

NURSES and Other Hospital Personnel

*their earnings and
employment conditions*



U.S. DEPARTMENT OF LABOR

Arthur J. Goldberg, *Secretary*

WOMEN'S BUREAU

Mrs. Esther Peterson, *Director*

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Foreword

Better nursing care is a goal shared by health services, nurses' organizations, and scores of other groups throughout the country. Their continued efforts to increase recruitment and utilization of nursing personnel are helping to provide services vitally needed by our expanding population. Nevertheless, a nursing shortage continues—despite the fact that there were more than 500,000 professional nurses on duty in 1960.

In the search for ways to obtain additional nursing personnel, we must not underestimate the influence of wage levels and working conditions. In recognition of the need for accurate and up-to-date information about these factors, the Women's Bureau in 1958 issued a pamphlet summarizing salary and employment data collected for nurses and other hospital personnel by the U.S. Department of Labor's Bureau of Labor Statistics. This reprint of that pamphlet includes a Supplement (beginning on p. 28) that provides later statistics collected by the Bureau of Labor Statistics in mid-1960.

The new information, together with the ideas and measures for recruitment and training presented in the first part of this pamphlet, may suggest next steps for attracting more workers to the nursing field, and thus help us approach more closely the goal of adequate nursing care for all.

ESTHER PETERSON,
Director, Women's Bureau.

The data on earnings and supplementary benefits received by hospital personnel are based on surveys conducted by the Department of Labor's Bureau of Labor Statistics. Information about measures to increase the supply of nurses, in the first part of the pamphlet, was collected by the Women's Bureau, also of the Department of Labor.

The report was written by Jean A. Wells under the general direction of Stella P. Manor, Chief of the Division of Program Planning, Analysis, and Reports, in the Women's Bureau. Drucilla R. Hopper assisted in the preparation of the Supplement included in the reprint of this pamphlet.

Acknowledgment is made for the following photographs:

Cover—*Washington Post and Times Herald*.

Nursing students at a capping ceremony lift their lamps to future service.

Figures 1 and 2—U.S. Public Health Service.

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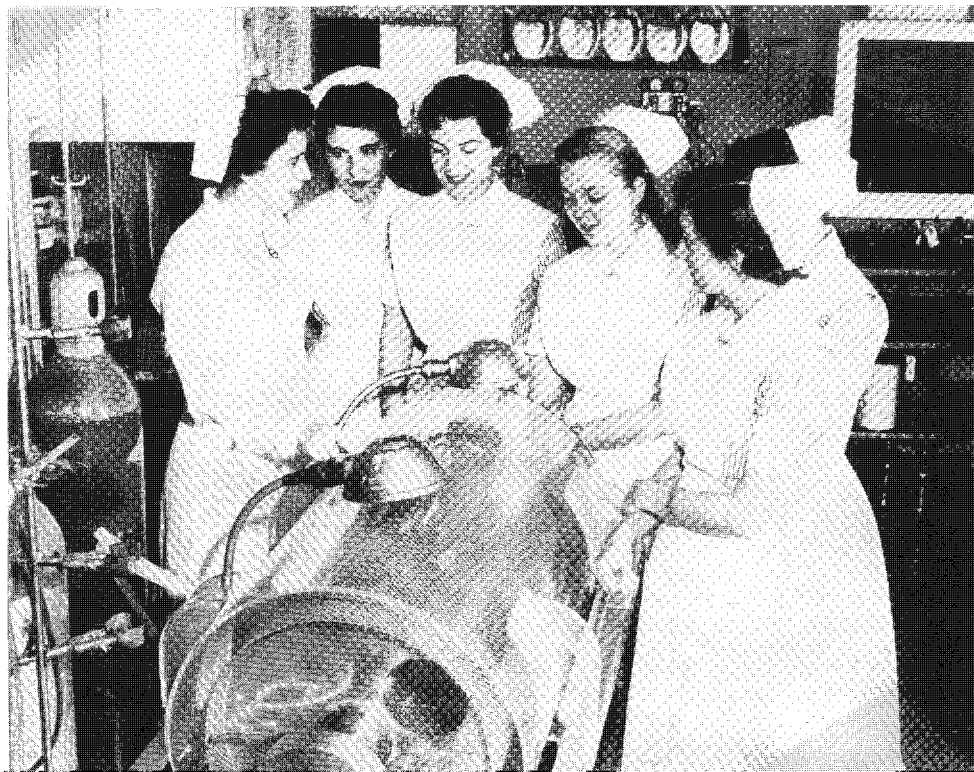


Figure 1.—The demand for more nurses extends to educators, such as this nursing instructor, who is explaining the operation of an artificial kidney to a group of nursing students.

Continuing Demand for More Nurses



The number of persons employed in the health field is now at an all-time high. As recently as 1940 there were just slightly over 1 million persons engaged in hospital and other health services. By 1950 the group had grown to more than 1,600,000 persons and has continued to expand since then.

Similarly, professional nurses—the largest single health occupation—numbered about 284,000 in 1940, as compared with 430,000 in 1956. During the intervening period, when the Nation's birth rate was rising and the death rate declining, the number of professional nurses kept pace with population growth. Nevertheless, the available supply still failed to match the mounting demand from the American people for more nurses.

The following principal developments since 1940 help explain the present nursing shortage:

- Widespread subscription to hospital and medical prepayment plans is encouraging people to seek hospital and medical care more readily.
- Our rising economic status is enabling the general public to afford more health services.
- The discovery of new medical techniques and drugs is expanding the medical services now available.
- Increased attention to prevention of illness and to the rehabilitation of the handicapped is resulting in greater health-staff requirements.
- The trend toward a shorter workweek for nurses, accompanied by the extension of hospital facilities and public health services, requires the employment of larger numbers of nurses.

Many of these influences will persist in the future and will no doubt contribute to a further rise in the overall demand for nurses. There

is no simple answer to the many-faceted shortage problem. Leaders in the profession have advocated the raising of salaries and improvement of working conditions as basic to the solution. Through its economic security program, the American Nurses' Association is working to raise the economic status of the nursing profession. This is considered fundamental to the achievement of several objectives: recruiting more newcomers into the field, holding trained and experienced personnel, and inducing more inactive nurses to return to work.

Historically, nurses have worked long and hard to serve the public, often without regard to financial return. Lack of specific information on their economic status has hampered the improvement of their situation. Widespread requests for reliable information on existing salaries and working conditions prompted the Women's Bureau to sponsor a survey of hospital earnings and related benefits in cooperation with the Bureau of Labor Statistics. This report summarizes the findings from the 16-area survey and describes briefly the main programs currently directed toward increasing the supply of nurses and other hospital personnel. It should serve as a springboard for further appropriate action by hospital boards and administrators, nurses' associations, and other interested groups.



Figure 2.—More nursing administrators are needed as hospitals and other health services expand.

Measures To Increase the Supply of Nurses



Intensive Recruitment Programs

The Committee on Careers, a unit of the National League for Nursing, is coordinating a nationwide effort to recruit more trainees for nursing. The National Committee distributes leaflets, articles, newsletters, and other materials intended to stimulate interest in nursing as a career. Other media used to inform the public about the need for more nurses include exhibits, films, radio and television announcements, and transportation and outdoor posters. The national program is augmented by intensive recruitment activities carried on by State and local committees, hospitals, and schools of nursing. Information and ideas are continually exchanged among the various groups. One of the most effective methods of recruitment is through the sponsorship of Future Nurses Clubs in high schools. However, recruitment appeals are not limited to youth but are also directed to older workers who might be persuaded to become practical nurses.

Financial Assistance

Increased demand for highly qualified nursing teachers and administrators is resulting from the greater enrollment of nursing students and the expansion of health services. The growing shortage has stimulated measures to train more nurses for positions of leadership. In 1956 a Federal law established a 3-year program of traineeships for advanced education in nursing administration, supervision, and teaching, as well as for public health work. For graduate work in nursing during the first school year (1956-57), over 550 trainees selected under the Federal program received scholarships which covered tuition, fees, certain allowances, and a stipend. During the second year, the number of trainees is expected to approximate 800. The United States Public Health Service is to evaluate the traineeship program in 1958 to determine its effectiveness and the need for continuing it.

Other scholarships and fellowships are also being offered for both basic nursing training and graduate work by public and private agencies, as well as by hospitals and schools of nursing. Young women who are interested in a nursing career are advised to seek information from their school counselors about the types of financial assistance available.

Modified Training Program

In their search for additional educational facilities and for modified methods of training nurses, some educators have introduced an experimental training program. A project, called the Cooperative Research Project in Junior and Community College Education for Nursing, was launched in 1952 under the auspices of Teachers College of Columbia University. Under this project, associate-degree programs for the training of nurses were developed in several junior and community colleges in various parts of the country. In contrast to the traditional 3-year diploma course offered by hospital schools, the new type of program is college-centered and lasts approximately 2 years. The curriculum of the modified program includes general academic subjects as well as nursing courses. In the interest of avoiding duplication of subject matter, the nursing courses have been reduced in number and broadened in scope. Repetitive practice has been reduced to a minimum. The hospital work performed by nursing students is supervised by college teachers and viewed as a laboratory assignment. Thus, the program retains the principle of integrating theory and practice in the training of nurses. An evaluation of the experimental project is expected to be released in 1958.

Meanwhile, news of the project has stimulated other colleges to develop independent programs, generally similar in principle to those in the project. The National League for Nursing, in cooperation with the American Association of Junior Colleges, has developed guiding principles and has provided consultation services to interested groups but has cautioned hospital schools against jeopardizing their current programs by acting hastily in shortening them without first studying thoroughly the philosophy and objectives of the new program. The League, in recognizing the adaptability of junior colleges to educational needs, states in *Nursing Outlook* (December 1957) that "a significant new source for the education of bedside nurses may be taking form to ease the problem and help provide an adequate number of nurses for our growing nation."

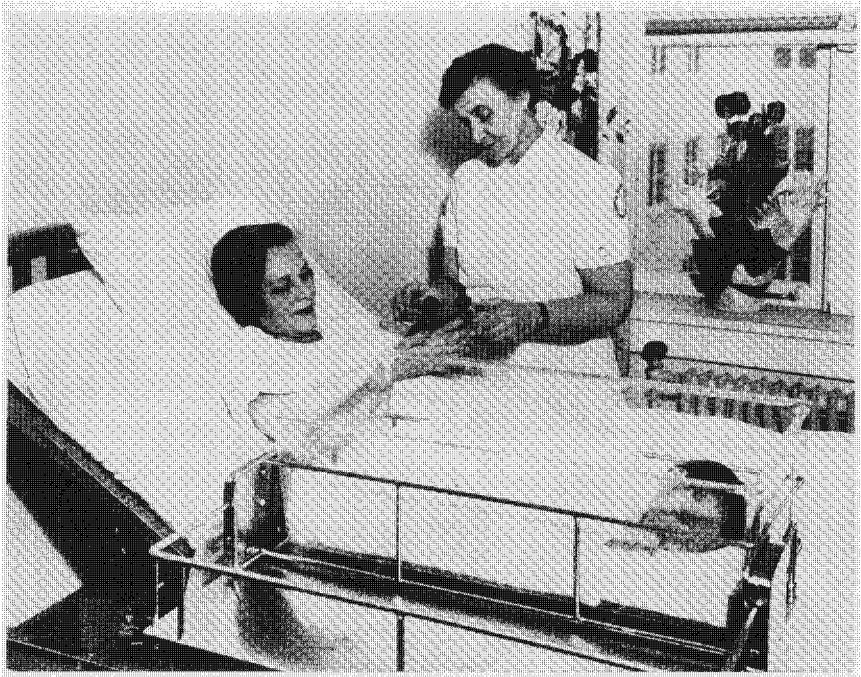


Figure 3.—A student practical nurse, assisting in the care of a mother and baby, is part of a medical team in which all members perform duties for which they are trained.

Effective Utilization of Trained Nurses

To encourage the most effective use of the professional skills of nurses, the nursing research unit of the Public Health Service has made a number of studies in hospitals. Most of the studies have sought to develop methods for analyzing the work duties of nursing personnel. Scientific techniques are being developed to determine whether professional nurses are performing clerical, housekeeping, or other routine duties which could be assigned to clerks, maids, or nursing aides. The studies are expected to be useful to hospital administrators and supervisors in improving hospital management and thus in providing the best nursing care possible.

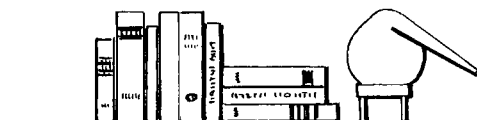
With a similar purpose in mind, the American Nurses' Association undertook a 5-year research program called Studies of Nursing Functions. Research projects have been developed concerning job content, organization of work assignments, interpersonal relations of hospital personnel, methods of supervision, and nurse-patient relationships. Project findings have already been used as a basis for changes in nursing education as well as for new staff assignments. To further extend research in nursing, the American Nurses' Association established the American Nurses' Foundation, Inc., in 1955.

The American Nurses' Association has also undertaken an extensive and continuing project of defining the functions, standards, and qualifications for the practice of professional nursing. Since 1952 thousands of nurses from all over the country have participated in the development of statements concerning 13 different positions within professional nursing. These statements are designed to represent a reasonable balance between present practice and emerging patterns and are serving as guides for achieving the best nursing practice possible.

In addition, a statement regarding the functions of practical nurses within the field of nursing has been developed by the American Nurses' Association and the National Federation of Licensed Practical Nurses.

Further analysis of research findings and their application to work situations is continuing.

Retraining of Inactive Nurses



In order to encourage inactive nurses to return to the field of nursing, special efforts are being made to help them learn new medical developments and regain skills which have become rusty. A sizable reserve of trained but inactive nurses exists since, like other women workers, nurses frequently leave their jobs when they marry or have children. At last report, there were about two inactive registered nurses for every three registered nurses who were active in the profession.

Some hospitals favor formal refresher courses as a means of attracting former nurses back into service when their family responsibilities become lighter. Since instruction precedes employment, it increases the confidence of incoming nurses and does not interfere with regular nursing duties. In refresher courses, nurses are formally acquainted with new drugs, treatments, and equipment, and they review current practices in nursing. The courses may be conducted by the hospital itself, by a local school or college, or—quite frequently—through some sort of joint arrangement. Cost to the nurses is usually quite low. In some instances, course participants must agree to work in the sponsor hospital after completion of their refresher course. In many cases, they are expected only to resume a career in nursing and thereby make a general contribution to the supply of nursing personnel.

Other hospitals, keenly aware of the difficulties in obtaining professional nurses, welcome job applications from all inactive nurses.

Those who are hired are then given in-service training on an individual basis in the subjects in which they need special help. Supervision is fairly close during the first few weeks. Those who do not perform well under pressure are placed in suitable work situations. Since such individual attention given previously inactive nurses encourages them to stay on the job and thus tends to decrease turnover, many hospitals find it profitable to spend time and money on this type of retraining.

In their efforts to bring inactive nurses back into service, some hospitals have also made arrangements for child-care centers and special transportation facilities.

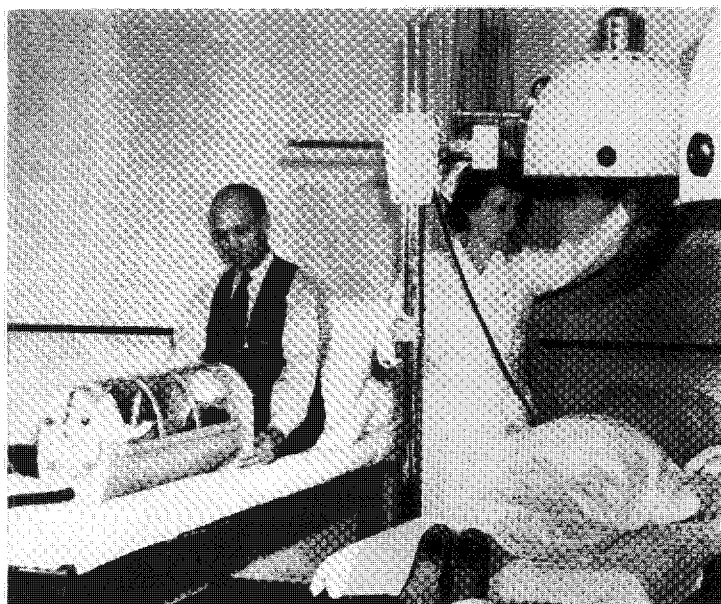


Figure 4.—Nurses must know how to operate many types of new equipment.

Part-Time Work

Many hospital administrators have increased part-time work opportunities and have found that part-time workers can be used very advantageously to supplement the full-time work staff. Their call for nursing personnel on a part-time basis has attracted many married women, willing to work half days or a few days a week in a local hospital. Some of these women are the previously inactive nurses who returned to nursing when their families no longer required their full attention and energy.

The employment of nurses on a part-time basis is well suited to the round-the-clock operations of hospitals. In most cases, part-time workers have regular schedules. Their chief value is as relief workers for the full-time staff during their days off. In areas of severe nursing shortages, evening and night shifts may be almost entirely staffed by part-time workers. During the busiest hours of the day there is additional need for part-time workers, particularly for versatile nurses who can give all types of nursing care.

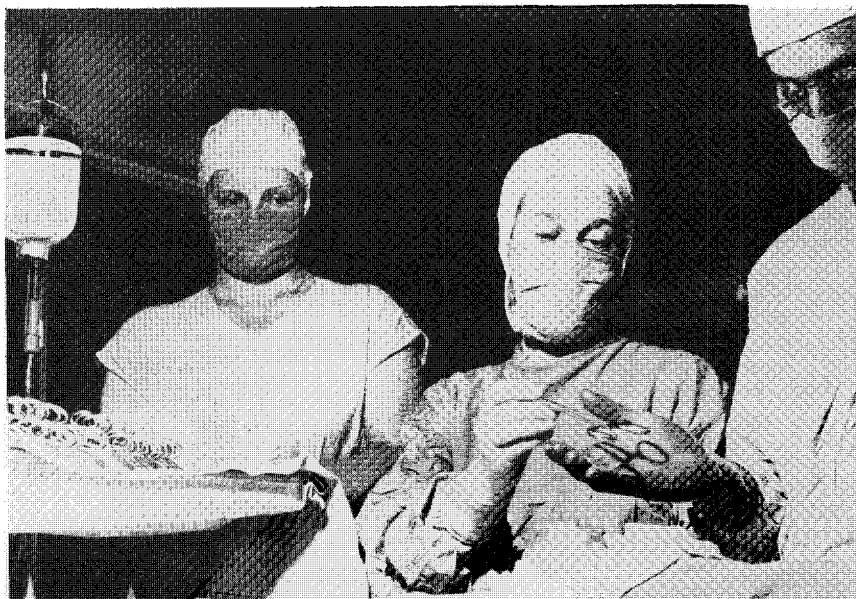


Figure 5.—The important work of the medical team is highlighted at a dramatic moment in the operating room.

Findings of Hospital Survey



The survey of salaries and employment conditions of nurses and other selected hospital personnel was conducted in 16 large metropolitan areas between May 1956 and March 1957 by the U. S. Department of Labor's Bureau of Labor Statistics in cooperation with the Women's Bureau.¹ The 400,000 employees of the hospitals surveyed were located in areas ranging in size from Dallas (with about 5,000 hospital employees) to New York City (with about 100,000 hospital employees). Each of the 16 areas contained a city which was relatively large for its State. The areas surveyed and the periods of study are listed in table 1, along with the numbers of hospitals and employees represented in the survey.

Highlights

General duty nurses employed by hospitals in the 16 metropolitan areas were generally earning between \$60 and \$80 a week when surveyed.² These earnings were received in most instances for 40 hours of work per week. For work after 40 hours, nurses usually received either compensatory time off or straight-time pay. Premium rates were generally paid for work on evening and night shifts. Few of the professional nurses in the 16 survey areas were provided meals or rooms by their hospital employers, and less than one-third were

¹ The survey covered all types of hospitals employing more than 50 workers—with the exception of nursing and rest homes. Personal visits were made by trained representatives to 401 hospitals selected from about 800 hospitals. Salary data were collected only for major occupations, but information on employment conditions and supplementary benefits covered almost all hospital personnel.

Detailed reports entitled "Earnings and Supplementary Benefits in Hospitals" were issued by the Bureau of Labor Statistics as they became available for each of the 16 metropolitan areas and are on sale by the Superintendent of Documents. The individual Bureau of Labor Statistics bulletins (Bull. 1210, parts 1 to 16), show separate information for private and for government hospitals and include descriptions of the specific occupations surveyed.

² Some hospitals have raised salaries since the survey was made in their areas; the data shown are for the period surveyed and have not been adjusted to include any recent changes.

supplied uniforms and/or laundry service. The usual supplementary benefits included at least 5 paid holidays a year and at least 2 weeks of paid vacation after 1 year of employment. Most hospitals in the 16 survey areas also made some provision for health and retirement benefits.

Table 1.—NUMBER OF HOSPITALS AND EMPLOYEES REPRESENTED IN HOSPITAL SURVEY IN 16 AREAS, 1956-57

Area	Date of survey	Number of hos- pitals repre- sented	Number of hospital employees represented		
			Profes- sional nurses	Total nursing personnel	Total hospital employees
Atlanta	September 1956..	11	823	1, 620	5, 190
Baltimore	June 1956	37	1, 723	5, 544	16, 640
Boston	August 1956	77	3, 712	9, 176	33, 730
Buffalo	June 1956	24	1, 656	4, 365	13, 700
Chicago	August 1956	93	5, 661	14, 989	44, 500
Cincinnati	September 1956..	21	1, 221	3, 571	10, 090
Cleveland	November 1956..	30	2, 250	6, 301	17, 850
Dallas .....	.....do	12	673	1, 718	5, 080
Los Angeles-Long Beach.	January 1957	86	6, 594	16, 524	37, 930
Memphis	December 1956...	16	874	1, 832	7, 270
Minneapolis-St. Paul.	March 1957	33	2, 790	5, 341	16, 670
New York City ..	February 1957...	153	15, 969	37, 094	99, 910
Philadelphia	July 1956	65	3, 816	9, 626	29, 570
Portland (Oreg.) ..	May, July 1956..	20	1, 363	2, 904	6, 700
St. Louis	June 1956	47	2, 230	6, 809	18, 550
San Francisco- Oakland.	November 1956..	71	5, 037	9, 537	28, 230

The relationship of nurses' salaries to those of women employed by hospitals in other professional jobs was not consistent from area to area. In general, however, general duty nurses tended to earn more than X-ray technicians and about the same as medical technologists. On the other hand, salaries of general duty nurses were typically below those of medical social workers, medical record librarians, physical therapists, and dietitians in most of the survey areas.

Types of Hospital Employees Surveyed

The nursing personnel covered by the survey included not only general duty nurses but also nursing administrators and instructors as well as practical nurses and nursing aides. However, private duty nurses and nursing students were excluded from the survey. Within the 16 survey areas, the total number of nursing employees represented

from 25 percent of all hospital employees (in Memphis) to 44 percent (in Los Angeles-Long Beach). Typically, less than half the nursing group were professional (or registered) nurses. (See chart 1.) Hospitals in Baltimore, St. Louis, and Cincinnati had the lowest percentages (31 to 34 percent) of professional nurses on their nursing staffs, and those in Atlanta, Minneapolis-St. Paul, and San Francisco-Oakland had the highest (51 to 53 percent).³

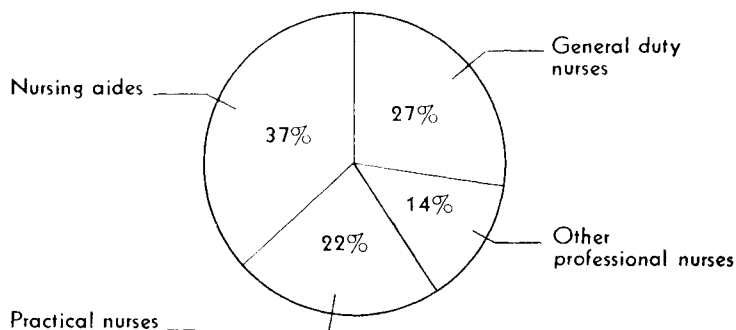


Chart 1.—Hospital Nursing Personnel in 16 Metropolitan Areas.

Other occupations common to most hospitals were also selected for study, although doctors were not covered in the survey. The occupations studied included those of dietitians, medical record librarians, medical social workers, medical technologists, physical therapists, and X-ray technicians. In addition, selected office, kitchen, laundry, housekeeping, and maintenance occupations were surveyed, although not mentioned specifically in this summary report.⁴

Among every 10 hospital employees in the survey areas: 6 generally worked in a private hospital; 3 in a State, county, or city hospital; and 1 in a Federal hospital. The ratios varied in some of the survey areas as, for example, in Memphis and San Francisco-Oakland, where the number of employees in government-operated hospitals exceeded those in private hospitals.

Hours of Work and Overtime Provisions

A 40-hour workweek was scheduled for most employees in the 16 areas surveyed. In Atlanta, however, the basic workweek of general

³ The percentage of professional nurses in private hospitals was generally higher than in government hospitals. As a result, the relative position of each area is affected by its proportion of private and government hospitals, and the areas named would differ somewhat in a comparison for private hospitals only.

⁴ A comparison of the relative earnings of various occupational groups, including nurses, with earnings of women kitchen helpers (one of the lowest paid hospital jobs) is contained in "Salaries and Supplementary Benefits in Private Hospitals, 1956-57," *Monthly Labor Review*, September 1957 (p. 1074).

duty nurses averaged 42 hours at the time of the 1956-57 survey; in Buffalo and Baltimore, 41 hours; and in Cincinnati, 39.5 hours. These averages support the popular belief that the length of the standard workweek is decreasing for most hospital employees. As recently as 1946, the regular work schedule of nurses averaged 48 hours a week; by 1949 it averaged 44 hours; and at the time of the 1956-57 survey, it approximated 40 hours.

A workweek of 40 hours was also in effect for most medical technologists, X-ray technicians, dietitians, medical social workers, and other professional workers studied. Moreover, in New York City, Chicago, and Philadelphia, some of these occupational groups averaged only 39 or 39.5 hours a week. The scheduled hours of auxiliary nursing personnel tended to be slightly higher than those of the professional personnel. In half the survey cities, practical nurses and nursing aides averaged a 40-hour workweek, but in the remaining cities their average hours ranged from 40.5 to 43 per week.

Virtually all the hospitals covered by the 1956-57 survey had established a pay policy for work done after regularly scheduled hours. Of every 5 professional nurses surveyed, about 2 were permitted to take equal time off for overtime work, another 2 received straight-time pay, and the remaining 1 was typically paid a premium rate of time and one-half. In private hospitals, the majority of nurses received straight-time pay; in government hospitals, compensatory time off. The time-and-one-half rate applied to a slightly higher proportion of nongovernment than government nurses; only in the San Francisco-Oakland area did it cover a majority of nurses in both types of hospitals.

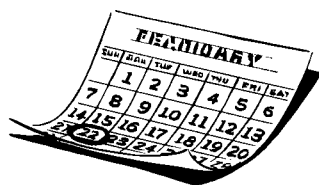
Overtime pay practices for other professional and technical workers were fairly similar to those for nurses in the hospitals surveyed. Most of those in private hospitals received straight-time pay. However, in government hospitals, the percentage of those granted compensatory time off was equaled by those paid time and one-half. The time-and-one-half rate covered a majority of the other professional and technical employees in government hospitals in Boston, Chicago, Memphis, Philadelphia, Portland (Oreg.), and San Francisco-Oakland.

Late-Shift Work

Since nursing care is required on a round-the-clock basis, hospitals must have some nurses on duty at all times. Over one-third of the hospital nurses surveyed in 1956-57 were assigned to late shifts—about 20 percent on the evening shift and 15 percent on the night shift.

Over four-fifths of the late-shift nurses received extra pay for their work. Shift premiums were generally less than \$7.50 a week, but varied considerably from hospital to hospital in each of the 16 survey cities. Evening differentials (the extra pay for evening work) were frequently higher than those for nightwork—evidence that evening shifts, which often conflict with family and social activities, are harder to staff. For nurses on evening duty, the predominant differential ranged between \$2.50 and \$5 a week, but for those on night duty it was generally less than \$2.50 a week. Differentials of \$5 to \$12.50 a week were received by one-fourth of the professional nurses on the evening shift and one-fifth on the late shift. Amounts of \$7.50 a week and over were reported for small groups of nurses in Atlanta, Baltimore, Boston, Chicago, Cleveland, and New York City.

Holidays With Pay



Virtually all the hospitals surveyed in 1956–57 granted their employees paid holidays, numbering in most instances from 5 to 11 a year. About one-third of the professional nurses employed by private hospitals received 6 paid holidays; another third received 7; and other small but significant groups—8, 9, or 10. The number of paid holidays was somewhat higher in government hospitals: over one-half the professional nurses received 11 paid holidays; one-fourth received 8; and most of the others—6, 7, or 10.

By city, the *predominant* number of paid holidays reported for nurses and other hospital employees was: 5—Dallas and Memphis; 6—Chicago, Cincinnati, Cleveland, Portland (Oreg.), and St. Louis; 7—Minneapolis-St. Paul, Philadelphia, and San Francisco-Oakland; 8—Baltimore; 10—Boston; and 11—New York City. In the remaining cities, the numbers varied considerably between and within various groups of hospital employees.

For work on paid holidays, most hospital nurses were given equal time off on another workday. However, almost one-tenth of the nurses surveyed—principally those in private hospitals—received double pay for holiday work. In government hospitals, a double rate was paid to relatively few of the registered nurses but to more than one-third of the other professional and technical workers.

Paid Vacations

At least two-thirds of the hospital employees in 9 of the 16 survey areas were eligible for a paid vacation after 6 months' service. Vacation benefits after 1 year's service were granted almost all hospital employees in all the survey areas.

After 1 year of service, a majority of professional nurses in private hospitals received 2 weeks of vacation; and in government hospitals, 4 weeks or longer. Vacation time increased with additional years of service. After 5 years' service, two-thirds of the nurses in government hospitals and one-third in private hospitals were entitled to at least a 4-week vacation. Most other nurses had a vacation of 2 or 3 weeks. Four weeks were granted a majority of private-hospital nurses after 10 years' service. For other professional and technical employees of hospitals, a vacation of 2 weeks was common after 1 year of service, at least 3 weeks after 5 years, and at least 4 weeks after 15 years.

Starting Salaries for Registered Nurses

Starting salaries for general duty nurses varied widely from hospital to hospital in each of the 16 areas surveyed in 1956-57. In most of the hospitals (all located in relatively large metropolitan areas), nurses' entrance salaries ranged between \$50 and \$80 a week; and in a majority of hospitals in 13 of the 16 cities, between \$55 and \$70 a week. Government hospitals had generally higher starting rates for nurses than private hospitals did. For example, a weekly minimum of \$65 or more prevailed in at least half of the government hospitals in 10 of the 16 survey cities (exceptions: Atlanta, Baltimore, Boston, Philadelphia, Portland (Oreg.), and St. Louis). By contrast, the same minimum rates were reported by a majority of private hospitals in only four cities: Chicago, Los Angeles-Long Beach, Minneapolis-St. Paul, and San Francisco-Oakland. In most of the other cities, private hospitals hired registered nurses at \$55 to \$65 a week.

Salaries of Registered Nurses

A majority of hospital nurses assigned to general duty earned between \$60 and \$80 a week in 13 of the 16 areas surveyed during 1956-57. In the remaining cities—Atlanta, Memphis, and Philadelphia—general duty nurses generally received from \$50 to \$65 a week. In the areas where hospitals employed sufficient numbers of male nurses to warrant reporting their average salaries, men usually earned more than women in the same job.

Average weekly salaries for women general duty nurses in the 16 areas ranged from \$58.50 in Philadelphia to \$75.50 in San Francisco-Oakland. (For all 16 survey areas, average salaries are shown in chart 2.) Government hospitals paid higher salaries on the average than private hospitals in the same area. Differences in the average earnings of general duty nurses in the two types of hospitals ranged from \$3 a week in New York City to \$18 a week in Memphis.

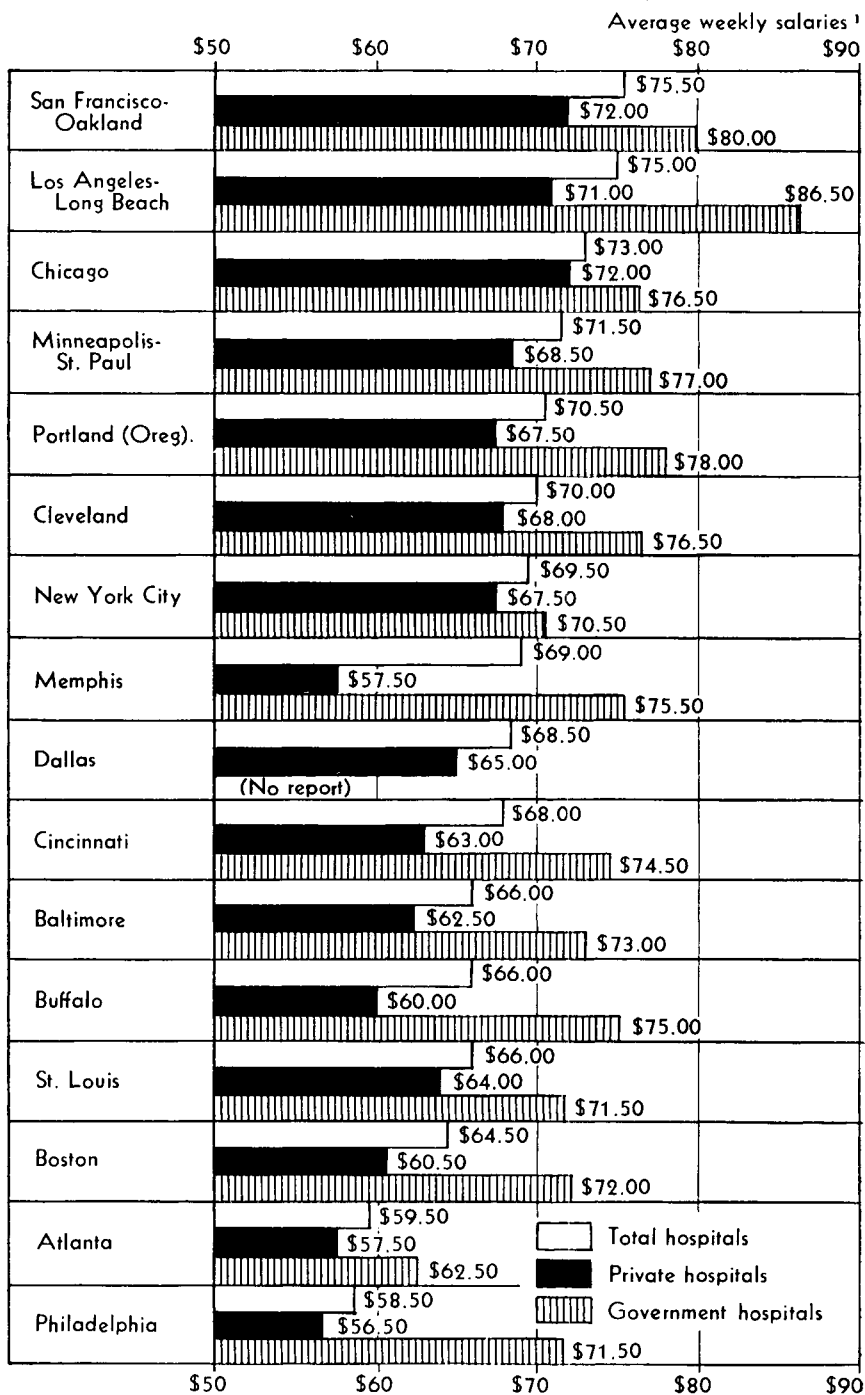
Highest paid nurses were the directors of nursing. (See Appendix table, p. 24.) Their average salaries ranged from \$100.50 a week in Boston to \$124.50 a week in Minneapolis-St. Paul but in a majority of the 16 survey cities were between \$110 and \$120 a week. In most of the survey areas, directors of nursing earned, on the average, 50 to 75 percent more than general duty nurses.

Supervisors of nurses, generally the second-highest paid group of nurses, were averaging in the 1956-57 survey period from \$75 a week in Philadelphia to \$98 a week in Los Angeles-Long Beach. Nurses covered in this group were primarily daytime unit supervisors and did not include late-shift supervisors, central-supply supervisors, or assistant directors responsible for certain types of functions. Slightly lower weekly averages were reported for nursing instructors—from \$71 in Atlanta to \$95.50 in San Francisco-Oakland. In a majority of the survey cities, average earnings of women employed in both these positions were about 20 to 30 percent more than those of general duty nurses.

Head nurses, who rated second in group size among hospital nurses, were fourth in salary level among the nurses studied.⁵ Their average earnings were about 10 to 15 percent above those of general duty nurses in most of the survey areas. Average salaries of head nurses were lowest in Philadelphia (\$66 a week) and highest in Los Angeles-Long Beach (\$87 a week).

⁵ Salary information was not secured for several small groups of hospital nurses, among which were assistant directors of nursing and late-shift supervisors.

Chart 2.—Average Weekly Salaries of General Duty Nurses (Women) in Private and Government Hospitals in 16 Areas, 1956-57



¹ Regular straight-time salaries

Salaries of Other Nursing Personnel

Practical nurses and nursing aides, who included many men as well as women, typically made up over half the nursing team. The number of practical nurses was about half that of nursing aides in most of the cities studied.

A majority of the women practical nurses (who generally equaled from 75 to 90 percent of all the practical nurses studied) earned between \$45 and \$60 a week in 9 of the 16 cities. In the remaining cities, most practical nurses earned more than \$60 a week in San Francisco-Oakland, between \$35 and \$50 in Baltimore, and less than \$45 in Atlanta, Dallas, Memphis, Philadelphia, and St. Louis.

Average weekly salaries paid to practical nurses were highest in San Francisco-Oakland (women—\$63; men—\$67.50) and lowest in Philadelphia (women—\$38; men—\$50.50). The relationship of practical nurses' earnings to those of general duty nurses differed among the areas surveyed. In over half the survey cities, practical nurses earned from 70 to 80 percent as much as general duty nurses. Figured on the basis of women's average hourly earnings in all the hospitals⁶ surveyed in 1956-57, the salary relationship of practical nurses to general duty nurses follows for each of the survey areas:

	<i>Percent</i>		<i>Percent</i>
San Francisco-Oakland-----	84	Atlanta -----	75
New York City-----	83	Cleveland -----	74
Boston -----	80	Chicago -----	72
Buffalo -----	80	Baltimore -----	72
Minneapolis-St. Paul-----	79	Philadelphia -----	64
Los Angeles-Long Beach-----	79	St. Louis-----	62
Portland (Oreg.)-----	76	Dallas -----	58
Cincinnati -----	76	Memphis -----	58

Women nursing aides received the highest average earnings in the San Francisco-Oakland area (\$59 a week) and the lowest in Atlanta (\$29 a week). Men nursing aides also averaged the highest in San Francisco-Oakland (\$62.50) but the lowest in Dallas (\$36.50). The proportion of women was slightly lower among nursing aides than among practical nurses—equaling about 70 to 90 percent of the nursing aides in most survey cities.

Actual straight-time earnings of a majority of the women nursing aides ranged between \$30 and \$55 a week in 11 of the 16 areas. The lower end of the range dropped to \$25 a week in four other areas: Atlanta, Buffalo, Dallas, and Philadelphia. In the fifth area, San Francisco-Oakland, the earnings range for a majority of the women nursing aides was from \$50 to \$60 a week.

⁶ The percentage and the position of each area on the list would be slightly different in a comparison of salary relationships in private hospitals only.

Women nursing aides earned from 55 to 70 percent as much as women general duty nurses in a majority of the survey cities. The percentage relationship of the aides' earnings to those of the nurses for the 1956-57 survey period follows:

	Percent		Percent
San Francisco-Oakland.....	78	Cleveland	58
Minneapolis-St. Paul.....	74	New York City.....	57
Los Angeles-Long Beach.....	70	Philadelphia	57
Boston	69	Baltimore	55
Portland (Oreg.).....	68	St. Louis.....	53
Buffalo	63	Atlanta	49
Chicago	63	Dallas	43
Cincinnati	61	Memphis	42

Salaries of Other Hospital Personnel

Salaries of hospital personnel performing professional or technical work outside the nursing field were also studied in the 1956-57 survey. Salary data were secured for medical technologists, X-ray technicians, dietitians, medical social workers, physical therapists, and medical record librarians—listed in order of their numerical importance in the hospitals studied. Women were predominant in all these occupations, equaling three-fifths of the X-ray technicians, about three-fourths of the medical technologists and physical therapists, and all or almost all of the medical social workers, dietitians, and medical record librarians. In most cities where both men and women were reported in these occupations, men's earnings were somewhat higher than women's.

Weekly salaries of women medical technologists averaged from \$57 in Philadelphia to \$83.50 in Los Angeles-Long Beach. They approximated the earnings level of general duty nurses—being the same in 2 cities, higher in 7 cities, and lower in 7 cities. However, in private hospitals, medical technologists averaged more than general duty nurses in 10 of the 16 cities. X-ray technicians, the next largest group of women professional workers in hospitals, received weekly salaries averaging between \$53.50 in Atlanta and \$76 in San Francisco-Oakland. In private and government hospitals combined, women X-ray technicians earned less than women general duty nurses in 13 of the 16 survey cities; but in private hospitals only, in 9 of 16 cities.

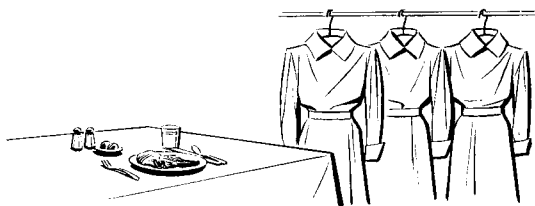
Women performing other professional and technical jobs in hospitals had the following range of average weekly salaries in the 16 areas surveyed in 1956-57: medical social workers—\$68 to \$99, medical record librarians—\$68 to \$86.50, dietitians—\$68.50 to \$84.50, and physical therapists—\$65 to \$85.⁷ (For a general picture of the rela-

⁷ Earnings of employees with supervisory responsibilities were included in the averages for medical record librarians but not for medical social workers and dietitians.

tive earnings of women employed in 13 hospital occupations, see chart 3. This shows the range of salaries averaged by occupational groups in each of the 16 survey cities and the median (middle) average.)

The only nonnursing group for whom starting salaries were secured in the 1956-57 survey were staff dietitians. Less than one-half the hospitals surveyed reported that they had formal starting rates for these workers. In all but 1 of the 16 survey cities, rates of \$70 a week or more were paid dietitians by a majority of government hospitals reporting a minimum rate. In Boston (the exception), the majority of government hospitals started their dietitians at \$65 to \$70 a week. Of the private hospitals surveyed (less than one-third of which had established a minimum for dietitians), a majority in each of the survey cities except New York paid dietitians at least \$60 a week. In New York City, only a very small percentage of private hospitals reported a minimum rate.

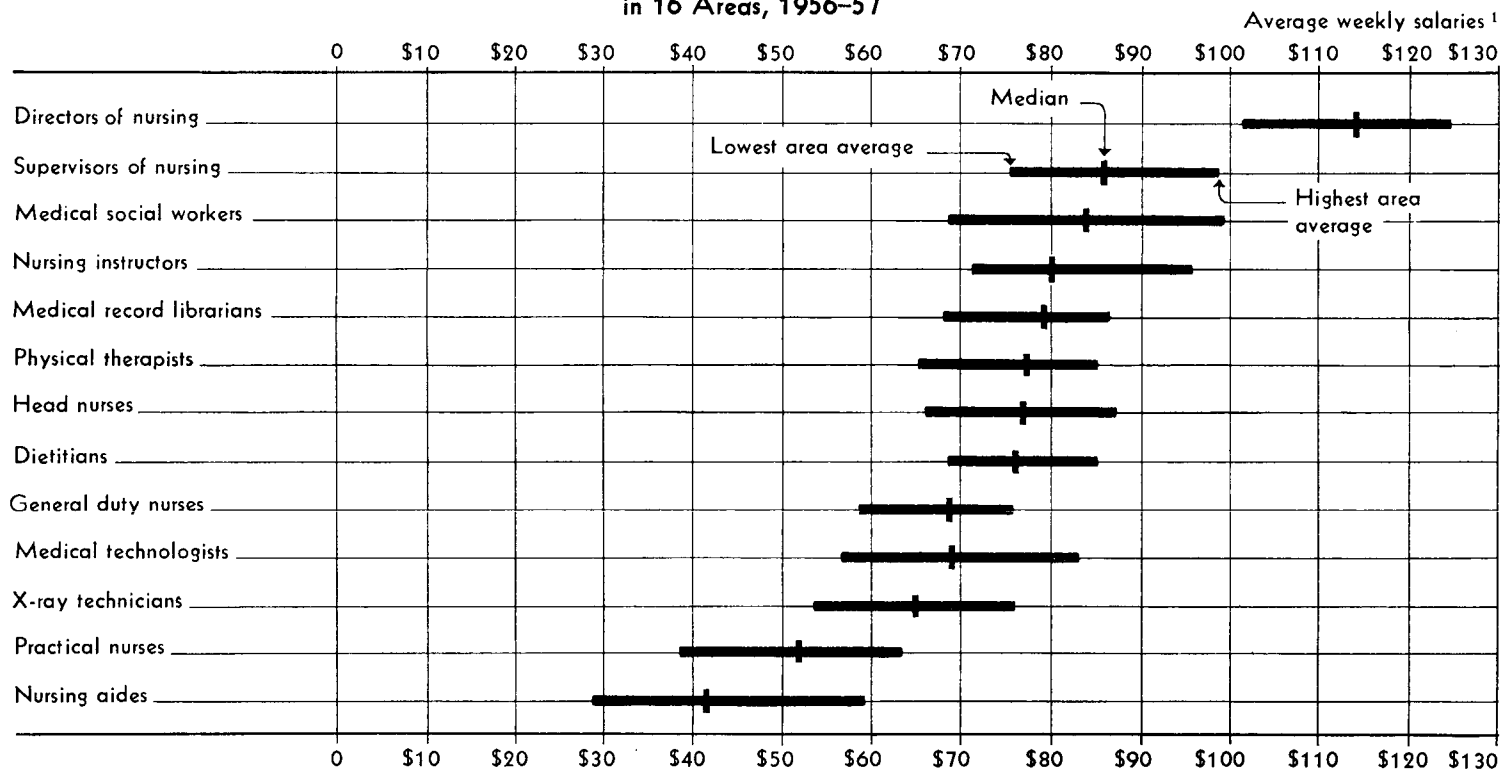
Perquisites Received



The practice of providing employees with meals, rooms, uniforms, or laundry service in addition to cash salaries still prevails in some hospitals, although it now applies to only a minority of hospital employees. The occupations and proportions of employees receiving these supplementary benefits varied among the 16 survey cities, but those most likely to receive meals and/or rooms were the directors of nursing, dietitians, and kitchen helpers. Provisions for uniforms and/or laundry service were somewhat more usual and were extended primarily to practical nurses, nursing aides, dietitians, directors of nursing, X-ray technicians, physical therapists, medical technologists, head nurses, and supervisors of nursing. Only very small percentages of professional nurses were provided meals or rooms by hospitals. Generally, less than one-third of the hospital nurses working in the 16 survey cities during 1956-57 were supplied uniforms and/or laundry service.

Very few hospitals in the three West Coast areas surveyed (Los Angeles-Long Beach, Portland (Oreg.), and San Francisco-Oakland), as well as few hospitals in Minneapolis-St. Paul, provided supplementary meals or rooms in addition to cash salaries. On the other hand, these perquisites were received by relatively larger groups of hospital employees in Baltimore and Philadelphia—where hospital salaries were frequently lower than in the other survey cities.

Chart 3.—Range of Average Weekly Salaries of Women in Nursing and Other Hospital Occupations
in 16 Areas, 1956-57



¹ Regular straight-time salaries.

Health and Retirement Benefits

Most nurses and other hospital employees in large metropolitan areas are covered by some form of health plan and retirement plan—financed partially or fully by the hospitals where they work.

Almost all hospital employees in the 16 areas surveyed were provided sick leave—time when they received full pay during absence from work because of illness. Small percentages of others received a limited type of sick-leave pay, such as partial pay, pay following a waiting period, or sick and accident insurance.

Formal provisions for hospitalization and medical benefits were found less often than was sick leave. The predominant type of plan set up to defray hospital expenses during illness was hospitalization insurance—underwritten by an insurance company or pooled fund and financed at least in part by the employer. It was found most frequently in the San Francisco-Oakland area and in some hospitals in all the other survey areas except Baltimore. Significant numbers of hospitals in most of the survey cities (including Baltimore) had a formal policy of paying hospitalization benefits to employees out of operating income.

A variety of formal plans providing for complete or partial payment of doctors' or surgical fees existed in all the 16 survey cities. In three cities (San Francisco-Oakland, New York City, and Cincinnati) a majority of hospital employees received these benefits. In the other cities, smaller percentages were eligible—with the coverage extending to slightly more nurses than other hospital employees. The predominant type of medical or surgical benefit was paid by the hospital itself (in part or in full) rather than through group insurance.

Life insurance financed at least partially by the employer was provided over one-fifth of the hospital employees in each of the survey areas except Dallas (where the proportion covered was about one-seventh). At least a majority of the nurses and other employees were eligible for life insurance in three cities: Baltimore, Memphis, and Portland (Oreg.). Accidental death and dismemberment insurance covered significant proportions of hospital employees in Atlanta, Memphis, and San Francisco-Oakland; and fairly small groups in 12 of the other 13 areas. Catastrophe insurance—for major expenses that occur unexpectedly—was provided by only a few hospitals.

Although most hospitals are not automatically covered by the Federal Social Security Act, it has been possible since 1950 for private hospitals to secure coverage for their employees if the institution and two-thirds of the employees desire it. In 1956–57, a majority of hospital employees in 11 of the 16 survey areas were covered by the Federal program of old-age, survivors, and disability insurance (part

of social security) and at least one-third, in the remaining five areas. Most employees in private hospitals were covered by social security; those in government hospitals, by separate retirement plans. State and local hospitals may come under social security if the State where the hospital is located has an agreement with the Federal Government. Some employees—in both private and government hospitals—were covered by both social security and separate retirement plans. Virtually all could expect to receive some type of regular payment after they retire.

In Conclusion



Since the increased demand for nurses is expected to persist at least through the late 1950's and early 1960's, continued efforts and resourcefulness must be focused on ways to provide the Nation with sufficient nursing personnel. The challenge stems from the growing needs of a complex and dynamic society which requires the best efforts and full cooperation of all its members.

Communities may wish to review their nursing needs and to appraise current efforts being taken toward meeting them. Interested groups and organizations may well question whether :

Salaries and employment conditions of the nurses in their community are adequate and equitable in the light of the survey information now available.

Intensive recruitment is under way among young women who may be interested in nursing as a career.

Financial assistance is available to provide leadership training for additional nursing educators and administrators.

Modified methods of nursing education are being considered.

Skills and services of each type of worker engaged in nursing care are being utilized effectively.

Older women formerly active in nursing are being encouraged to return to their profession.

Refresher training—either formal or informal—is available to bring former nurses up to date on medical developments.

Part-time employment opportunities have been increased sufficiently for older nurses and married nurses.

The nurses of America have long been dedicated to improving and maintaining the health of the American people—a goal which is linked directly to effective utilization of the human resources of the Nation. How well they will be able to help meet the future health needs of our Nation will be determined largely by the extent to which the various measures for securing more nursing personnel are applied successfully.

Appendix Table

AVERAGE WEEKLY SALARIES ¹ FOR SELECTED HOSPITAL OCCUPATIONS IN 16 AREAS, BY HOSPITAL OWNERSHIP, 1956-57

A. NURSING

Area and hospital ownership	Date of survey	Directors of nursing	General duty nurses		Head nurses	Nursing aides		Nursing instructors	Practical nurses		Supervisors
			Women	Men		Women	Men		Women	Men	
Atlanta.....	September 1956..	\$109. 50	\$59. 50	-----	\$69. 50	\$29. 00	\$38. 50	\$71. 00	\$43. 00	-----	\$76. 00
Private.....	do.....	-----	57. 50	-----	69. 00	31. 00	-----	-----	-----	-----	76. 50
Government..	do.....	-----	62. 50	-----	70. 50	-----	-----	-----	-----	-----	76. 00
Baltimore.....	June 1956.....	102. 50	66. 00	-----	69. 00	38. 00	43. 50	78. 50	47. 00	\$65. 00	76. 50
Private.....	do.....	95. 50	62. 50	-----	65. 00	31. 00	35. 00	-----	41. 00	-----	71. 00
Government..	do.....	127. 00	73. 00	-----	78. 50	48. 50	48. 50	-----	52. 00	-----	86. 00
Boston.....	August 1956....	100. 50	64. 50	\$76. 00	70. 00	44. 50	50. 50	76. 50	51. 50	61. 00	77. 00
Private.....	do.....	99. 00	60. 50	-----	66. 00	39. 50	45. 00	74. 50	48. 50	44. 50	73. 50
Government..	do.....	104. 50	72. 00	-----	75. 50	49. 50	52. 50	-----	57. 50	63. 00	83. 00
Buffalo.....	June 1956.....	112. 50	66. 00	-----	75. 50	42. 50	57. 50	80. 00	54. 00	62. 50	88. 00
Private.....	do.....	98. 00	60. 00	-----	68. 50	31. 00	41. 00	76. 50	45. 50	-----	76. 00
Government..	do.....	138. 00	75. 00	-----	85. 50	54. 50	59. 50	90. 00	61. 00	67. 50	107. 00
Chicago.....	August 1956....	119. 00	73. 00	77. 00	81. 00	47. 00	58. 50	88. 50	54. 00	58. 00	90. 00
Private.....	do.....	115. 50	72. 00	69. 50	78. 50	42. 50	46. 50	87. 50	50. 00	52. 00	86. 50
Government..	do.....	136. 50	76. 50	84. 00	88. 50	58. 50	61. 00	95. 50	61. 00	64. 50	97. 00
Cincinnati.....	September 1956..	113. 00	68. 00	-----	74. 50	42. 00	51. 50	77. 00	52. 50	58. 50	87. 00
Private.....	do.....	-----	63. 00	-----	71. 50	35. 50	42. 50	74. 50	48. 50	-----	82. 00
Government..	do.....	-----	74. 50	-----	84. 50	50. 50	53. 00	95. 00	57. 50	-----	91. 00
Cleveland.....	November 1956..	121. 00	70. 00	-----	80. 50	40. 50	48. 00	84. 50	51. 50	-----	86. 00
Private.....	do.....	111. 00	68. 00	-----	80. 00	39. 00	48. 50	84. 00	49. 50	-----	84. 50
Government..	do.....	141. 50	76. 50	-----	81. 00	44. 50	47. 50	-----	55. 50	-----	89. 00
Dallas.....	do.....	117. 00	68. 50	-----	79. 00	29. 50	36. 50	78. 50	40. 00	-----	83. 00
Private.....	do.....	101. 50	65. 00	-----	74. 00	29. 50	38. 00	73. 50	40. 50	-----	79. 00
Government..	do.....	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

Area and hospital ownership	Date of survey	Directors of nursing	General duty nurses		Head nurses	Nursing aides		Nursing instructors	Practical nurses		Super-visors
			Women	Men		Women	Men		Women	Men	
Los Angeles-Long Beach.	January 1957---	116. 50	75. 00	82. 00	87. 00	52. 50	56. 00	93. 00	59. 50	66. 00	98. 00
Private-----	-----do-----	106. 50	71. 00	-----	76. 50	47. 50	51. 50	82. 50	52. 50	57. 00	85. 50
Government----	-----do-----	154. 50	86. 50	-----	103. 00	57. 00	58. 50	-----	67. 00	67. 00	116. 50
Memphis-----	December 1956--	106. 00	69. 00	-----	75. 00	30. 50	-----	80. 00	41. 00	-----	84. 50
Private-----	-----do-----	-----	57. 50	-----	65. 00	29. 50	-----	71. 00	38. 00	-----	74. 50
Government----	-----do-----	-----	75. 50	-----	81. 50	32. 00	-----	94. 00	44. 00	-----	91. 00
Minneapolis-St. Paul.	March 1957-----	124. 50	71. 50	-----	83. 50	53. 00	58. 00	88. 00	56. 50	62. 50	93. 50
Private-----	-----do-----	120. 50	68. 50	-----	81. 00	52. 00	56. 00	82. 50	54. 00	-----	88. 00
Government----	-----do-----	134. 00	77. 00	-----	86. 50	55. 00	61. 00	95. 50	60. 00	-----	100. 50
New York City----	February 1957--	117. 00	69. 50	-----	77. 50	40. 00	48. 00	81. 00	57. 50	65. 00	90. 50
Private-----	-----do-----	112. 50	67. 50	-----	74. 00	35. 00	39. 00	82. 50	51. 50	52. 50	86. 00
Government----	-----do-----	132. 00	70. 50	-----	81. 50	54. 00	57. 00	80. 00	60. 00	66. 50	95. 00
Philadelphia-----	July 1956-----	115. 00	58. 50	-----	66. 00	35. 00	43. 00	75. 50	38. 00	50. 50	75. 00
Private-----	-----do-----	111. 00	56. 50	-----	63. 00	27. 50	32. 00	72. 00	35. 50	44. 50	70. 50
Government----	-----do-----	-----	71. 50	-----	76. 00	49. 50	51. 50	-----	-----	-----	100. 00
Portland (Oreg.)----	July 1956-----	110. 00	70. 50	-----	77. 50	47. 50	55. 50	-----	53. 00	63. 50	89. 00
Private-----	-----do-----	104. 00	67. 50	-----	73. 50	45. 50	51. 00	-----	50. 00	-----	80. 50
Government----	-----do-----	-----	78. 00	-----	91. 50	53. 00	59. 00	-----	53. 50	-----	99. 00
St. Louis-----	June 1956-----	113. 00	66. 00	-----	74. 00	36. 50	47. 00	74. 50	44. 50	58. 50	83. 00
Private-----	-----do-----	109. 50	64. 00	-----	70. 50	31. 00	38. 50	72. 00	39. 50	43. 50	81. 00
Government----	-----do-----	118. 50	71. 50	-----	81. 00	49. 00	50. 50	86. 50	53. 50	61. 00	85. 00
San Francisco-Oakland.	November 1956--	121. 50	75. 50	90. 00	85. 50	59. 00	62. 50	95. 50	63. 00	67. 50	93. 00
Private-----	-----do-----	117. 00	72. 00	-----	77. 50	57. 00	62. 00	92. 00	57. 00	-----	86. 00
Government----	-----do-----	130. 50	80. 00	-----	97. 50	63. 00	63. 00	110. 50	67. 50	-----	100. 50

¹ Salaries are for women unless otherwise specified. Salaries are regular straight-time earnings and have been rounded to nearest 50 cents.

AVERAGE WEEKLY SALARIES¹ FOR SELECTED HOSPITAL OCCUPATIONS IN 16 AREAS, BY HOSPITAL OWNERSHIP, 1956-57—ContinuedB. OTHER PROFESSIONAL AND TECHNICAL²

Area and hospital ownership	Dietitians	Medical record librarians	Medical social workers	Medical technologists		Physical therapists		X-ray technicians		X-ray technicians, chief	
				Women	Men	Women	Men	Women	Men	Women	Men
Atlanta.....	\$68. 50	\$75. 00	-----	\$67. 50	\$75. 00	-----	-----	\$53. 50	\$66. 50	-----	\$93. 50
Private.....	66. 50	71. 00	-----	66. 50	-----	-----	-----	56. 50	-----	-----	-----
Government.....	72. 50	84. 50	-----	69. 00	-----	-----	-----	50. 00	-----	-----	-----
Baltimore.....	76. 50	76. 00	\$75. 00	69. 00	73. 50	\$77. 00	\$81. 00	57. 50	64. 00	-----	106. 00
Private.....	71. 50	69. 00	71. 00	64. 50	-----	63. 50	-----	55. 50	54. 50	-----	117. 50
Government.....	86. 00	88. 00	80. 50	74. 00	-----	88. 50	-----	61. 50	72. 50	-----	-----
Boston.....	72. 00	68. 00	74. 50	60. 00	68. 50	65. 00	-----	58. 00	63. 00	\$75. 50	85. 50
Private.....	69. 50	66. 00	72. 50	57. 50	64. 50	61. 50	-----	57. 50	53. 50	75. 50	88. 00
Government.....	79. 50	73. 00	78. 50	67. 50	72. 50	69. 00	-----	61. 50	65. 50	75. 50	83. 50
Buffalo.....	70. 00	76. 50	82. 50	68. 00	69. 00	71. 50	78. 00	64. 00	73. 50	-----	-----
Private.....	63. 50	74. 00	80. 00	67. 00	67. 50	66. 00	77. 50	62. 50	69. 50	-----	-----
Government.....	82. 00	82. 50	87. 00	72. 00	71. 00	86. 00	78. 50	69. 50	76. 00	-----	-----
Chicago.....	84. 50	79. 50	85. 50	71. 00	74. 00	78. 50	82. 50	70. 00	75. 00	86. 50	92. 50
Private.....	85. 00	78. 00	86. 50	70. 50	75. 00	75. 50	86. 00	69. 00	72. 50	86. 00	87. 50
Government.....	83. 50	92. 00	84. 50	72. 50	72. 50	82. 50	79. 50	76. 00	78. 00	-----	105. 50
Cincinnati.....	78. 50	83. 50	89. 50	71. 50	76. 50	81. 50	-----	64. 50	75. 50	81. 50	-----
Private.....	75. 00	86. 00	-----	69. 50	-----	81. 50	-----	63. 00	-----	-----	-----
Government.....	85. 50	-----	-----	74. 50	-----	-----	-----	70. 00	-----	-----	-----
Cleveland.....	80. 50	84. 00	84. 50	67. 00	70. 00	74. 50	-----	63. 00	70. 50	-----	101. 50
Private.....	80. 00	82. 00	83. 50	67. 00	74. 00	70. 50	-----	61. 00	67. 00	-----	102. 50
Government.....	81. 50	89. 00	86. 00	66. 50	67. 00	79. 50	-----	69. 50	74. 50	-----	99. 00
Dallas.....	73. 50	80. 00	-----	68. 50	72. 00	76. 50	-----	70. 50	66. 00	-----	-----
Private.....	72. 50	82. 50	-----	67. 50	-----	-----	-----	67. 50	62. 50	-----	-----
Government.....	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

<i>Area and hospital ownership</i>	<i>Dietitians</i>	<i>Medical record librarians</i>	<i>Medical social workers</i>	<i>Medical technologists</i>		<i>Physical therapists</i>		<i>X-ray technicians</i>		<i>X-ray technicians, chief</i>	
				<i>Women</i>	<i>Men</i>	<i>Women</i>	<i>Men</i>	<i>Women</i>	<i>Men</i>	<i>Women</i>	<i>Men</i>
Los Angeles-Long Beach	78. 50	86. 50	99. 00	83. 50	83. 50	82. 00	84. 50	73. 50	77. 50	-----	94. 50
Private	76. 00	81. 50	82. 50	81. 50	81. 50	80. 00	82. 50	73. 50	76. 00	-----	93. 50
Government	82. 50	96. 50	104. 50	85. 50	85. 00	86. 00	88. 00	73. 00	78. 50	-----	98. 00
Memphis	75. 00	75. 00	-----	69. 00	-----	-----	86. 00	55. 00	-----	-----	-----
Private	70. 50	-----	-----	65. 00	-----	-----	-----	54. 00	-----	-----	-----
Government	79. 50	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
Minneapolis-St. Paul	82. 00	81. 50	94. 50	79. 00	-----	85. 00	87. 00	61. 50	70. 00	77. 50	94. 00
Private	80. 00	79. 00	-----	77. 50	-----	86. 00	-----	58. 00	61. 00	74. 50	95. 00
Government	86. 00	86. 50	-----	82. 00	-----	83. 50	-----	71. 00	76. 50	-----	-----
New York City	74. 00	81. 50	82. 50	65. 00	66. 50	73. 00	78. 00	67. 00	71. 00	83. 00	96. 00
Private	72. 00	83. 50	86. 00	65. 00	65. 50	70. 00	75. 00	66. 00	66. 50	81. 50	102. 50
Government	75. 50	78. 00	80. 50	64. 50	67. 50	76. 50	79. 00	69. 00	73. 50	-----	83. 50
Philadelphia	69. 50	70. 00	68. 00	57. 00	62. 50	69. 00	74. 50	56. 50	59. 00	64. 50	83. 00
Private	68. 50	68. 00	61. 50	56. 00	61. 50	67. 50	78. 00	56. 00	56. 50	63. 50	-----
Government	78. 00	84. 50	-----	64. 50	66. 00	-----	68. 00	-----	-----	-----	-----
Portland (Oreg.)	79. 00	79. 50	-----	70. 50	72. 50	80. 00	-----	73. 50	78. 00	-----	-----
Private	77. 50	78. 50	-----	71. 50	72. 50	79. 00	-----	74. 50	72. 50	-----	-----
Government	81. 00	-----	-----	67. 50	72. 00	-----	-----	-----	-----	-----	-----
St. Louis	73. 50	76. 00	78. 50	66. 00	69. 00	77. 50	-----	66. 50	73. 00	-----	86. 00
Private	70. 00	72. 50	-----	64. 00	69. 00	75. 50	-----	65. 50	73. 50	-----	85. 50
Government	80. 50	83. 50	-----	71. 00	70. 00	83. 00	-----	70. 50	73. 00	-----	-----
San Francisco-Oakland	81. 00	84. 50	92. 00	80. 50	81. 50	83. 50	-----	76. 00	82. 50	95. 00	100. 00
Private	79. 00	82. 00	84. 00	80. 00	81. 50	78. 00	-----	73. 50	82. 00	88. 00	102. 50
Government	85. 00	88. 50	95. 50	81. 50	82. 00	90. 50	-----	80. 00	82. 50	-----	97. 00

¹ Salaries are for women unless otherwise specified. Salaries are regular straight-time earnings and have been rounded to nearest 50 cents.

² The date of survey for each area is the same in part B as in part A of this table.

Supplement

Findings of Mid-1960 Hospital Survey

In the summer of 1960, the U.S. Department of Labor's Bureau of Labor Statistics resurveyed earnings and supplementary benefits for selected occupational groups of hospital employees.¹ This resurvey covered 15 of the 16 metropolitan areas which had been studied in 1956-57. Detailed data were collected for private hospitals and for State and local government hospitals. In the later survey, detailed earnings data were not collected (as in 1956-57) for Federal hospitals; however, general information about salary scales and supplementary benefits in these hospitals was obtained and reported separately.²

Summary

Average salaries of employees of private hospitals rose between 1956-57 and mid-1960 in all 15 metropolitan areas surveyed. Average area increases for occupations covered in the survey ranged from 13 to 40 percent; the average increase for the median area was 20 percent.

A majority of the general duty nurses in the metropolitan areas surveyed in mid-1960 received between \$70 and \$90 a week, not including overtime. Like the other hospital employees in the survey areas, most nurses had a 40-hour weekly work schedule. Beyond 40 hours, they typically received straight-time pay or compensatory time off. Nurses assigned to late-shift work were generally paid a shift differential, which varied widely—in most cases from \$2.50 to \$10 a week.

Almost all of the private and non-Federal Government hospitals surveyed in mid-1960 granted their employees from 5 to 13½ paid holidays a year and at least a 2-week vacation following the first year of employment. Sick leave and retirement benefits were provided for most of the hospital employees studied. Many also received hospitalization, surgical, medical, and accident benefits, as well as life insurance—with all or part of the cost of these benefits paid by the employer. The practice of providing perquisites—rooms, meals, free uniforms, and/or laundering of uniforms—continued to decrease and covered fewer employees in mid-1960 than in 1956-57.

¹ See Bureau of Labor Statistics Bulletin 1294, "Earnings and Supplementary Benefits in Hospitals, Mid-1960," which is available, at 50 cents a copy, from the Superintendent of Documents, U.S. Government Printing Office, Washington 25, D.C.

² Because of differences in collection methods between the 1956-57 and 1960 surveys, comparisons between the two time periods can be made only for private hospitals.

Average Salaries of Registered Nurses

Actual salaries of *general duty nurses* (in private and non-Federal Government hospitals), the largest group of hospital nurses, were typically between \$70 and \$90 a week in 13 of the 15 metropolitan areas surveyed in mid-1960, and tended to be somewhat lower in the two remaining areas (Atlanta and Memphis).

By area, average weekly salaries of general duty nurses ranged from \$65 in Atlanta to \$89 in Los Angeles-Long Beach. Nurses employed by Government hospitals (non-Federal) usually received higher salaries than those employed by private hospitals in the same area. For these two types of hospitals, differences in average salaries of general duty nurses varied from 50 cents a week in Cleveland to \$17 a week in Los Angeles-Long Beach. (See supplementary table 1.)

In private hospitals in mid-1960, the majority of general duty nurses had weekly salaries concentrated between \$70 and \$85 in 13 of the 15 survey areas. When surveyed in 1956-57, this occupational group typically earned between \$55 and \$75 a week in all 16 areas. (See supplementary table 2 for a comparison of average weekly salaries in private hospitals in 1956-57 and mid-1960.) At non-Federal Government hospitals surveyed in mid-1960, the majority of general duty nurses earned from \$80 to \$95 a week in 9 of the 10 areas where government hospitals were reported.

Directors of nursing received the highest salaries among the occupational groups surveyed. In mid-1960, their average salaries ranged from \$118 a week in Cincinnati to \$158.50 a week in San Francisco-Oakland. Their salaries averaged about 65 to 85 percent above those of general duty nurses in most of the survey cities.

Supervisors of nurses were the second highest paid nursing group. Their average weekly salaries ranged from \$80.50 in Atlanta to \$116 in both Los Angeles-Long Beach and San Francisco-Oakland. *Nursing instructors* had slightly lower salaries—averaging from \$78 in Memphis to \$116.50 in Los Angeles-Long Beach. These two groups, the supervisors and the instructors, typically received about 20 to 30 percent more than did general duty nurses.

Average salaries of *head nurses*, the second largest group of hospital nurses, were about 10 to 20 percent above those received by general duty nurses in mid-1960. For head nurses, the lowest salary average—\$71.50 a week—was reported in Atlanta and the highest—\$105.50 a week—in the San Francisco-Oakland area.

In Federal Government hospitals, professional nurses in positions covered by the Classification Act of 1949, as amended, received annual salaries ranging from \$4,345 (\$83.50 a week) to \$11,935 (\$229.50 a

week), effective July 10, 1960. Actual salaries varied with education and experience, as well as demonstrated ability. At Veterans' Administration hospitals, where most Federal nurses are employed, the salary range was from \$4,760 a year (\$91.50 a week) to \$10,255 a year (\$197 a week). Nurses in the commissioned corps of the U.S. Public Health Service earned from \$4,063 a year (\$78 a week) to \$13,831 a year (\$266 a week). According to a separate study made by the U.S. Civil Service Commission, the average salary of Federal nurses was \$5,461 a year (\$105 a week) in 1959—prior to the 7.5-percent increase of July 1960.

Starting Salaries of Registered Nurses

Formal starting rates, effective for general duty nurses in 87 percent of the hospitals (private and non-Federal public) surveyed in mid-1960, varied considerably from area to area but generally ranged between \$60 and \$95 a week. At a majority of the private hospitals with an established minimum, starting salaries were typically between \$65 and \$80 a week in 13 of the 15 survey areas. In Memphis, general duty nurses were hired by private hospitals at \$55 to \$60 a week; and in Chicago, at primarily \$80 to \$90 a week. Thus, over half of the private hospitals paid nurses starting salaries of at least \$65 a week in 14 of 15 areas in mid-1960, as compared with only 4 of 16 areas in 1956-57. At a majority of Government (non-Federal) hospitals in 11 of 13 areas, starting rates of general duty nurses were concentrated between \$70 and \$85 a week in mid-1960.

In the Federal service, starting salaries of general duty nurses are based on uniform salary schedules. At Veterans' Administration hospitals, nurses were paid (effective July 10, 1960) minimum annual salaries of \$4,760 (\$91.50 a week) to \$5,600 (\$107.50 a week), depending upon their qualifications. Federal nurses subject to the Classification Act were hired at \$4,345 a year (\$83.50 a week). Beginning salaries for nurse officers in the commissioned corps of the U.S. Public Health Service ranged from \$4,063 a year (\$78 a week) to \$5,513 (\$106 a week), as determined by their experience and education.

Salaries of Other Nursing Personnel

In mid-1960 as in 1956-57, *practical nurses* and *nursing aides* accounted for half or more of the nursing group in each of the 15 cities surveyed and included many men as well as women. The number of nursing aides, the largest group of hospital workers, was at least double that of practical nurses in 10 of the cities.

Among practical nurses, average weekly salaries were highest in the Los Angeles-Long Beach area (women, \$75.50; men, \$76), and lowest in Atlanta (women, \$42) and Dallas (women, \$46.50; men, \$45.50). Actual salaries of most women practical nurses ranged between \$50 and \$75 a week in 10 of the 15 areas. The majority of women in this occupation received lower salaries—\$40 to \$55 a week—in Atlanta, Dallas, Memphis, and Philadelphia, and higher salaries—\$75 to \$90 a week—in Los Angeles-Long Beach.

Nursing aides were paid the highest average weekly salary in San Francisco-Oakland (women, \$67; men, \$68.50), and the lowest in Memphis (women, \$32.50; men, \$36). Actual salaries of a majority of the women nursing aides in 11 of the 15 survey areas were between \$40 and \$65 a week. In three of the remaining areas—Atlanta, Dallas, and Memphis—most women nursing aides earned (exclusive of overtime) between \$30 and \$40 a week, and in one area—San Francisco-Oakland—between \$60 and \$70.

Salaries of Other Hospital Personnel

Outside the nursing field, the professional and technical employees surveyed in hospitals in mid-1960 included medical technologists, X-ray technicians, dietitians, medical social workers, physical therapists, and medical record librarians—in order of their numerical importance. As in 1956–57, women predominated in all these occupations. However, their average salaries were somewhat lower than men's in most cities where both men and women were reported in the same occupation. Between 1956–57 and mid-1960, salaries paid by private hospitals to the survey employees in this group of occupations increased, typically from \$5 to \$20 a week.

In mid-1960, women *medical technologists* received average weekly salaries ranging from \$69 in Philadelphia to \$109 in Los Angeles-Long Beach. Their averages were greater than those for general duty nurses in 11 areas, and less in 4 areas. For women *X-ray technicians*, the average was lowest—\$57 a week—in Memphis, and highest—\$88 a week—in San Francisco-Oakland and Los Angeles-Long Beach. In comparison to general duty nurses, X-ray technicians received more in 2 areas and less in 13 areas.

Among the nonnursing professional workers surveyed, women *medical social workers* received the highest average salaries, ranging from \$93.50 to \$123 a week. Their average weekly salaries exceeded those of women in the following occupations: *medical record librarians* (\$80 to \$112), *physical therapists* (\$77.50 to \$103), and *dietitians* (\$75.50 to \$102.50).

Starting salaries of staff dietitians were also collected in the mid-1960 survey. Less than half of the private hospitals but almost all of the non-Federal Government hospitals reported an established minimum. A majority of the hospitals, both private and Government, paid dietitians minimum rates ranging between \$80 and \$95 a week. Under the salary schedule established by the Classification Act, dietitians in Federal hospitals received a starting salary of \$5,355 a year (\$103 a week), effective July 1960. In the commissioned corps of the U.S. Public Health Service, dietitians received at least \$4,063 a year (\$78 a week).

Hours of Work and Overtime Provisions

Most hospital employees in the 15 survey areas were scheduled to work 40 hours a week in mid-1960, just as they were in 1956-57. However, in a few areas, limited numbers of hospital employees were regularly working more than 40 hours and slightly larger numbers were working fewer than 40 hours. Some registered professional nurses, for example, were scheduled to work a 37.5-hour week in Chicago, New York City, Baltimore, and Cleveland, and a 35-hour week in Philadelphia.

For work beyond their regularly scheduled hours, most hospital employees in the survey areas received some type of compensation. Most often they received straight-time pay for overtime work, but frequently compensatory time off or time and one-half the regular rate of pay.

Late-Shift Work

In the 15 survey areas, about the same percentages of professional nurses were working on late shifts in mid-1960 as in 1956-57—roughly 20 percent on the second (evening) shift and 15 percent on the third (night) shift. At least four-fifths of the nurses working on late shifts were paid shift differentials at private hospitals in all 15 areas and at non-Federal Government hospitals in 9 areas. Only small proportions of nonnursing personnel worked on late shifts and relatively few of these received extra pay.

Shift premiums paid to professional nurses in mid-1960 usually amounted to less than \$10 a week. In some hospitals, the differentials were slightly higher on the second shift than on the third. Generally, the differentials on either shift ranged from \$2.50 to \$10 a week in private hospitals and from less than \$2.50 to \$7.50 a week in non-

Federal Government hospitals. Differentials of \$10 a week or more were paid upon occasion, particularly in private hospitals in Boston, New York City, Cleveland, and Atlanta.

Holidays With Pay

Paid holidays were granted to almost all hospital employees in the 15 areas surveyed in mid-1960. The number ranged from 5 to 11 days a year in private hospitals and from 5 to 13½ days a year in non-Federal Government hospitals.

By city, the *predominant* number of paid holidays for nurses and other workers in private hospitals was: 5—Dallas and Memphis; 6—Chicago, Cincinnati, Cleveland, Los Angeles-Long Beach, and Portland (Oreg.); 7—Minneapolis-St. Paul, Philadelphia, and San Francisco-Oakland; 8—Baltimore; and 10—Boston and New York City. In the remaining areas, the numbers varied between and within various groups of hospital employees. The government hospitals frequently allowed from 1 to 6 more paid holidays than the private hospitals in the same city.

Paid Vacations

In mid-1960 as in 1956-57, virtually all hospital employees were eligible for a paid vacation after their first year of employment. In most instances, the vacation period was 2 weeks. The length of the vacation usually increased with the length of service. Many hospitals granted a third week of paid vacation after 5 to 10 years of service, and some granted 4 weeks or more after 15 to 25 years.

Professional nurses sometimes received slightly more liberal vacation benefits than other hospital employees, particularly in private hospitals. For example, in private hospitals, at least 3 weeks' vacation with pay after 3 years' service was given to a majority of professional nurses in eight areas and of other professional employees in four areas; but in no area did a majority of nonprofessional employees receive this benefit. In non-Federal Government hospitals, at least 4 weeks' vacation with pay after 10 years' service was granted to a majority of professional nurses in four areas, and to other hospital employees in three areas.

In Federal Government hospitals, classified employees are eligible for 13 days of vacation a year during their first 3 years of service, 20 days after 3 years, and 26 days after 15 years. Nurses in Veterans' Administration hospitals and members of the commissioned corps of the U.S. Public Health Service receive 30 calendar days (including nonworkdays) of leave a year.

Perquisites Received

Although some hospital employees were provided rooms, meals, uniforms, or other perquisites in addition to their cash salaries in mid-1960, such benefits were reported less frequently than in 1956-57. The provision of free uniforms and/or laundering service was the most common type of perquisite in mid-1960 and covered a majority of the employees surveyed in most of the 15 areas. In every area, one or more free meals a day was allowed some employees, most frequently the kitchen workers.

Health, Insurance, and Retirement Plans

Almost all hospital employees in the 15 survey areas received some type of sickness, health, or retirement benefit in mid-1960, as in 1956-57. The benefit granted most frequently was sick leave, usually with full pay and without a waiting period. Retirement plans also were widespread. Employees in private hospitals were generally covered by the Federal program of old-age insurance, sometimes in addition to a private pension plan. Most employees of non-Federal Government hospitals could expect to receive a pension after they retired, often in addition to social security benefits.

Other health and insurance plans covering significant percentages of hospital workers in the survey areas provided hospitalization, medical, and surgical benefits. These were financed in whole or in part by the hospitals, either through insurance or other arrangements for medical care. Life insurance, accidental death and dismemberment insurance, and catastrophe (extended medical) insurance protected somewhat smaller proportions of hospital workers.

Employees of Federal Government hospitals were eligible for a specific number of days a year of paid sick leave: 13 working days for classified employees and 15 working days for professional nurses in the Veterans' Administration. In addition, the Federal Government contributed with participating employees to a retirement fund, a life insurance plan, and a program of hospitalization, surgical, and medical care.

Supplementary Table 1

AVERAGE WEEKLY SALARIES¹ FOR SELECTED HOSPITAL OCCUPATIONS IN 15 AREAS, BY HOSPITAL OWNERSHIP, Mid-1960

A. NURSING

Area and hospital ownership	Date of survey	Direc- tors of nursing	Gen- eral duty nurses	Head nurses	Nursing aides		Nurs- ing instruc- tors	Practical nurses		Super- visors
					Women	Men		Women	Men	
Atlanta	June 1960	-----	\$65. 00	\$71. 50	\$33. 00	-----	\$79. 50	\$42. 00	-----	\$80. 50
Private	do	-----	67. 00	74. 50	35. 00	-----	79. 50	-----	-----	82. 50
Government (non-Federal)	do	-----	-----	-----	-----	-----	-----	-----	-----	-----
Baltimore	do	\$131. 50	74. 00	82. 50	46. 50	\$53. 50	92. 00	60. 00	\$65. 00	95. 50
Private	do	125. 00	73. 00	80. 50	37. 50	44. 50	91. 50	53. 00	-----	90. 00
Government (non-Federal)	do	-----	-----	86. 50	58. 50	58. 50	100. 50	65. 50	68. 50	103. 50
Boston	do	135. 00	79. 50	91. 50	55. 00	59. 50	98. 50	68. 50	75. 50	100. 00
Private	do	134. 50	78. 50	89. 50	48. 00	52. 50	98. 00	62. 50	62. 50	97. 00
Government (non-Federal)	do	137. 50	83. 00	95. 50	63. 50	62. 50	101. 50	76. 00	76. 00	108. 00
Buffalo	do	142. 00	80. 50	95. 50	55. 50	68. 50	102. 00	62. 50	-----	106. 50
Private	do	135. 50	78. 00	90. 00	46. 00	52. 50	98. 50	59. 00	-----	97. 50
Government (non-Federal)	do	-----	87. 00	104. 50	69. 00	71. 50	-----	75. 50	-----	125. 50
Chicago	July 1960	140. 00	85. 50	95. 00	54. 00	64. 00	102. 00	66. 50	-----	105. 00
Private	do	136. 00	85. 00	93. 50	50. 00	58. 50	102. 50	63. 00	-----	102. 00
Government (non-Federal)	do	157. 50	88. 00	99. 00	67. 00	68. 50	-----	72. 00	-----	112. 50
Cincinnati	June 1960	118. 00	77. 50	85. 50	45. 00	56. 00	87. 00	61. 50	63. 00	101. 00
Private	do	97. 00	73. 50	82. 00	40. 00	47. 00	85. 50	55. 50	-----	96. 50
Government (non-Federal)	do	-----	83. 50	94. 50	54. 50	60. 00	98. 00	67. 50	-----	106. 00
Cleveland	July 1960	143. 50	82. 00	95. 00	46. 50	53. 50	99. 50	60. 00	-----	104. 50
Private	do	143. 00	82. 00	94. 50	45. 50	54. 50	98. 00	59. 00	-----	104. 00
Government (non-Federal)	do	144. 50	82. 50	96. 00	49. 50	52. 00	-----	62. 50	-----	106. 00
Dallas	June 1960	133. 50	74. 00	83. 00	35. 50	40. 50	89. 50	46. 50	45. 50	92. 00
Private	do	126. 00	74. 00	83. 00	35. 00	41. 50	89. 50	47. 50	-----	92. 50
Government (non-Federal)	do	-----	-----	-----	-----	-----	-----	-----	-----	-----

See footnotes at end of table.

Supplementary Table 1—Continued

AVERAGE WEEKLY SALARIES¹ FOR SELECTED HOSPITAL OCCUPATIONS IN 15 AREAS, BY HOSPITAL OWNERSHIP, MID-1960—Continued

A. NURSING—continued

Area and hospital ownership	Date of survey	Direc- tors of nursing	Gen- eral duty nurses	Head nurses	Nursing aides		Nurs- ing instruc- tors	Practical nurses		Super- visors
					Women	Men		Women	Men	
Los Angeles-Long Beach	August 1960 ..	\$145. 00	\$89. 00	\$105. 00	\$61. 50	\$65. 50	\$116. 50	\$75. 50	\$76. 00	\$116. 00
Private .....	....do.....	137. 50	85. 00	95. 00	57. 00	60. 50	107. 00	65. 50	66. 00	106. 50
Government (non-Federal) ..	....do.....	189. 50	102. 00	124. 50	69. 00	69. 50	-----	80. 50	80. 50	135. 00
Memphis	July 1960	127. 50	68. 50	75. 00	32. 50	36. 00	78. 00	44. 50	-----	83. 00
Private .....	....do.....	-----	68. 00	76. 00	32. 50	-----	-----	45. 00	-----	85. 00
Government (non-Federal) ..	....do.....	-----	-----	73. 50	32. 50	32. 50	-----	-----	-----	-----
Minneapolis-St. Paul .....	....do.....	153. 50	80. 50	95. 00	57. 50	63. 00	103. 00	65. 50	69. 00	108. 50
Private .....	....do.....	148. 50	80. 00	94. 50	55. 50	60. 00	99. 00	63. 00	-----	104. 50
Government (non-Federal) ..	....do.....	164. 00	82. 50	96. 00	62. 00	68. 50	111. 00	70. 00	69. 00	116. 00
New York City .....	....do.....	138. 50	82. 50	94. 00	57. 50	63. 00	100. 00	67. 00	69. 00	109. 00
Private .....	....do.....	135. 00	81. 00	92. 50	46. 50	49. 50	102. 50	61. 00	66. 50	106. 00
Government (non-Federal) ..	....do.....	150. 50	86. 50	97. 00	66. 50	67. 50	97. 50	72. 50	-----	112. 00
Philadelphia .....	....do.....	127. 50	72. 00	82. 50	43. 00	48. 00	93. 50	48. 00	47. 50	93. 00
Private .....	....do.....	125. 00	71. 50	81. 50	37. 50	39. 00	91. 50	45. 00	45. 00	89. 00
Government (non-Federal) ..	....do.....	145. 00	-----	-----	55. 50	55. 50	-----	-----	-----	110. 50
Portland (Oreg.) .....	....do.....	137. 50	79. 50	88. 50	56. 50	60. 50	98. 00	60. 50	-----	103. 00
Private .....	....do.....	137. 50	79. 50	87. 00	56. 00	61. 00	97. 50	59. 50	-----	100. 00
Government (non-Federal) ..	....do.....	-----	81. 00	98. 00	60. 00	-----	-----	63. 00	-----	-----
San Francisco-Oakland	August 1960 ..	158. 50	87. 50	105. 50	67. 00	68. 50	113. 00	72. 50	72. 00	116. 00
Private .....	....do.....	152. 00	83. 50	98. 00	64. 50	65. 50	111. 50	67. 50	61. 50	110. 50
Government (non-Federal) ..	....do.....	172. 50	94. 00	114. 50	70. 00	70. 50	-----	78. 50	78. 50	123. 00

¹ Salaries are for women unless otherwise specified. Salaries are regular straight-time earnings and have been rounded to nearest 50 cents. Dashes within figure columns indicate no data, or data insufficient to show separately.

Supplementary Table 1—Continued

AVERAGE WEEKLY SALARIES¹ FOR SELECTED HOSPITAL OCCUPATIONS IN 15 AREAS, BY HOSPITAL OWNERSHIP, MID-1960—Continued

B. OTHER PROFESSIONAL AND TECHNICAL²

Area and hospital ownership	Dietitians	Medical record librarians	Medical social workers	Medical technologists		Physical therapists		X-ray technicians		X-ray technicians, chief	
				Women	Men	Women	Men	Women	Men	Women	Men
Atlanta.....	\$82. 50	\$92. 50	-----	\$74. 50	\$76. 00	-----	-----	\$63. 00	\$67. 00	-----	-----
Private.....	82. 50	-----	-----	74. 00	-----	-----	-----	62. 50	-----	-----	-----
Government (non-Federal).....	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
Baltimore.....	98. 50	93. 50	\$103. 00	79. 50	83. 00	\$85. 50	-----	71. 50	75. 00	\$86. 50	\$123. 00
Private.....	94. 50	89. 00	97. 00	77. 00	79. 00	84. 00	-----	69. 00	74. 00	86. 50	131. 50
Government (non-Federal).....	109. 00	102. 50	110. 50	84. 50	91. 50	-----	-----	76. 00	79. 00	-----	-----
Boston.....	93. 00	93. 00	93. 50	73. 00	74. 50	77. 50	\$99. 00	72. 00	76. 50	92. 50	108. 00
Private.....	91. 00	92. 50	94. 50	72. 50	72. 50	74. 50	-----	69. 50	74. 50	89. 50	109. 50
Government (non-Federal).....	100. 50	94. 50	89. 50	76. 00	84. 50	82. 50	-----	81. 00	79. 00	-----	-----
Buffalo.....	94. 00	93. 50	104. 00	84. 00	79. 50	86. 50	94. 00	75. 00	83. 00	96. 00	97. 00
Private.....	90. 00	90. 00	101. 50	82. 50	78. 50	81. 50	91. 00	70. 00	75. 00	96. 50	90. 50
Government (non-Federal).....	104. 00	-----	-----	86. 50	-----	-----	-----	-----	90. 50	-----	-----
Chicago.....	98. 00	99. 50	100. 50	87. 00	87. 00	82. 50	99. 00	82. 00	85. 50	101. 50	110. 50
Private.....	98. 00	99. 00	107. 00	86. 50	85. 50	81. 00	98. 50	81. 00	86. 00	103. 50	108. 50
Government (non-Federal).....	98. 00	103. 50	-----	89. 00	89. 00	-----	-----	87. 00	-----	-----	121. 50
Cincinnati.....	100. 00	93. 50	95. 50	81. 50	90. 00	88. 50	-----	70. 50	79. 00	90. 50	-----
Private.....	98. 00	91. 50	87. 50	78. 50	84. 50	92. 50	-----	64. 50	72. 00	90. 50	-----
Government (non-Federal).....	-----	-----	-----	92. 50	-----	83. 00	-----	83. 00	-----	-----	-----
Cleveland.....	92. 50	87. 50	104. 00	77. 50	80. 00	84. 50	-----	70. 50	74. 50	-----	115. 00
Private.....	92. 00	83. 00	106. 50	77. 50	81. 00	84. 50	-----	70. 00	76. 00	-----	115. 50
Government (non-Federal).....	93. 50	96. 00	101. 00	77. 50	-----	84. 50	-----	71. 50	70. 50	-----	-----
Dallas.....	86. 50	84. 50	-----	82. 00	88. 50	81. 50	-----	67. 00	74. 50	-----	-----
Private.....	86. 00	90. 50	-----	83. 50	-----	-----	-----	66. 50	74. 50	-----	-----
Government (non-Federal).....	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

See footnotes at end of table.

Supplementary Table 1—Continued

AVERAGE WEEKLY SALARIES¹ FOR SELECTED HOSPITAL OCCUPATIONS IN 15 AREAS, BY HOSPITAL OWNERSHIP, MID-1960—Continued

B. OTHER PROFESSIONAL AND TECHNICAL²—continued

Area and hospital ownership	Dietitians	Medical record librarians	Medical social workers	Medical technologists		Physical therapists		X-ray technicians		X-ray technicians, chief	
				Women	Men	Women	Men	Women	Men	Women	Men
Los Angeles-Long Beach-----	\$99. 00	\$101. 50	\$122. 00	\$109. 00	\$108. 00	\$103. 00	\$100. 00	\$88. 00	\$90. 50	\$111. 50	\$107. 00
Private-----	97. 00	99. 00	114. 00	104. 50	104. 00	99. 00	91. 00	86. 00	87. 00	-----	106. 00
Government (non-Federal) -	108. 00	-----	125. 00	116. 00	117. 50	110. 00	114. 50	95. 50	94. 50	-----	-----
Memphis-----	75. 50	80. 00	-----	77. 00	74. 50	-----	-----	57. 00	52. 50	-----	-----
Private-----	75. 50	80. 00	-----	76. 50	76. 00	-----	-----	57. 50	-----	-----	-----
Government (non-Federal) -	75. 00	-----	-----	79. 00	-----	-----	-----	-----	-----	-----	-----
Minneapolis-St. Paul-----	95. 50	100. 00	114. 50	98. 50	94. 50	96. 00	119. 50	70. 00	73. 50	88. 50	115. 50
Private-----	92. 50	96. 50	-----	96. 50	94. 50	95. 50	120. 50	66. 00	71. 00	-----	113. 00
Government (non-Federal) -	101. 50	107. 00	114. 50	103. 00	-----	-----	-----	81. 50	-----	-----	-----
New York City-----	86. 50	101. 50	102. 00	80. 00	80. 50	80. 50	86. 00	78. 50	79. 00	99. 50	110. 50
Private-----	89. 50	104. 50	107. 50	79. 00	78. 50	80. 50	89. 00	79. 00	79. 00	99. 50	116. 00
Government (non-Federal) -	83. 00	89. 00	93. 00	89. 00	90. 00	81. 50	84. 00	77. 50	78. 50	-----	96. 00
Philadelphia-----	88. 50	92. 50	93. 50	69. 00	69. 50	85. 50	95. 50	66. 00	66. 50	84. 00	105. 50
Private-----	87. 00	92. 00	89. 00	69. 00	69. 50	85. 50	100. 00	65. 50	68. 50	83. 50	-----
Government (non-Federal) -	98. 50	97. 00	-----	-----	-----	-----	-----	-----	-----	-----	-----
Portland (Oreg.)-----	95. 50	104. 00	-----	86. 50	89. 50	101. 00	-----	81. 50	88. 00	-----	91. 00
Private-----	94. 50	104. 50	-----	87. 00	89. 50	107. 00	-----	82. 50	89. 00	-----	91. 00
Government (non-Federal) -	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
San Francisco-Oakland-----	102. 50	112. 00	123. 00	106. 00	110. 00	98. 50	101. 00	88. 00	91. 00	111. 50	114. 00
Private-----	99. 50	108. 50	110. 00	104. 50	108. 50	95. 50	99. 50	85. 00	89. 50	103. 00	114. 00
Government (non-Federal) -	109. 50	123. 00	130. 00	108. 50	112. 50	104. 50	103. 00	91. 50	92. 00	121. 50	-----

¹ Salaries are for women unless otherwise specified. Salaries are regular straight-time earnings and have been rounded to nearest 50 cents. Dashes within figure columns indicate no data, or data insufficient to show separately.

² The date of survey for each area is the same in part B as in part A of this table.

Supplementary Table 2

COMPARISON OF AVERAGE WEEKLY SALARIES¹ FOR SELECTED HOSPITAL OCCUPATIONS IN PRIVATE HOSPITALS IN 15 AREAS,
1956-57 AND MID-1960

Area	Directors of nursing		General duty nurses		Head nurses		Nursing aides				Nursing instructors	
							Women		Men			
	Mid- 1960	1956- 57	Mid- 1960	1956- 57	Mid- 1960	1956- 57	Mid- 1960	1956- 57	Mid- 1960	1956- 57	Mid- 1960	1956- 57
Atlanta.....			\$67. 00	\$57. 50	\$74. 50	\$69. 00	\$35. 00	\$31. 00				
Baltimore.....	\$125. 00	\$95. 50	73. 00	62. 50	80. 50	65. 00	37. 50	31. 00	\$44. 50	\$35. 00		
Boston.....	134. 50	99. 00	78. 50	60. 50	89. 50	66. 00	48. 00	39. 50	52. 50	45. 00	\$98. 00	\$74. 50
Buffalo.....	135. 50	98. 00	78. 00	60. 00	90. 00	68. 50	46. 00	31. 00	52. 50	41. 00	98. 50	76. 50
Chicago.....	136. 00	115. 50	85. 00	72. 00	93. 50	78. 50	50. 00	42. 50	58. 50	46. 50	102. 50	87. 50
Cincinnati.....			73. 50	63. 00	82. 00	71. 50	40. 00	35. 50	47. 00	42. 50	85. 50	74. 50
Cleveland.....	143. 00	111. 00	82. 00	68. 00	94. 50	80. 00	45. 50	39. 00	54. 50	48. 50	98. 00	84. 00
Dallas.....	126. 00	101. 50	74. 00	65. 00	83. 00	74. 00	35. 00	29. 50	41. 50	38. 00	89. 50	73. 50
Los Angeles-Long Beach.....	137. 50	106. 50	85. 00	71. 00	95. 00	76. 50	57. 00	47. 50	60. 50	51. 50	107. 00	82. 50
Memphis.....			68. 00	57. 50	76. 00	65. 00	32. 50	29. 50				
Minneapolis-St. Paul..	148. 50	120. 50	80. 00	68. 50	94. 50	81. 00	55. 50	52. 00	60. 00	56. 00	99. 00	82. 50
New York City.....	135. 00	112. 50	81. 00	67. 50	92. 50	74. 00	46. 50	35. 00	49. 50	39. 00	102. 50	82. 50
Philadelphia.....	125. 00	111. 00	71. 50	56. 50	81. 50	63. 00	37. 50	27. 50	39. 00	32. 00	91. 50	72. 00
Portland, (Oreg.).....	137. 50	104. 00	79. 50	67. 50	87. 00	73. 50	56. 00	45. 50	61. 00	51. 00		
San Francisco- Oakland.....	152. 00	117. 00	83. 50	72. 00	98. 00	77. 50	64. 50	57. 00	65. 50	62. 00	111. 50	92. 00

See footnote at end of table.

Supplementary Table 2

COMPARISON OF AVERAGE WEEKLY SALARIES ¹ FOR SELECTED HOSPITAL OCCUPATIONS IN PRIVATE HOSPITALS IN 15 AREAS,
1956-57 AND MID-1960

Area	Practical nurses		Supervisors		Dietitians		Medical record librarians		Medical social workers		Physical therapists	
	Mid- 1960	1956- 57	Mid- 1960	1956- 57	Mid- 1960	1956- 57	Mid- 1960	1956- 57	Mid- 1960	1956- 57	Mid- 1960	1956- 57
Atlanta.....	-----	-----	\$82. 50	\$76. 50	\$82. 50	\$66. 50	-----	-----	-----	-----	-----	-----
Baltimore.....	\$53. 00	\$41. 00	90. 00	71. 00	94. 50	71. 50	\$89. 00	\$69. 00	\$97. 00	\$71. 00	\$84. 00	\$63. 50
Boston.....	62. 50	48. 50	97. 00	73. 50	91. 00	69. 50	92. 50	66. 00	94. 50	72. 50	74. 50	61. 50
Buffalo.....	59. 00	45. 50	97. 50	76. 00	90. 00	63. 50	90. 00	74. 00	101. 50	80. 00	81. 50	66. 00
Chicago.....	63. 00	50. 00	102. 00	86. 50	98. 00	85. 00	99. 00	78. 00	107. 00	86. 50	81. 00	75. 50
Cincinnati.....	55. 50	48. 50	96. 50	82. 00	98. 00	75. 00	91. 50	86. 00	-----	-----	92. 50	81. 50
Cleveland.....	59. 00	49. 50	104. 00	84. 50	92. 00	80. 00	83. 00	82. 00	106. 50	83. 50	84. 50	70. 50
Dallas.....	47. 50	40. 50	92. 50	79. 00	86. 00	72. 50	90. 50	82. 50	-----	-----	-----	-----
Los Angeles-Long Beach.....	65. 50	52. 50	106. 50	85. 50	97. 00	76. 00	99. 00	81. 50	114. 00	82. 50	99. 00	80. 00
Memphis.....	45. 00	38. 00	85. 00	74. 50	75. 50	70. 50	-----	-----	-----	-----	-----	-----
Minneapolis-St. Paul..	63. 00	54. 00	104. 50	88. 00	92. 50	80. 00	96. 50	79. 00	-----	-----	95. 50	86. 00
New York City.....	61. 00	51. 50	106. 00	86. 00	89. 50	72. 00	104. 50	83. 50	107. 50	86. 00	80. 50	70. 00
Philadelphia.....	45. 00	35. 50	89. 00	70. 50	87. 00	68. 50	92. 00	68. 00	89. 00	61. 50	85. 50	67. 50
Portland, (Oreg.).....	59. 50	50. 00	100. 00	80. 50	94. 50	77. 50	104. 50	78. 50	-----	-----	107. 00	79. 00
San Francisco- Oakland.....	67. 50	57. 00	110. 50	86. 00	99. 50	79. 00	108. 50	82. 00	110. 00	84. 00	95. 50	78. 00

See footnote at end of table.

Supplementary Table 2

COMPARISON OF AVERAGE WEEKLY SALARIES¹ FOR SELECTED HOSPITAL OCCUPATIONS IN PRIVATE HOSPITALS IN 15 AREAS,
1956-57 AND MID-1960

Area	Medical technologists				X-ray technicians				X-ray technicians, chief			
	Women		Men		Women		Men		Women		Men	
	Mid-1960	1956-57	Mid-1960	1956-57	Mid-1960	1956-57	Mid-1960	1956-57	Mid-1960	1956-57	Mid-1960	1956-57
Atlanta.....	\$74. 00	\$66. 50	-----	-----	\$62. 50	\$56. 50	-----	-----	-----	-----	-----	-----
Baltimore.....	77. 00	64. 50	-----	-----	69. 00	55. 50	\$74. 00	\$54. 50	-----	-----	\$131. 50	\$117. 50
Boston.....	72. 50	57. 50	\$72. 50	\$64. 50	69. 50	57. 50	74. 50	53. 50	\$89. 50	\$75. 50	109. 50	88. 00
Buffalo.....	82. 50	67. 00	78. 50	67. 50	70. 00	62. 50	75. 00	69. 50	-----	-----	-----	-----
Chicago.....	86. 50	70. 50	85. 50	75. 00	81. 00	69. 00	86. 00	72. 50	103. 50	86. 00	108. 50	87. 50
Cincinnati.....	78. 50	69. 50	-----	-----	64. 50	63. 00	-----	-----	-----	-----	-----	-----
Cleveland.....	77. 50	67. 00	81. 00	74. 00	70. 00	61. 00	76. 00	67. 00	-----	-----	115. 50	102. 50
Dallas.....	-----	-----	83. 50	67. 50	66. 50	67. 50	74. 50	62. 50	-----	-----	-----	-----
Los Angeles-Long Beach.....	104. 50	81. 50	104. 00	81. 50	86. 00	73. 50	87. 00	76. 00	-----	-----	106. 00	93. 50
Memphis.....	76. 50	65. 00	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
Minneapolis-St. Paul...	96. 50	77. 50	-----	-----	66. 00	58. 00	71. 00	61. 00	-----	-----	113. 00	95. 00
New York City.....	79. 00	65. 00	78. 50	65. 50	79. 00	66. 00	79. 00	66. 50	99. 50	81. 50	116. 00	102. 50
Philadelphia.....	69. 00	56. 00	69. 50	61. 50	65. 50	56. 00	68. 50	56. 50	83. 50	63. 50	-----	-----
Portland, (Oreg.).....	87. 00	71. 50	89. 50	72. 50	82. 50	74. 50	89. 00	72. 50	-----	-----	-----	-----
San Francisco-Oakland..	104. 50	80. 00	108. 50	81. 50	85. 00	73. 50	89. 50	82. 00	103. 00	88. 00	114. 00	102. 50

¹ Salaries are for women unless otherwise specified. Salaries are regular straight-time earnings and have been rounded to nearest 50 cents. Dashes within figure columns indicate no data, or data insufficient to show separately.

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