowledge and relationships in a meaningful manner that may be applied by those directly responsible for preparing practical nurses and utilizing their services.

The general hypothesis of the study is that there exist differential and identifiable characteristics among potential and actual students in approved programs of practical nursing, the programs themselves and the employment situations, and that meaningful relationships among these characteristics can be determined. Findings from an investigation of these characteristics and the relationships among them should serve to improve the quantity and quality of available nursing services.

DEFINITIONS

(1) *The practice of practical nursing:* The performance for

compensation of selected acts in the care of the ill, injured, or infirm under the direction of a registered professional nurse or a licensed physician or a licensed dentist; and not requiring the substantial specialized skill, judgment and knowledge required in professional nursing.¹

(2) **The Role of the Licensed Practical Nurse:** The work of the LPN is an integral part of nursing. The licensed practical nurse gives nursing care under the supervision of the registered professional nurse or physician to patients in simple nursing situations. In more complex situations, the licensed practical nurse functions as an assistant to the registered professional nurse.²

(3) **The Licensed Practical Nurse (LPN):** The occupation of practical nursing has developed in recent years to the place where all states legally provide for practical nurse licensure. The procedures and requirements for obtaining a license to practice as a practical nurse were established by statutes in Iowa in 1949 and Illinois in 1951.

A total of 13,744 licenses had been issued to practical nurses in Illinois and 3,976 issued in Iowa at the end of July 1965.

Particular attention will be given to those LPN's who have attended an approved nursing education program and have met the licensure requirements of Illinois or Iowa.

CONDUCT OF THE STUDY

This study consists of three interrelated phases which are scheduled over a 39-month period. The research group will be structured to work concurrently in Illinois and Iowa during each phase of the study.

¹National League for Nursing, *Licensed Practical Nurses In Nursing Services*, 10 Columbus Circle, New York, p. 39.

²Statement jointly approved by the American Nurses' Association and National Federation of Licensed Practical Nurses, 1964.

The universe of the possible employment locations for cooperation in the interviews will be established by contacting a sample of all currently licensed practical nurses in each of the two states. In addition all practical nurse education programs, public and private, will be contacted as possible participants.

Directories from the governmental agencies and professional associations will also be used to validate the sample.

PHASE I. - September 1965 to September 1966:

Objective - to identify the knowledges, functions, and occupational patterns of a selected sample of practical nurses who are licensed on the basis of having attended an approved nursing education program.

A random sample of approximately 550 practical nurses and 250 supervisors of practical nurses will be selected for a personal interview. Where possible, it is desirable to conduct the interviews at the employment locations. The study is designed to include representatives from all types of employment situations and assignments. The sample is structured to retain this representation without overburdening the cooperating employment agencies. To avoid prejudicing the study, the interviewees should be randomly selected from LPN's employed at the location.

PHASE II. - January 1966 to February 1968:

Objectives - (1) to determine the characteristics of all applicants, students, and graduates of selected programs of practical nursing and their relationships, and

(2) to determine the characteristics of a selected sample of programs of practical nursing, to identify those criteria related to student success, and occupational patterns of graduates.

The cooperation of at least thirty practical nurse education programs with a total enrollment of approximately 1,000 students will be solicited. The sample will include programs representing differences in size, administrative structure, educational personnel, curriculum organization, facilities, and community.

This phase will be concerned with all applicants for and students enrolled in the cooperating programs in the September 1966 and February 1967 classes.

The cooperating programs will be provided, from the National League for Nursing and other sources, with standardized tests and other special instruments for use in student selection and evaluation. Study personnel will visit the programs for additional data collection sessions, e.g., testing, interview, etc. All expenses for the tests and their scoring will be paid by the research project and the results made available to the program concerned.

The testing and visitation sessions will be cooperatively pre-scheduled and planned so as to require minimal alterations in schedules and activities. Three data collection sessions of less than one day each will be necessary during the enrollment of the class.

PHASE III. - January 1968 to July 1968:

Objective: to follow-up the applicants, dropouts, and graduates of the selected programs to determine relationships between the characteristics of the individuals, programs attended, and employment situations.

Starting about four months after graduation of the classes studied, a random sample of approximately 500 applicants, dropouts, and graduates will be contacted for a follow-up personal interview; the remainder will receive a mail questionnaire.

All data and previous findings will be applied to the follow-up of the new graduates in the employment situation to gain insights into the intercorrelations of personal characteristics, educational programs, employment situations, and occupational information and patterns.

This should result in the identification of discriminating selection criteria which tend to predict success in practical nurse programs and in employment.

NOTE: Not included in this research project but anticipated for possible future approval is a four-year follow-up study of the graduates and programs studied in Phases II and III. The instruments and findings of these earlier phases would be utilized to investigate relationships between characteristics of the individuals, programs, and employment situations over a time period.

THE DATA COLLECTION

The material to be collected from both the interviews and from the educational programs is dictated to a large degree by the factors that are assumed to have an influence on the individuals' educational and occupational choices and patterns and their responses. Consequently, a job history will be solicited from each interviewee which will then be assessed to determine if there are identifiable patterns such as: assignment of duties across or among employment locations, stability and mobility of assignment within and/or between employers and geographic locations, movement into and out of employment as a practical nurse.

A group of cards has been developed to represent a broad sampling of possible functions or activities that may be performed by a practical nurse. Each card has a single brief statement of an activity on it. The interviewee will be asked to indicate those activities she performs as a part of her duties.

The interview sheet was designed to identify (1) the formal educational background, (2) the nature of the education, (3) the place and persons involved in developing an interest in practical nursing, and (4) the occupational history.

THE DATA ANALYSIS

The use of standardized instruments whenever possible will facilitate interpretation and utilization of results by others. Computer programs and analyses have been developed by both the University of Illinois and the University of Iowa in conjunction with studies of technicians and Specialty Oriented Students. Many of these will be applied and/or adapted for use in this study.

The IBM 7094 computer facility at the University of Illinois will be utilized, wherever possible, in the analysis of the data.

THE UNIVERSITY OF IOWA

IOWA CITY, IOWA 52240



July 8, 1966

Program in Health Occupations Education

OFFICE OF:

Director
Program in Health Occupations Education
and
State Consultant
Health Occupations Education
Division of Vocational Education
Department of Public Instruction

Dear

The University of Iowa Program in Health Occupations Education, in cooperation with the Iowa Department of Public Instruction, is conducting a study of practical nurses who are, or have been, licensed to practice in Iowa.

The primary purpose is to determine work patterns of licensed practical nurses and we can only do this by obtaining accurate information directly from licensed practical nurses themselves. Because a study of all licensees would be prohibitive time-wise, a random sample method is being utilized.

You have been selected to represent a group of licensed practical nurses and we solicit your cooperation to help us complete this study. All information will be treated as strictly confidential and nowhere in the report of the study will you be identified either by name or license number.

We will be indeed appreciative if you will thoughtfully fill out the enclosed questionnaire and return it to us as early as possible but no later than August 8, 1966, so that the study may be completed on schedule. A stamped return envelope is provided.

Thank you for your time and cooperation. When individuals respond to such a request as this, they make a real contribution to the future progress of practical nursing.

Sincerely,

Handwritten signature of Elizabeth E. Kerr in cursive.

(Miss) Elizabeth E. Kerr
Director
Program in Health Occupations Education
The University of Iowa
and
State Consultant
Health Occupations Education
Division of Vocational Education
Department of Public Instruction

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Encl.

Program in Health Occupations Education
 Division of Medical Services
 The University of Iowa

IMMEDIATE REPLY REQUESTED

IOWA PRACTICAL NURSE SUB-STUDY

Questionnaire

Name _____
 Address _____
 License Number _____

PERSONAL AND FAMILY DATA

1. Size of town in which you were born.

<input type="checkbox"/> Rural	<input type="checkbox"/> At least 10,000 but less than 20,000
<input type="checkbox"/> Less than 2,500 people	<input type="checkbox"/> At least 20,000 but less than 50,000
<input type="checkbox"/> At least 2,500 but less than 5,000	<input type="checkbox"/> Larger than 50,000
<input type="checkbox"/> At least 5,000 but less than 10,000	

2. Distance of town where you now live from town where born.

<input type="checkbox"/> It is the same town	<input type="checkbox"/> 50-100 miles
<input type="checkbox"/> Less than 25 miles	<input type="checkbox"/> 100-200 miles
<input type="checkbox"/> 25-50 miles	<input type="checkbox"/> More than 200 miles

3. If you are living in a state other than Iowa or employed in another state, please give reason(s) for leaving Iowa.

4. Please list brothers and sisters and state whether they are older or younger than you.

5. Father's occupation. _____

6. Circle the highest grade completed by father in education.

Elementary						Junior High			High School			College				
1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	more

7. Mother's occupation. _____

8. Circle the highest grade completed by mother in education.

Elementary						Junior High			High School			College				
1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	more

9. What is your marital status? (Please check the one which applies to you and fill in the year that status was acquired.)

<input type="checkbox"/> single		<input type="checkbox"/> widowed 19__
<input type="checkbox"/> married 19__		<input type="checkbox"/> divorced 19__
<input type="checkbox"/> separated 19__		<input type="checkbox"/> married to church 19__

10. Give the ages of your children.

EDUCATIONAL EXPERIENCE

1. Circle the highest grade you completed.

Junior High			High School			Post High School				
7	8	9	10	11	12	1	2	3	4	more

2. List the types of formal education you have had beyond high school.

3. Did you work while you were attending practical nursing school? Yes No

4. Who provided the money to pay for your practical nurse education?

5. How did you first find out about the school of practical nursing that you attended?

6. At what age did you decide you wanted to be a licensed practical nurse?

7. Distance of town where you now live from where you went to practical nursing school.

<input type="checkbox"/> It is the same town	<input type="checkbox"/> 50-100 miles
<input type="checkbox"/> Less than 25 miles	<input type="checkbox"/> 100-200 miles
<input type="checkbox"/> 25-50 miles	<input type="checkbox"/> More than 200 miles

EMPLOYMENT INFORMATION

1. Work done before being licensed as a practical nurse. (Check more than one if necessary to describe your situation.)

<input type="checkbox"/> Never worked before
<input type="checkbox"/> Aide, orderly or attendant in health setting
<input type="checkbox"/> Job in health setting other than aide, orderly or attendant
<input type="checkbox"/> Job unrelated to health field

2. Number of different jobs held before becoming a L.P.N. _____.
3. Number of years you worked before you became a L.P.N. _____.
4. Year first employed as L.P.N. _____.
5. Number of years you have worked as a L.P.N. _____.
6. Number of different jobs you have had as a L.P.N. _____.
7. Total number of jobs held in your life time _____.
8. Are you now working? Yes ___ No ___

As a L.P.N. ___ Full-time ___ Part-time ___
 Other kind of job (Please State) _____
 Full-time ___ Part-time ___

9. If you are working, how long do you plan to work as a L.P.N.? _____
 Or work at some other job? _____
10. Where do you work? (If you are not working please mark this question for your last job.)

___ Hospital _____ Nursing Home
 ___ Doctor's Office _____ Public Health
 ___ Other (Please State) _____

11. If you are not working -

Do you plan to return to work? Yes ___ No ___
 As a L.P.N.? Yes ___ No ___
 Doing some other kind of work (Please state what) _____
 When do you plan to return to work? _____

12. Number 1, 2, 3 the reasons that best describe you and your situation.
 "I am not working as a Licensed Practical Nurse because:"

___ Distance to L.P.N. job too far.
 ___ Did not feel accepted by nursing personnel.
 ___ Personal health reasons.
 ___ Family and home responsibilities.
 ___ Low salary.
 ___ My husband does not want me to work.
 ___ Other reason (Please State) _____

13. Number 1, 2, 3 the reasons that would have the greatest influence on your decision to return to work as a L.P.N. (If you have returned to work or are working number 1, 2, 3 the reasons that best describe why you are working.)

___ L.P.N. salary increased.
 ___ Change in family responsibilities
 ___ Desire for contacts outside the home.
 ___ To supplement family income.

13. continued:

- Improved working relations with nursing personnel.
 Enjoy working.
 Other (Please State) _____

14. For the period of time from June 1, 1961 to date, please list the types of jobs you have held and the length of time you worked at each job.

NOTE:

IF YOU HAVE ANY QUESTIONS ABOUT THIS QUESTIONNAIRE OR THE STUDY, YOU MAY CALL THE STUDY OFFICE COLLECT BETWEEN 8:00 a.m. and 5:00 p.m. TELEPHONE AREA 319-353-3536.

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THE UNIVERSITY OF IOWA

IOWA CITY, IOWA 52240



July 22, 1966

Program in Health Occupations Education

OFFICE OF:

Director
Program in Health Occupations Education
and
State Consultant
Health Occupations Education
Division of Vocational Education
Department of Public Instruction

Dear

The study of practical nurses who are, or have been licensed to practice in Iowa conducted by The University of Iowa Program in Health Occupations Education in cooperation with the Iowa Department of Public Instruction is progressing well. We have heard from most of the group of practical nurses selected to represent the practical nurses of Iowa.

This study would be much more accurate and complete if we could hear from you. July 8, 1966 we mailed you a questionnaire, but just in case it got lost or mislaid we are mailing you a duplicate copy. It would be of great value to practical nursing if you will thoughtfully fill out the enclosed questionnaire and return it to us immediately. A stamped return envelope is provided.

Thank you for your time and cooperation. As our first letter indicated the purpose of this study is to find out work patterns of licensed practical nurses. We can do this only if you provide us with information.

Sincerely yours,

Handwritten signature of Elizabeth E. Kerr in cursive script.

(Miss) Elizabeth E. Kerr
Director
Program in Health Occupations Education
The University of Iowa
and
State Consultant
Health Occupations Education
Division of Vocational Education
Department of Public Instruction

EEK:11f

Enclosure

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