



# 2007 Colorado Licensed Practical Nurse Workforce Survey

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*Codebook and Variable Frequencies  
Report – Public Use File*

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## **ACKNOWLEDGMENTS**

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## INTRODUCTION

The Colorado Health Institute (CHI) serves as an independent, nonpartisan source of health information and policy analysis. With funding from The Colorado Trust, CHI is building a comprehensive health professions database for the purpose of informing health workforce policy in Colorado.

A series of profession-specific workforce databases is being constructed to complement existing health professions workforce data. From these data, CHI is developing a set of indicators that will document changes in health care workforce supply and demand as well as practice patterns that exist in Colorado communities over time. A database download function is being developed to enable visitors to the CHI Web site to download health professions data and customize reports by profession and geographic location.

### 2007 COLORADO LPN WORKFORCE SURVEY

#### Methods

The survey was administered in three waves by mail beginning on November 24, 2007. The first wave was a cover letter, survey questionnaire and business reply envelope sent to the 2,500 randomly selected licensed practical nurses (LPNs). The survey forms were mailed to the contact address in each licensee's file at the Colorado Department of Regulatory Agencies (DORA). This address may have been the LPN's home or practice location.

On December 3, 2007, a postcard was mailed either reminding the LPNs to fill out the survey or thanking them if they already sent it back. The third mailing, sent on December 17, 2007, consisted of a cover letter, a second questionnaire and a business reply envelope [See Appendix C for cover letters and postcard].

#### Response rate

CHI received survey responses from 1,002 LPNs, or 42 percent of those who were mailed a survey form. The following table shows the final survey disposition of surveys by response category.

<b>Final Disposition</b>	<b>Number</b>
Surveys mailed out	2,500
Unable to forward/non-responses	107
Eligible sample	2,393
Total returned completed questionnaires	1,002
Return Rate	41.9%

Data from the paper questionnaires returned to CHI were entered into an electronic database (N=958). In addition, 44 forms were electronically submitted to CHI via an online option on the internet. With the paper forms, CHI randomly selected 50 (5%) questionnaires for data entry validation. Data entry was 99+ percent accurate across all survey variables entered. Data verification and cleaning were conducted with a series of quality checks to ensure data completeness and adherence to formatting protocols [See Appendix A for Data Cleaning Business Rules].

#### Sampling methods

The sample was drawn from the 2007 DORA database of LPNs with an active Colorado license and a contact address in Colorado (n=9,719).

The sampling design followed a disproportionate stratified random sampling scheme and included 2,500 LPNs randomly selected from ten strata. The ten sample strata were based on combinations of gender and urban/rural

classifications created from the 2005 Rural Urban Commuting Area (RUCA) codes<sup>1</sup>. Rural males were the smallest subpopulation (N=182), requiring oversampling to ensure enough respondents for statistical tests. Urban females were the largest subpopulation (N=6,837) and were further stratified into the Federal Office of Management and Budget Metropolitan Statistical Areas (MSAs)<sup>2</sup> [See Appendix B for sampling and response summary by strata].

### **Weighting up to the population**

This survey was conducted to yield information about LPNs holding an active license in Colorado with a contact address in Colorado as of November 2007. A survey form was mailed to a stratified random sample of Colorado LPNs with a contact address in Colorado. The data file includes variable counts for valid respondents only (N=1,002). CHI, however, has added weights to the file to account for potential non-response bias.

Because of the Nurse Licensure Compact, however, this number may not be reflective of the Colorado LPN workforce. The Nurse Licensure Compact became effective in Colorado on October 1, 2007, establishing a relationship between participating states in the area of LPN licensure, discipline, and information sharing. The Compact allows a nurse to hold a license in one compact state and practice in all 22 compact states. There is currently not a mechanism in place to collect data on where nurses holding compact licenses work at any given point in time and how many nurses may be working in Colorado via a compact license from another participating state.

Gender and the urban/rural classification were used to calculate the survey weight variable, which takes into account the probability of responding to the survey and non-response bias. The weight variable must be applied to all descriptive and inferential statistics calculated from the LPN survey data in order to correctly apportion the sample population to overall LPN population in Colorado [See Appendix B for weighting procedures].

### **PUBLIC USE DATA FILES**

This codebook specifies the variables contained in the 2008 CHI Colorado Licensed Practical Nurse Workforce Survey public use file (PUF). The file contains 1,002 records, one for each respondent, and includes a weight variable. The PUF contains 117 variables. [See the list of variables on p.13-16 for the variables contained in the PUF].

The PUF is available for anyone to analyze. To minimize any risk of indirect identification and ensure confidentiality of survey respondents, sub-state geographic identifiers such as county, city and ZIP Code, and other sensitive variables such as graduation year, are removed or rolled up into categorical variables. Users of the PUF must fill out a registration form.

All users of the data must include the following citation in any public release of the data or its subsequent analysis: "Source: The 2007 Licensed Practical Nurse Workforce Survey, Colorado Health Institute."

In addition, CHI requests that interested individuals and organizations using the database share their analysis and findings with CHI by contacting Christine Demont-Heinrich at 720.382.7093, or by e-mail at [demont-heinrichc@coloradohealthinstitute.org](mailto:demont-heinrichc@coloradohealthinstitute.org).

### **Technical information**

The PUF is released as SAS, comma-delimited, Excel and SPSS files. In addition, a sampling and response summary by strata is provided in Appendix B.

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<sup>1</sup> Rural-urban commuting area (RUCA) codes are a sub-county measure of urban/rural status based on 2000 Census data and 2004 ZIP Codes; they are more specific than county-based definitions of rural and therefore more accurately classify intra-county rural and urban areas. For more information on RUCA codes, refer to <http://depts.washington.edu/uwruca/index.html>.

**Codebook structure**

The codebook lists variable labels in the order in which they appear on the questionnaire. Each variable includes a name, description and any appropriate technical notes. The last 7 variables in the codebook were created from survey questions and re-coded to protect the confidentiality of survey respondents.

For each variable, an unweighted and weighted frequency is provided. The unweighted sum for each variable totals 1,002, that is, the number of survey respondents. The weighted sum is 9,719, the number of actively licensed practical nurses living or practicing in Colorado [Because of rounding, totals in the weighted frequency tables do not always equal 9,719].

**For more information, contact:**

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**2007 LPN  
WORKFORCE SURVEY**

Survey # \_\_\_\_\_

**To complete form online...**Open your Internet browser and type:  
<http://www.ColoradoHealthInstitute.org/LPN2007.html> → Complete the questionnaire online → Click “submit”  
 button when you are finished.

**THE FIRST SET OF QUESTIONS IS ABOUT YOUR LPN TRAINING PROGRAM**

1. What is the name of the school where you received your LPN diploma?

\_\_\_\_\_

(a) In what state was the training program located? \_\_\_\_\_

(b) How many months were you enrolled in the program? \_\_\_\_ \_

(c) In what year did you complete your LPN training? \_\_\_\_ \_

(d) In what year did you first become licensed to practice as an LPN in Colorado? \_\_\_\_ \_

(e) Where was your classroom instruction held? [MARK ONLY ONE BOX]

☐ Traditional campus

☐ Hospital-based nursing program

☐ On-site program at place of employment other than hospital

☐ Other (Please specify) \_\_\_\_\_

2. Please rate the CLASSROOM INSTRUCTION of the LPN training program in which you were enrolled in the following areas using a scale of 1-5 with 1 representing **Inadequate** and 5 representing **Most Adequate**.

	Inadequate				Most Adequate
(a) Caring for the elderly	1	2	3	4	5
(b) Caring for persons with dementia and other mental impairments	1	2	3	4	5
(c) Caring for persons with physical disabilities	1	2	3	4	5
(d) Caring for persons with behavioral health problems	1	2	3	4	5
(e) Administering medications/treatments	1	2	3	4	5
(f) Providing patient care fundamentals such as bathing, personal care, transferring, catheter care, etc	1	2	3	4	5
(g) Decision-making within the LPN scope of practice	1	2	3	4	5
(h) Developing leadership/management skills	1	2	3	4	5
(i) Using problem-solving skills	1	2	3	4	5
(j) Understanding the LPN role on the care team	1	2	3	4	5

QUESTIONS ASKING ABOUT **RURAL** AND **URBAN** LOCATIONS SHOULD USE THE FOLLOWING DEFINITION OF RURAL: *RURAL REFERS TO A SMALL TOWN, VILLAGE, OUTSIDE A METROPOLITAN AREA OR A SPARSELY POPULATED AREA.*

3. Where did you receive **most** of your CLINICAL TRAINING while in your LPN training program? [MARK ONLY ONE]

- ↑ Urban Hospital
- ↑ Rural Hospital
- ↑ Urban Nursing Home
- ↑ Rural Nursing Home
- ↑ Other (Please specify) \_\_\_\_\_

4. Did you have any health care experience prior to completing your LPN training?

- ↑ Yes → **Go to Question 4a**
- ↑ No → **Go to Question 5**

4a. If yes, what type of position did you hold? [MARK ALL THAT APPLY]

- ↑ Certified Nurse Aide
- ↑ Medical Assistant
- ↑ Unit secretary or other medical clerical position
- ↑ Other (Please specify) \_\_\_\_\_

5. Please rate the CLINICAL INSTRUCTION you received in your LPN training program in the following areas using a scale of 1-5 with 1 representing **Inadequate** and 5 representing **Most Adequate** [THIS QUESTION IS SPECIFIC TO CLINICAL INSTRUCTION AS OPPOSED TO CLASSROOM, Q2]

	Inadequate				Most Adequate
(a) Caring for the elderly	1	2	3	4	5
(b) Caring for persons with dementia and other mental impairments	1	2	3	4	5
(c) Caring for persons with physical disabilities	1	2	3	4	5
(d) Caring for persons with behavioral health problems	1	2	3	4	5
(e) Administering medications/treatments	1	2	3	4	5
(f) Providing patient care fundamentals such as bathing, personal care, transferring, catheter care, etc	1	2	3	4	5
(g) Decision-making within the LPN scope of practice	1	2	3	4	5
(h) Developing leadership/management skills	1	2	3	4	5
(i) Using problem-solving skills	1	2	3	4	5
(j) Understanding the LPN role on the care team	1	2	3	4	5

6. Did you receive instruction in the LPN scope of practice, including the legal and professional issues that are specific to LPN roles?

- ↑ Yes
- ↑ No
- ↑ Don't know/don't remember



7. In what type of facility/clinic/organization did you work when you were first employed after completing your LPN training program? [MARK ONLY ONE]

- ☐ Nursing home
- ☐ Hospital
- ☐ Rehabilitation facility
- ☐ Home health agency
- ☐ Behavioral health facility
- ☐ Public health/Community health
- ☐ Clinic or physician office
- ☐ School-based health center
- ☐ Other (Please specify) \_\_\_\_\_
- ☐ I did not go to work as an LPN after completing the training program → **Go to Question 9**
- ☐ I have never worked as an LPN → **Go to Question 9**

→ **Go to Question 7a**

7a. Was the facility/clinic/organization you first worked at upon completion of your LPN training located in a rural or urban area?

- ☐ Urban
- ☐ Rural

8. In the first LPN position you held after completing your training, how prepared were you to assume your assigned responsibilities? On a scale of 1-5, with 1 representing **Not Prepared** and 5 representing **Fully Prepared**, please rate your preparation for practice as an LPN. [CIRCLE ONE NUMBER]

Not Prepared					Fully Prepared
1	2	3	4	5	

#### THE NEXT SET OF QUESTIONS IS ABOUT CONTINUING EDUCATION OPPORTUNITIES

9. If offered, would you be interested in additional on-the-job training that would result in a certificate of program completion in any of the following specialized clinical areas? [MARK ALL THAT APPLY]

- |  | Yes                      | No                       |
|--|--------------------------|--------------------------|
| (a) Geriatrics   | <input type="checkbox"/> | <input type="checkbox"/> |
| (b) Alzheimer's disease and/or other types of mental disorders | <input type="checkbox"/> | <input type="checkbox"/> |
| (c) Spinal cord injuries                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| (d) Developmental disabilities and other cognitive disorders   | <input type="checkbox"/> | <input type="checkbox"/> |
| (e) Pediatric long-term care                                   | <input type="checkbox"/> | <input type="checkbox"/> |
| (f) Wound care   | <input type="checkbox"/> | <input type="checkbox"/> |
| (g) Other (Please specify) _____                               | <input type="checkbox"/> | <input type="checkbox"/> |

10. Are you currently enrolled in an RN Program?

- ☐ Yes → **Go to Question 14**
- ☐ No

11. Do you currently have any plans to pursue an RN education?

- ☐ Yes
- ☐ No

12. Are you currently enrolled in any educational or certification program?

- ↑ Yes, Type of program \_\_\_\_\_ → **Go to Question 14**  
↑ No

13. There are many reasons why people choose not to continue their professional education. Please rate the importance of the following factors in your decision NOT to pursue additional education/training at this time. Rate the importance of these factors on a scale of 1-5 with 1 representing **Not Important** and 5 representing **Very Important**.

	Not Important				Very Important
(a) I am satisfied with my current work and do not need additional education or training	1	2	3	4	5
(b) I cannot afford the cost of pursuing more education	1	2	3	4	5
(c) I have other time commitments that take priority	1	2	3	4	5
(d) There is no training program close to where I live	1	2	3	4	5
(e) Other (Please specify) _____	1	2	3	4	5

**THE NEXT SET OF QUESTIONS RELATES TO YOUR EMPLOYMENT SINCE COMPLETING YOUR LPN TRAINING PROGRAM**

14. As of July 2007, are you currently employed as an LPN in a clinical position in Colorado?

- ↑ Yes → **Go to Question 17**  
↑ No → **Answer Question 15 and Question 16**

15. If you are not currently employed as an LPN in a clinical position in Colorado, which of the following best describes the primary reason? [MARK ONLY ONE]

- ↑ I do not currently live in Colorado  
↑ I am voluntarily unemployed because of family responsibilities  
↑ I am voluntarily unemployed because I am pursuing other career goals  
↑ I am voluntarily unemployed and not actively looking for any position  
↑ I am working in an administrative or other health care-related non-clinical position using my LPN license  
↑ I am unemployed and actively looking for a clinical LPN position  
↑ I am unemployed but looking for work in a field other than as an LPN  
↑ Other (Please specify) \_\_\_\_\_

16. Listed below are factors that may have contributed to your decision not to work as an LPN in a clinical role in Colorado. On a scale of 1-5, with 1 representing **Not Important** and 5 representing **Very Important**, rate the relative importance of each of these factors.

	Not Important			Very Important	
(a) Workplace safety issues	1	2	3	4	5
(b) Too much stress on the job	1	2	3	4	5
(c) The hours are too long	1	2	3	4	5
(d) The hours are inconvenient	1	2	3	4	5
(e) The wages are insufficient given the workload and responsibility	1	2	3	4	5
(f) Insufficient benefits (e.g., sick leave, health insurance)	1	2	3	4	5
(g) I do not feel respected in the work I do as an LPN	1	2	3	4	5
(h) I do not feel the work is professionally challenging	1	2	3	4	5
(i) I am pursuing more education	1	2	3	4	5
(j) My health does not allow me to work	1	2	3	4	5
(k) I have family responsibilities that interfere with my ability to work as an LPN	1	2	3	4	5
(l) I have retired from the active workforce	1	2	3	4	5
(m) No LPN positions available	1	2	3	4	5
(n) Other (Please specify) _____	1	2	3	4	5

→ After completing this question, please go to Question 29 →

THE TERM **PRIMARY EMPLOYER** IN THE FOLLOWING QUESTIONS REFERS TO THE WORKSITE WHERE YOU SPEND THE MAJORITY OF YOUR TIME. IF YOU SPLIT YOUR TIME EQUALLY BETWEEN WORKSITES, THEN REFER TO YOUR PRIMARY EMPLOYER AS THE ONE YOU CONSIDER THE MOST IMPORTANT IN YOUR CAREER.

17. As of July 2007, were you employed as an LPN by more than one employer in Colorado?

↑ Yes

↑ No → **Go to Question 18**

IF YES, please rate the level of importance of each factor in your decision to have more than one job. Rate on a scale of 1-5, with 1 representing **Not Important** and 5 representing **Very Important**.

	Not Important			Very Important	
(a) I don't earn enough at my primary place of employment	1	2	3	4	5
(b) I don't have enough hours of work at my primary place of employment	1	2	3	4	5
(c) I don't get health insurance at my primary place of employment	1	2	3	4	5
(d) I want more challenges at work	1	2	3	4	5

18. What type of facility or organization is your current primary employer? [MARK ONLY ONE]

- ☐ Nursing home
- ☐ Hospital
- ☐ Rehabilitation facility
- ☐ Home health agency
- ☐ Behavioral health facility
- ☐ Public health/Community health
- ☐ Clinic or physician office
- ☐ School-based health center
- ☐ Other (Please specify) \_\_\_\_\_

18a. Is your primary employer located in a rural or urban area?

- ☐ Urban
- ☐ Rural

19. What is the ZIP Code of your primary place of employment? \_\_\_\_ \_

20. On average, how many hours per week do you work at your primary place of employment? [PLEASE ROUND TO THE NEAREST HOUR] \_\_\_\_ \_ hours

21. The hourly wage I receive at my primary place of employment is:

- ☐ Less than \$10.00/hour
- ☐ Between \$10.01-\$15.00/hour
- ☐ Between \$15.01-\$20.00/hour
- ☐ Between \$20.01-\$25.00/hour
- ☐ More than \$25.00/hour

22. Do you have health insurance coverage through your primary place of employment?

- ☐ Yes → **Go to Question 25**
- ☐ No

23. If you do not have health insurance coverage through your primary place of employment, were you offered coverage but declined it?

- ☐ Yes
- ☐ No → **Go to Question 25**

24. How important were the following reasons in your decision to decline the health insurance coverage your employer offered? On a scale of 1-5, with 1 representing **Not Important** and 5 representing **Very Important**, rate the reasons listed.

	Not Important				Very Important
(a) I have health insurance coverage from my spouse or other family member	1	2	3	4	5
(b) The coverage offered was too expensive	1	2	3	4	5
(c) I do not need health insurance at this time	1	2	3	4	5
(d) Having health insurance coverage is not a high priority for me	1	2	3	4	5
(e) The coverage that was offered did not meet my health care needs	1	2	3	4	5
(f) Other (Please specify) _____	1	2	3	4	5

25. Are you planning to leave your primary place of employment in the next twelve months?

↑ Yes

↑ No → **Go to Question 27**

26. There are many factors that influence a decision to leave a job. Listed below are some of these factors. Please rate the level of importance to you of each. On a scale of 1-5 with 1 representing **Not Important** and 5 representing **Very Important**, please rate the factor.

	Not Important			Very Important	
(a) Workplace safety issues	1	2	3	4	5
(b) Too much stress on the job	1	2	3	4	5
(c) The hours are too long	1	2	3	4	5
(d) The hours are inconvenient	1	2	3	4	5
(e) The wages are insufficient given the workload and responsibility	1	2	3	4	5
(f) Insufficient benefits (e.g., sick leave, health insurance)	1	2	3	4	5
(g) I do not feel respected in the work I do as an LPN	1	2	3	4	5
(h) I do not feel the work is professionally challenging	1	2	3	4	5
(i) I am pursuing more education	1	2	3	4	5
(j) My health does not allow me to work	1	2	3	4	5
(k) I have family responsibilities that interfere with my ability to work as an LPN	1	2	3	4	5
(l) I am retiring from the active workforce	1	2	3	4	5
(m) Other (Please specify) _____	1	2	3	4	5

27. Have you received any of the following work incentives since becoming an LPN at a job where you provided clinical care?

	Received?	
(a) Student loan forgiveness	↑ Y	↑ N
(b) A flexible schedule	↑ Y	↑ N
(c) Signing bonus	↑ Y	↑ N
(d) Tuition reimbursement	↑ Y	↑ N

28. Please rate the level of importance to you of each of the following work incentives.

Rate on a scale of 1-5 with 1 representing **Not Important** and 5 representing **Very Important**.

	Not Important			Very Important	
(a) Student loan forgiveness	1	2	3	4	5
(b) A flexible schedule	1	2	3	4	5
(c) Signing bonus	1	2	3	4	5
(d) Tuition reimbursement	1	2	3	4	5

THE NEXT SET OF QUESTIONS IS ABOUT YOU...

29. Did you grow up in Colorado (or spend most of your childhood here)?

↑ Yes → **Go to Question 30**

↑ No

29a. If NO, in what state or foreign country did you grow up (or spend most of your childhood)?  
\_\_\_\_\_

30. How would you describe the community in which you grew up (or spent most of your childhood)?

↑ Urban

↑ Rural

31. In what year were you born? \_\_\_\_ \_

32. What is your gender?

↑ Female

↑ Male

33. How would you describe your racial/ethnic identification? [MARK ONLY ONE]

↑ American Indian/Alaskan Native

↑ Asian/Pacific Islander

↑ Black, not of Hispanic origin

↑ Hispanic

↑ White, not of Hispanic origin

↑ Multi-racial/multi-ethnic

34. Are you fluent in a language other than English?

↑ Yes

↑ No → **Go to Question 35**

34a. If YES, what language(s)? (Please specify) \_\_\_\_\_

34b. If YES, do you use this language to communicate with the patients/clients you serve?

↑ Yes

↑ No

35. What is the ZIP Code of your home address? \_\_\_\_ \_

The time you have taken to complete this survey is appreciated. The survey responses will be used to help policymakers better understand your profession.

THANK YOU!

The survey is voluntary and information provided is confidential. Please complete the form online, return the questionnaire in the self-addressed, stamped envelope or fax it to 303. 831.4247. Thank you for your assistance in this important survey. If you have any questions, please contact Michael Boyson at 303. 831.4200 x 207 or via e-mail at [boysonm@coloradohealthinstitute.org](mailto:boysonm@coloradohealthinstitute.org).



## LISTING OF VARIABLES

<b>QUESTION NUMBER</b>	<b>VARIABLE NAME</b>	<b>DESCRIPTION</b>
1a	GRAD_STATE_GRP	CO vs. non-CO for location of LPN diploma
1b	TRAIN_MONTHS_GRP	Number of months enrolled in LPN program, grouping
1c	GRAD_YR_GRP	Year graduated with LPN diploma, grouping
1d	LIC_YR_GRP	Year first licensed as LPN in CO, grouping
1e	CLASS_INST_VENUE_GRP	Venue where classroom instruction was held, grouping
2a	CLASS_INST_ADEQ_ELDERLY_GRP	Adequacy of training: caring for the elderly
2b	CLASS_INST_ADEQ_DEMENTIA_GRP	Adequacy of training: caring for persons with dementia and other mental impairments
2c	CLASS_INST_ADEQ_PHYS_DIS_GRP	Adequacy of training: caring for persons with physical disabilities
2d	CLASS_INST_ADEQ_BEHAVIOR_GRP	Adequacy of training: caring for persons with behavioral health problems
2e	CLASS_INST_ADEQ_MEDS_GRP	Adequacy of training: administering medications/treatments
2f	CLASS_INST_ADEQ_FUNDS_GRP	Adequacy of training: providing patient care fundamentals such as bathing, personal care, transferring, catheter care, etc
2g	CLASS_INST_ADEQ_DECISION_GRP	Adequacy of training: decision-making within the LPN scope of practice
2h	CLASS_INST_ADEQ_LEADER_GRP	Adequacy of training: developing leadership/management skills
2i	CLASS_INST_ADEQ_PROBLEM_GRP	Adequacy of training: using problem-solving skills
2j	CLASS_INST_ADEQ_ROLE_GRP	Adequacy of training: understanding the LPN role on the care team
3	CLIN_INST_VENUE	Venue for LPN clinical training
4	PRIOR_EXP	Prior experience in health care
4a	PRIOR_EXP_CNA	Prior experience as Certified Nurse Aide
4a	PRIOR_EXP_MA	Prior experience as Medical Assistant
4a	PRIOR_EXP_CLERICAL	Prior experience as unit secretary/medical clerk
4a	PRIOR_EXP_OTHER	Prior experience as other
5a	CLIN_INST_ADEQ_ELDERLY_GRP	Adequacy of clinical instruction: caring for the elderly
5b	CLIN_INST_ADEQ_DEMENTIA_GRP	Adequacy of clinical instruction: caring for persons with dementia and other mental impairments
5c	CLIN_INST_ADEQ_PHYS_DIS_GRP	Adequacy of clinical instruction: caring for persons with physical disabilities
5d	CLIN_INST_ADEQ_BEHAVIOR_GRP	Adequacy of clinical instruction: caring for persons with behavioral health problems
5e	CLIN_INST_ADEQ_MEDS_GRP	Adequacy of clinical instruction: administering medications/treatments
5f	CLIN_INST_ADEQ_FUNDS_GRP	Adequacy of clinical instruction: providing patient care fundamentals such as bathing, personal care, transferring, catheter care, etc
5g	CLIN_INST_ADEQ_DECISION_GRP	Adequacy of clinical instruction: decision-making within the LPN scope of practice
5h	CLIN_INST_ADEQ_LEADER_GRP	Adequacy of clinical instruction: developing leadership/management skills

<b>QUESTION NUMBER</b>	<b>VARIABLE NAME</b>	<b>DESCRIPTION</b>
5i	CLIN_INST_ADEQ_PROBLEM_GRP	Adequacy of clinical instruction: using problem-solving skills
5j	CLIN_INST_ADEQ_ROLE_GRP	Adequacy of clinical instruction: understanding the LPN role on the care team
6	TRAIN_SCOPE	Received instruction on LPN scope of practice
7	FIRST_FACIL_TYPE_GRP	Type of facility: first employer, grouping
7a	FIRST_FACIL_URBAN_RURAL	Facility, first employer: Urban or Rural
8	PREPARED_GRP	Rate preparedness for first LPN position, grouping
9a	ADDL_TRAIN_GERIATRICS	Interest/additional training: geriatrics
9b	ADDL_TRAIN_ALZHEIMERS	Interest/additional training: Alzheimer's, etc.
9c	ADDL_TRAIN_SPINAL	Interest/additional training: spinal injuries
9d	ADDL_TRAIN_COGNITIVE	Interest/additional training: dev disabilities/cognitive disorders
9e	ADDL_TRAIN_PEDIATRIC	Interest/additional training: pediatric long-term care
9f	ADDL_TRAIN_WOUNDCARE	Interest/additional training: wound care
9g	ADDL_TRAIN_OTHER	Interest/additional training: other
10	RN_PGM_CURRENT	Currently enrolled in an RN Program
11	RN_PGM_PLANS	Plans to pursue an RN education
12	ADDL_TRAIN_CURRENT	Currently enrolled in educational or certification program
13a	RSN_NOEDUC_SATISFIED_GRP	Reason not continuing education: satisfied with current work
13b	RSN_NOEDUC_NOTAFFORD_GRP	Reason not continuing education: cannot afford the cost of pursuing more education
13c	RSN_NOEDUC_TIME_GRP	Reason not continuing education: other time commitments that take priority
13d	RSN_NOEDUC_NOCLOSE_GRP	Reason not continuing education: no training program close to residence
13e	RSN_NOEDUC_OTHER_GRP	Reason not continuing education: other
14	WORK_CURRENT	As of 7/2007, employed as LPN in CO
15	EMPL_STATUS_GRP	Reason not employed as LPN in Colorado, grouping
16a	RSN_NOTWRK_SAFETY_GRP	Reason not working as LPN: workplace safety issues
16b	RSN_NOTWRK_STRESS_GRP	Reason not working as LPN: too much stress on the job
16c	RSN_NOTWRK_LONGHOURS_GRP	Reason not working as LPN: the hours are too long
16d	RSN_NOTWRK_INCONVEN_GRP	Reason not working as LPN: the hours are inconvenient
16e	RSN_NOTWRK_WAGES_GRP	Reason not working as LPN: the wages are insufficient given the workload and responsibility
16f	RSN_NOTWRK_BENEFITS_GRP	Reason not working as LPN: insufficient benefits (e.g. sick leave, health insurance)
16g	RSN_NOTWRK_RESPECT_GRP	Reason not working as LPN: do not feel respected in work as an LPN
16h	RSN_NOTWRK_CHALLENGE_GRP	Reason not working as LPN: do not feel the work is professionally challenging
16i	RSN_NOTWRK_EDUC_GRP	Reason not working as LPN: pursuing more education
16j	RSN_NOTWRK_HEALTH_GRP	Reason not working as LPN: health does not allow me to work



<b>QUESTION NUMBER</b>	<b>VARIABLE NAME</b>	<b>DESCRIPTION</b>
16k	RSN_NOTWRK_FAMILY_GRP	Reason not working as LPN: family responsibilities that interfere with ability to work
16l	RSN_NOTWRK_RETIRED_GRP	Reason not working as LPN: retired from the active workforce
16m	RSN_NOTWRK_NO_POSIT_GRP	Reason not working as LPN: no LPN positions available
16n	RSN_NOTWRK_OTHER_GRP	Reason not working as LPN: other
17	MULTI_EMPLOYER	As of 7/2007, have >1 LPN employer in CO
17a	RSN_MULTI_EMPLOYER_EARN_GRP	Reason multiple employers: do not earn enough at primary place of employment
17b	RSN_MULTI_EMPLOYER_HOURS_GRP	Reason multiple employers: do not have enough hours at primary place of employment
17c	RSN_MULTI_EMPLOYER_INSUR_GRP	Reason multiple employers: do not get health insurance at primary place of employment
17d	RSN_MULTI_EMPLOYER_CHALLENGE_GRP	Reason multiple employers: want more challenges at work
18	PRIMARY_TYPE_GRP	Type of facility: current primary employer, grouping
18a	PRIMARY_URBAN_RURAL	Type of facility: current prim employer
20	HOURS_GRP	Average hours per week worked, grouping
21	WAGE_GRP	Hourly wage rate at primary place of employment, grouping
22	INSURE	Has health insurance through primary place of employment
23	INSURE_DECLINE	Declined health insurance through primary place of employment
24a	RSN_DECLINE_SPOUSE_GRP	Reason declined health insurance: have health insurance coverage from spouse or other family member
24b	RSN_DECLINE_EXPENSIVE_GRP	Reason declined health insurance: the coverage offered was too expensive
24c	RSN_DECLINE_NEED_GRP	Reason declined health insurance: do not need health insurance at this time
24d	RSN_DECLINE_PRIORITY_GRP	Reason declined health insurance: having health insurance is not a high priority
24e	RSN_DECLINE_COVERAGE_GRP	Reason declined health insurance: coverage that was offered did not meet health care needs
25	LEAVE_JOB	Plan to quit within 12 months
26a	RSN_LEAVEJOB_SAFETY_GRP	Reason to quit job: workplace safety issues
26b	RSN_LEAVEJOB_STRESS_GRP	Reason to quit job: too much stress on the job
26c	RSN_LEAVEJOB_LONGHOURS_GRP	Reason to quit job: the hours are too long
26d	RSN_LEAVEJOB_INCONVEN_GRP	Reason to quit job: the hours are inconvenient
26e	RSN_LEAVEJOB_WAGES_GRP	Reason to quit job: the wages are insufficient given the workload and responsibility
26f	RSN_LEAVEJOB_BENEFITS_GRP	Reason to quit job: insufficient benefits (e.g. sick leave, health insurance)
26g	RSN_LEAVEJOB_RESPECT_GRP	Reason to quit job: do not feel respected in work as an LPN
26h	RSN_LEAVEJOB_CHALLENGE_GRP	Reason to quit job: do not feel the work is professionally challenging
26i	RSN_LEAVEJOB_EDUC_GRP	Reason to quit job: pursuing more education

<b><u>QUESTION NUMBER</u></b>	<b><u>VARIABLE NAME</u></b>	<b><u>DESCRIPTION</u></b>
26j	RSN_LEAVEJOB_HEALTH_GRP	Reason to quit job: health does not allow me to work
26k	RSN_LEAVEJOB_FAMILY_GRP	Reason to quit job: family responsibilities that interfere with ability to work
26l	RSN_LEAVEJOB_RETIRED_GRP	Reason to quit job: retiring from the active workforce
27b	INCENT_RCV_FLEXIBLE	Receive incentive: flexible schedule
27c	INCENT_RCV_BONUS	Receive incentive: Signing bonus
27d	INCENT_RCV_TUITION	Receive incentive: tuition reimbursement
28a	INCENT_IMPORT_LOAN_GRP	Incentive importance: student loan forgiveness
28b	INCENT_IMPORT_FLEXIBLE_GRP	Incentive importance: flexible schedule
28c	INCENT_IMPORT_BONUS_GRP	Incentive importance: signing bonus
28d	INCENT_IMPORT_TUITION_GRP	Incentive importance: tuition reimbursement
29	GREWUP_CO	Grew up in CO
30	GREWUP_URBAN_RURAL	Community, grew up
31	BIRTH_YR_GRP	Year of birth, grouping
32	GENDER	Gender
33	RACE_WHITE	Race: White vs. non-white
34	LANG	Fluency, other than English
34b	LANG_USE	Communicate w/ patients in language other than English
CREATED VARIABLE	GRAD_AGE_GRP	Age at graduation with LPN diploma, grouping
CREATED VARIABLE	GRAD_NUMYRS_GRP	Number of years since graduated with LPN diploma, grouping
CREATED VARIABLE	PRIMARY_RUCA2_FROM_ZIP_GRP	RUCA classification based on ZIP Code
CREATED VARIABLE	PRIMARY_URBAN_FROM_ZIP	Urban/Not-urban: primary place of employment (derived from ZIP Code)
CREATED VARIABLE	AGE_GRP	Age, grouping
CREATED VARIABLE	HOME_RUCA2_FROM_ZIP_GRP	RUCA classification based on ZIP Code
CREATED VARIABLE	HOME_URBAN_FROM_ZIP	Urban/Not-urban: home address (derived from ZIP Code)
CREATED VARIABLE	ID	Identification number

## CODEBOOK AND FREQUENCIES

**QUESTION  
NUMBER**  
1a

**VARIABLE NAME**  
GRAD\_STATE\_GRP

**DESCRIPTION**  
CO vs. non-CO for location of LPN diploma

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	8	71
-8	Not applicable	2	41
0	Non-Colorado	365	3620
1	Colorado	627	5986
TOTAL		1002	9718

**QUESTION  
NUMBER**  
1b

**VARIABLE NAME**  
TRAIN\_MONTHS\_GRP

**DESCRIPTION**  
Number of months enrolled in LPN program, grouping

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Ordinal

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	69	569
1	1-9 months	99	698
2	10-11 months	162	1654
3	12 months	415	4199
4	13-18 months	175	1756
5	19 months or more	82	842
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

1c

**VARIABLE NAME**

GRAD\_YR\_GRP

**DESCRIPTION**

Year graduated with LPN diploma, grouping

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Ordinal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	26	189
-8	Not applicable	3	46
1	1972 or before	160	1749
2	1973-1983	225	2068
3	1984-1995	194	1809
4	1996-2004	201	1994
5	2005 or after	193	1863
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

1d

**VARIABLE NAME**

LIC\_YR\_GRP

**DESCRIPTION**

Year first licensed as LPN in CO, grouping

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Ordinal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	28	344
-8	Not applicable	3	46
1	1977 or before	185	1937
2	1978-1990	208	1913
3	1991-1999	194	1832
4	2000-2004	151	1414
5	2005 or after	233	2233
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

1e

**VARIABLE NAME**

CLASS\_INST\_VENUE\_GRP

**DESCRIPTION**

Venue where classroom instruction was held, grouping

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	7	58
-8	Not applicable	17	228
1	Traditional campus	684	6235
2	Hospital-based nursing program	163	1810
3	Other	131	1388
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

2a

**VARIABLE NAME**

CLASS\_INST\_ADEQ\_ELDERLY\_GRP

**DESCRIPTION**

Adequacy of training: caring for the elderly

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	17	143
0	Inadequate (1,2,3)	302	2763
1	Adequate (4,5)	683	6813
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

2b

**VARIABLE NAME**

CLASS\_INST\_ADEQ\_DEMENTIA\_GRP

**DESCRIPTION**

Adequacy of training: caring for persons with dementia and other mental impairments

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	18	146
-8	Not applicable	1	17
0	Inadequate (1,2,3)	499	4659
1	Adequate (4,5)	484	4896
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

2c

**VARIABLE NAME**

CLASS\_INST\_ADEQ\_PHYS\_DIS\_GRP

**DESCRIPTION**

Adequacy of training: caring for persons with physical disabilities

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	14	130
-8	Not applicable	1	10
0	Inadequate (1,2,3)	440	4092
1	Adequate (4,5)	547	5488
TOTAL		1002	9720

---

---

**QUESTION  
NUMBER**

2d

**VARIABLE NAME**

CLASS\_INST\_ADEQ\_BEHAVIOR\_GRP

**DESCRIPTION**

Adequacy of training: caring for persons with behavioral health problems

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**

Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	20	210
-8	Not applicable	1	3
0	Inadequate (1,2,3)	611	5708
1	Adequate (4,5)	370	3797
TOTAL		1002	9718

---

---

**QUESTION  
NUMBER**

2e

**VARIABLE NAME**

CLASS\_INST\_ADEQ\_MEDS\_GRP

**DESCRIPTION**

Adequacy of training: administering medications/treatments

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**

Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	18	145
0	Inadequate (1,2,3)	112	1153
1	Adequate (4,5)	872	8421
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

2f

**VARIABLE NAME**

CLASS\_INST\_ADEQ\_FUNDS\_GRP

**DESCRIPTION**

Adequacy of training: providing patient care fundamentals such as bathing, personal care, transferring, catheter care, etc

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	12	81
0	Inadequate (1,2,3)	90	841
1	Adequate (4,5)	900	8796
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

2g

**VARIABLE NAME**

CLASS\_INST\_ADEQ\_DECISION\_GRP

**DESCRIPTION**

Adequacy of training: decision-making within the LPN scope of practice

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	14	144
-8	Not applicable	1	31
0	Inadequate (1,2,3)	221	2234
1	Adequate (4,5)	766	7310
TOTAL		1002	9719



---

**QUESTION  
NUMBER**

2h

**VARIABLE NAME**

CLASS\_INST\_ADEQ\_LEADER\_GRP

**DESCRIPTION**

Adequacy of training: developing leadership/management skills

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	17	142
0	Inadequate (1,2,3)	411	4056
1	Adequate (4,5)	574	5521
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

2i

**VARIABLE NAME**

CLASS\_INST\_ADEQ\_PROBLEM\_GRP

**DESCRIPTION**

Adequacy of training: using problem-solving skills

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	17	141
0	Inadequate (1,2,3)	276	2835
1	Adequate (4,5)	709	6743
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

2j

**VARIABLE NAME**

CLASS\_INST\_ADEQ\_ROLE\_GRP

**DESCRIPTION**

Adequacy of training: understanding the LPN role on the care team

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	14	116
0	Inadequate (1,2,3)	216	2124
1	Adequate (4,5)	772	7479
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

3

**VARIABLE NAME**

CLIN\_INST\_VENUE

**DESCRIPTION**

Venue for LPN clinical training

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	14	149
-8	Not applicable	92	969
1	Urban Hospital	503	4512
2	Rural Hospital	231	2208
3	Urban Nursing Home	68	850
4	Rural Nursing Home	54	548
5	Other	40	484
TOTAL		1002	9720

---

---

**QUESTION  
NUMBER**

4

**VARIABLE NAME**  
PRIOR\_EXP

**DESCRIPTION**

Prior experience in health care

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	17	168
-8	Not applicable	1	5
0	No	358	3872
1	Yes	626	5674
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**

4a

**VARIABLE NAME**  
PRIOR\_EXP\_CNA

**DESCRIPTION**

Prior experience as Certified Nurse Aide

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

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---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	222	1991
-8	Not applicable	358	3872
1	Yes	422	3856
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

4a

**VARIABLE NAME**

PRIOR\_EXP\_MA

**DESCRIPTION**

Prior experience as Medical Assistant

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	575	5226
-8	Not applicable	358	3872
1	Yes	69	621
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

4a

**VARIABLE NAME**

PRIOR\_EXP\_CLERICAL

**DESCRIPTION**

Prior experience as unit secretary/medical clerk

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	563	5135
-8	Not applicable	358	3872
1	Yes	81	712
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**

4a

**VARIABLE NAME**  
PRIOR\_EXP\_OTHER

**DESCRIPTION**

Prior experience as other

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	433	4066
-8	Not applicable	358	3872
1	Yes	211	1781
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**

5a

**VARIABLE NAME**  
CLIN\_INST\_ADEQ\_ELDERLY\_GRP

**DESCRIPTION**

Adequacy of clinical instruction: caring for the elderly

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	33	345
-8	Not applicable	2	9
0	Inadequate (1,2,3)	272	2362
1	Adequate (4,5)	695	7003
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

5b

**VARIABLE NAME**

CLIN\_INST\_ADEQ\_DEMENTIA\_GRP

**DESCRIPTION**

Adequacy of clinical instruction: caring for persons with dementia and other mental impairments

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	33	324
-8	Not applicable	2	7
0	Inadequate (1,2,3)	462	4267
1	Adequate (4,5)	505	5120
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

5c

**VARIABLE NAME**

CLIN\_INST\_ADEQ\_PHYS\_DIS\_GRP

**DESCRIPTION**

Adequacy of clinical instruction: caring for persons with physical disabilities

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	28	248
-8	Not applicable	2	15
0	Inadequate (1,2,3)	422	3879
1	Adequate (4,5)	550	5577
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

5d

**VARIABLE NAME**

CLIN\_INST\_ADEQ\_BEHAVIOR\_GRP

**DESCRIPTION**

Adequacy of clinical instruction: caring for persons with behavioral health problems

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	32	299
-8	Not applicable	4	45
0	Inadequate (1,2,3)	570	5383
1	Adequate (4,5)	396	3992
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

5e

**VARIABLE NAME**

CLIN\_INST\_ADEQ\_MEDS\_GRP

**DESCRIPTION**

Adequacy of clinical instruction: administering medications/treatments

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	27	258
-8	Not applicable	2	8
0	Inadequate (1,2,3)	113	1130
1	Adequate (4,5)	860	8322
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

5f

**VARIABLE NAME**

CLIN\_INST\_ADEQ\_FUNDS\_GRP

**DESCRIPTION**

Adequacy of clinical instruction: providing patient care fundamentals such as bathing, personal care, transferring, catheter care, etc

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	29	253
-8	Not applicable	3	18
0	Inadequate (1,2,3)	97	880
1	Adequate (4,5)	873	8567
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

5g

**VARIABLE NAME**

CLIN\_INST\_ADEQ\_DECISION\_GRP

**DESCRIPTION**

Adequacy of clinical instruction: decision-making within the LPN scope of practice

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	31	314
-8	Not applicable	2	8
0	Inadequate (1,2,3)	279	2754
1	Adequate (4,5)	690	6642
TOTAL		1002	9718



---

**QUESTION  
NUMBER**

5h

**VARIABLE NAME**

CLIN\_INST\_ADEQ\_LEADER\_GRP

**DESCRIPTION**

Adequacy of clinical instruction: developing leadership/management skills

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	32	275
-8	Not applicable	2	14
0	Inadequate (1,2,3)	415	4063
1	Adequate (4,5)	553	5368
TOTAL		1002	9720

---

**QUESTION  
NUMBER**

5i

**VARIABLE NAME**

CLIN\_INST\_ADEQ\_PROBLEM\_GRP

**DESCRIPTION**

Adequacy of clinical instruction: using problem-solving skills

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	31	278
-8	Not applicable	3	31
0	Inadequate (1,2,3)	265	2733
1	Adequate (4,5)	703	6677
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

5j

**VARIABLE NAME**

CLIN\_INST\_ADEQ\_ROLE\_GRP

**DESCRIPTION**

Adequacy of clinical instruction: understanding the LPN role on the care team

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	33	280
-8	Not applicable	1	5
0	Inadequate (1,2,3)	232	2269
1	Adequate (4,5)	736	7165
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

6

**VARIABLE NAME**

TRAIN\_SCOPE

**DESCRIPTION**

Received instruction on LPN scope of practice

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	54	584
-8	Not applicable	2	9
0	No	35	315
1	Yes	780	7466
2	Don't know/don't remember	131	1344
TOTAL		1002	9718

---

---

**QUESTION  
NUMBER**

**VARIABLE NAME**  
FIRST\_FACIL\_TYPE\_GRP

**DESCRIPTION**  
Type of facility: first employer, grouping

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	9	153
-8	Not applicable	30	320
1	Nursing home	332	3224
2	Hospital	419	3987
3	Home health agency	23	204
4	Clinic or physician office	71	686
5	Other	118	1144
TOTAL		1002	9718

---

---

**QUESTION  
NUMBER**

**VARIABLE NAME**  
FIRST\_FACIL\_URBAN\_RURAL

**DESCRIPTION**  
Facility, first employer: Urban or Rural

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	18	192
-8	Not applicable	26	198
1	Urban	639	6333
2	Rural	319	2996
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
8

**VARIABLE NAME**  
PREPARED\_GRP

**DESCRIPTION**  
Rate preparedness for first LPN position, grouping

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	13	152
-8	Not applicable	29	224
0	Not prepared (1,2,3)	265	2664
1	Prepared (4,5)	695	6679
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
9a

**VARIABLE NAME**  
ADDL\_TRAIN\_GERIATRICS

**DESCRIPTION**  
Interest/additional training: geriatrics

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	210	2233
0	No	329	3052
1	Yes	463	4434
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
9b

**VARIABLE NAME**  
ADDL\_TRAIN\_ALZHEIMERS

**DESCRIPTION**  
Interest/additional training: Alzheimer's, etc.

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	203	2139
0	No	300	2952
1	Yes	499	4628
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
9c

**VARIABLE NAME**  
ADDL\_TRAIN\_SPINAL

**DESCRIPTION**  
Interest/additional training: spinal injuries

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

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---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	276	2750
0	No	341	3366
1	Yes	385	3603
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

9d

**VARIABLE NAME**

ADDL\_TRAIN\_COGNITIVE

**DESCRIPTION**

Interest/additional training: dev disabilities/cognitive disorders

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	255	2505
-8	Not applicable	1	3
0	No	335	3383
1	Yes	411	3828
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

9e

**VARIABLE NAME**

ADDL\_TRAIN\_PEDIATRIC

**DESCRIPTION**

Interest/additional training: pediatric long-term care

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	310	3157
0	No	388	3698
1	Yes	304	2864
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
9f

**VARIABLE NAME**  
ADDL\_TRAIN\_WOUNDCARE

**DESCRIPTION**  
Interest/additional training: wound care

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	150	1522
0	No	237	2373
1	Yes	615	5825
TOTAL		1002	9720

---

**QUESTION  
NUMBER**  
9g

**VARIABLE NAME**  
ADDL\_TRAIN\_OTHER

**DESCRIPTION**  
Interest/additional training: other

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	650	6409
0	No	152	1593
1	Yes	200	1717
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
10

**VARIABLE NAME**  
RN\_PGM\_CURRENT

**DESCRIPTION**  
Currently enrolled in an RN Program

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	20	257
0	No	829	8145
1	Yes	153	1317
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
11

**VARIABLE NAME**  
RN\_PGM\_PLANS

**DESCRIPTION**  
Plans to pursue an RN education

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	77	803
-8	Not applicable	156	1343
0	No	539	5207
1	Yes	230	2366
TOTAL		1002	9719



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---

<b>QUESTION NUMBER</b>	<b>VARIABLE NAME</b>	<b>DESCRIPTION</b>
12	ADDL_TRAIN_CURRENT	Currently enrolled in educational or certification program
	<b>TYPE</b> Numeric	<b>LENGTH</b> 8
		<b>FORMAT</b> Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	57	679
-8	Not applicable	154	1348
0	No	747	7270
1	Yes	44	421
TOTAL		1002	9718

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<b>QUESTION NUMBER</b>	<b>VARIABLE NAME</b>	<b>DESCRIPTION</b>
13a	RSN_NOEDUC_SATISFIED_GRP	Reason not continuing education: satisfied with current work
	<b>TYPE</b> Numeric	<b>LENGTH</b> 8
		<b>FORMAT</b> Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	195	2135
-8	Not applicable	197	1738
0	Not Important (1,2,3)	338	3239
1	Important (4,5)	272	2607
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

13b

**VARIABLE NAME**

RSN\_NOEDUC\_NOTAFFORD\_GRP

**DESCRIPTION**

Reason not continuing education: cannot afford the cost of pursuing more education

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	183	1881
-8	Not applicable	200	1782
0	Not Important (1,2,3)	232	2236
1	Important (4,5)	387	3820
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

13c

**VARIABLE NAME**

RSN\_NOEDUC\_TIME\_GRP

**DESCRIPTION**

Reason not continuing education: other time commitments that take priority

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	188	1947
-8	Not applicable	197	1738
0	Not Important (1,2,3)	261	2536
1	Important (4,5)	356	3498
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

13d

**VARIABLE NAME**

RSN\_NOEDUC\_NOCLOSE\_GRP

**DESCRIPTION**

Reason not continuing education: no training program close to residence

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	225	2273
-8	Not applicable	198	1748
0	Not Important (1,2,3)	470	4506
1	Important (4,5)	109	1192
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

13e

**VARIABLE NAME**

RSN\_NOEDUC\_OTHER\_GRP

**DESCRIPTION**

Reason not continuing education: other

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	654	6524
-8	Not applicable	197	1738
0	Not Important (1,2,3)	23	245
1	Important (4,5)	128	1212
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
14

**VARIABLE NAME**  
WORK\_CURRENT

**DESCRIPTION**  
As of 7/2007, employed as LPN in CO

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	37	447
-8	Not applicable	4	54
0	No	297	2829
1	Yes	664	6390
TOTAL		1002	9720

---

**QUESTION  
NUMBER**  
15

**VARIABLE NAME**  
EMPL\_STATUS\_GRP

**DESCRIPTION**  
Reason not employed as LPN in Colorado, grouping

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	40	445
-8	Not applicable	671	6418
1	Voluntarily unemployed because of family responsibilities	29	230
2	Voluntarily unemployed and not actively looking for any position	32	331
3	Working in an administrative or other health care-related non-clinical position using LPN license	53	669
4	Other	177	1625
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

16a

**VARIABLE NAME**

RSN\_NOTWRK\_SAFETY\_GRP

**DESCRIPTION**

Reason not working as LPN: workplace safety issues

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	108	1123
-8	Not applicable	665	6393
0	Not Important (1,2,3)	144	1383
1	Important (4,5)	85	819
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

16b

**VARIABLE NAME**

RSN\_NOTWRK\_STRESS\_GRP

**DESCRIPTION**

Reason not working as LPN: too much stress on the job

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	102	1099
-8	Not applicable	664	6390
0	Not Important (1,2,3)	112	979
1	Important (4,5)	124	1251
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

16c

**VARIABLE NAME**

RSN\_NOTWRK\_LONGHOURS\_GRP

**DESCRIPTION**

Reason not working as LPN: the hours are too long

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	100	1023
-8	Not applicable	665	6393
0	Not Important (1,2,3)	148	1368
1	Important (4,5)	89	935
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

16d

**VARIABLE NAME**

RSN\_NOTWRK\_INCONVEN\_GRP

**DESCRIPTION**

Reason not working as LPN: the hours are inconvenient

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	110	1128
-8	Not applicable	666	6411
0	Not Important (1,2,3)	151	1427
1	Important (4,5)	75	753
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

16e

**VARIABLE NAME**

RSN\_NOTWRK\_WAGES\_GRP

**DESCRIPTION**

Reason not working as LPN: the wages are insufficient given the workload and responsibility

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	98	1029
-8	Not applicable	665	6393
0	Not Important (1,2,3)	90	945
1	Important (4,5)	149	1352
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

16f

**VARIABLE NAME**

RSN\_NOTWRK\_BENEFITS\_GRP

**DESCRIPTION**

Reason not working as LPN: insufficient benefits (e.g. sick leave, health insurance)

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	106	1096
-8	Not applicable	665	6393
0	Not Important (1,2,3)	125	1215
1	Important (4,5)	106	1015
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

16g

**VARIABLE NAME**

RSN\_NOTWRK\_RESPECT\_GRP

**DESCRIPTION**

Reason not working as LPN: do not feel respected in work as an LPN

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	104	1028
-8	Not applicable	665	6407
0	Not Important (1,2,3)	122	1044
1	Important (4,5)	111	1240
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

16h

**VARIABLE NAME**

RSN\_NOTWRK\_CHALLENGE\_GRP

**DESCRIPTION**

Reason not working as LPN: do not feel the work is professionally challenging

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	111	1097
-8	Not applicable	664	6390
0	Not Important (1,2,3)	174	1670
1	Important (4,5)	53	562
TOTAL		1002	9719



---

**QUESTION  
NUMBER**

16i

**VARIABLE NAME**

RSN\_NOTWRK\_EDUC\_GRP

**DESCRIPTION**

Reason not working as LPN: pursuing more education

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	112	1139
-8	Not applicable	664	6390
0	Not Important (1,2,3)	155	1643
1	Important (4,5)	71	547
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

16j

**VARIABLE NAME**

RSN\_NOTWRK\_HEALTH\_GRP

**DESCRIPTION**

Reason not working as LPN: health does not allow me to work

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	111	1165
-8	Not applicable	665	6393
0	Not Important (1,2,3)	181	1674
1	Important (4,5)	45	486
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

16k

**VARIABLE NAME**

RSN\_NOTWRK\_FAMILY\_GRP

**DESCRIPTION**

Reason not working as LPN: family responsibilities that interfere with ability to work

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	106	1077
-8	Not applicable	665	6393
0	Not Important (1,2,3)	186	1695
1	Important (4,5)	45	554
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

16l

**VARIABLE NAME**

RSN\_NOTWRK\_RETIRED\_GRP

**DESCRIPTION**

Reason not working as LPN: retired from the active workforce

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	102	1101
-8	Not applicable	664	6390
0	Not Important (1,2,3)	179	1647
1	Important (4,5)	57	581
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

16m

**VARIABLE NAME**

RSN\_NOTWRK\_NO\_POSIT\_GRP

**DESCRIPTION**

Reason not working as LPN: no LPN positions available

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	117	1195
-8	Not applicable	664	6390
0	Not Important (1,2,3)	173	1564
1	Important (4,5)	48	571
TOTAL		1002	9720

---

**QUESTION  
NUMBER**

16n

**VARIABLE NAME**

RSN\_NOTWRK\_OTHER\_GRP

**DESCRIPTION**

Reason not working as LPN: other

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	266	2683
-8	Not applicable	665	6407
0	Not Important (1,2,3)	22	132
1	Important (4,5)	49	497
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
17

**VARIABLE NAME**  
MULTI\_EMPLOYER

**DESCRIPTION**  
As of 7/2007, have >1 LPN employer in CO

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	20	206
-8	Not applicable	298	2833
0	No	563	5655
1	Yes	121	1025
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
17a

**VARIABLE NAME**  
RSN\_MULTI\_EMPLOYER\_EARN\_GRP

**DESCRIPTION**  
Reason multiple employers: do not earn enough at primary place of  
employment

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	31	285
-8	Not applicable	860	8484
0	Not Important (1,2,3)	35	334
1	Important (4,5)	76	615
TOTAL		1002	9718

---

**QUESTION  
NUMBER****VARIABLE NAME****DESCRIPTION**

17b

RSN\_MULTI\_EMPLOYER\_HOURS\_GRP

Reason multiple employers: do not have enough hours at primary place of employment

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	33	311
-8	Not applicable	860	8484
0	Not Important (1,2,3)	71	615
1	Important (4,5)	38	309
TOTAL		1002	9719

---

**QUESTION  
NUMBER****VARIABLE NAME****DESCRIPTION**

17c

RSN\_MULTI\_EMPLOYER\_INSUR\_GRP

Reason multiple employers: do not get health insurance at primary place of employment

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	33	297
-8	Not applicable	860	8484
0	Not Important (1,2,3)	77	628
1	Important (4,5)	32	310
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**

**VARIABLE NAME**

**DESCRIPTION**

17d

RSN\_MULTI\_EMPLOYER\_CHALLENGE\_GRP

Reason multiple employers: want more challenges at work

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**

Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	31	302
-8	Not applicable	861	8491
0	Not Important (1,2,3)	50	464
1	Important (4,5)	60	461
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

**VARIABLE NAME**  
PRIMARY\_TYPE\_GRP

**DESCRIPTION**

Type of facility: current primary employer, grouping

18

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**

Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	46	517
-8	Not applicable	318	3063
1	Nursing home	228	2191
2	Hospital	103	952
3	Home health agency	41	315
4	Clinic or physician office	125	1041
5	Other	141	1639
TOTAL		1002	9718

---

---

**QUESTION  
NUMBER**

18a

**VARIABLE NAME**

PRIMARY\_URBAN\_RURAL

**DESCRIPTION**

Type of facility: current prim employer

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**

Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	25	328
-8	Not applicable	303	2883
1	Urban	508	5047
2	Rural	166	1460
TOTAL		1002	9718

---

---

**QUESTION  
NUMBER**

20

**VARIABLE NAME**

HOURS\_GRP

**DESCRIPTION**

Average hours per week worked, grouping

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**

Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	44	540
-8	Not applicable	297	2829
1	0-24 hours	116	918
2	25-32 hours	71	802
3	33-40 hours	361	3374
4	41-48 hours	63	663
5	49-80 hours	50	592
TOTAL		1002	9718

---

<b>QUESTION NUMBER</b>	<b>VARIABLE NAME</b>	<b>DESCRIPTION</b>
21	WAGE_GRP	Hourly wage rate at primary place of employment, grouping

<b>TYPE</b>	<b>LENGTH</b>	<b>FORMAT</b>
Numeric	8	Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	26	409
-8	Not applicable	299	2854
1	\$15.00/hour or less	54	466
2	Between \$15.01 - \$20.00/hour	333	2871
3	Between \$20.01 - \$25.00/hour	244	2605
4	More than \$25.00/hour	46	514
TOTAL		1002	9719

---

<b>QUESTION NUMBER</b>	<b>VARIABLE NAME</b>	<b>DESCRIPTION</b>
22	INSURE	Has health insurance through primary place of employment

<b>TYPE</b>	<b>LENGTH</b>	<b>FORMAT</b>
Numeric	8	Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	24	293
-8	Not applicable	298	2842
0	No	278	2685
1	Yes	402	3899
TOTAL		1002	9719



---

<b>QUESTION NUMBER</b>	<b>VARIABLE NAME</b>	<b>DESCRIPTION</b>
23	INSURE_DECLINE	Declined health insurance through primary place of employment

<b>TYPE</b>	<b>LENGTH</b>	<b>FORMAT</b>
Numeric	8	Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	31	366
-8	Not applicable	699	6729
0	No	90	855
1	Yes	182	1770
TOTAL		1002	9720

---

<b>QUESTION NUMBER</b>	<b>VARIABLE NAME</b>	<b>DESCRIPTION</b>
24a	RSN_DECLINE_SPOUSE_GRP	Reason declined health insurance: have health insurance coverage from spouse or other family member

<b>TYPE</b>	<b>LENGTH</b>	<b>FORMAT</b>
Numeric	8	Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	48	512
-8	Not applicable	789	7583
0	Not Important (1,2,3)	46	545
1	Important (4,5)	119	1079
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

24b

**VARIABLE NAME**

RSN\_DECLINE\_EXPENSIVE\_GRP

**DESCRIPTION**

Reason declined health insurance: the coverage offered was too expensive

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	58	633
-8	Not applicable	790	7601
0	Not Important (1,2,3)	58	564
1	Important (4,5)	96	921
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

24c

**VARIABLE NAME**

RSN\_DECLINE\_NEED\_GRP

**DESCRIPTION**

Reason declined health insurance: do not need health insurance at this time

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	71	762
-8	Not applicable	790	7586
0	Not Important (1,2,3)	102	1025
1	Important (4,5)	39	346
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

24d

**VARIABLE NAME**

RSN\_DECLINE\_PRIORITY\_GRP

**DESCRIPTION**

Reason declined health insurance: having health insurance is not a high priority

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	70	723
-8	Not applicable	789	7583
0	Not Important (1,2,3)	97	970
1	Important (4,5)	46	442
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

24e

**VARIABLE NAME**

RSN\_DECLINE\_COVERAGE\_GRP

**DESCRIPTION**

Reason declined health insurance: coverage that was offered did not meet health care needs

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	72	730
-8	Not applicable	789	7583
0	Not Important (1,2,3)	102	1000
1	Important (4,5)	39	405
TOTAL		1002	9718

---

---

**QUESTION  
NUMBER**  
25

**VARIABLE NAME**  
LEAVE\_JOB

**DESCRIPTION**  
Plan to quit within 12 months

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	35	387
-8	Not applicable	301	2853
0	No	507	4961
1	Yes	159	1518
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
26a

**VARIABLE NAME**  
RSN\_LEAVEJOB\_SAFETY\_GRP

**DESCRIPTION**  
Reason to quit job: workplace safety issues

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	50	524
-8	Not applicable	805	7794
0	Not Important (1,2,3)	73	755
1	Important (4,5)	74	646
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

26b

**VARIABLE NAME**

RSN\_LEAVEJOB\_STRESS\_GRP

**DESCRIPTION**

Reason to quit job: too much stress on the job

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	47	499
-8	Not applicable	805	7793
0	Not Important (1,2,3)	48	454
1	Important (4,5)	102	972
TOTAL		1002	9718

---

**QUESTION  
NUMBER**

26c

**VARIABLE NAME**

RSN\_LEAVEJOB\_LONGHOURS\_GRP

**DESCRIPTION**

Reason to quit job: the hours are too long

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	49	545
-8	Not applicable	804	7790
0	Not Important (1,2,3)	104	946
1	Important (4,5)	45	438
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

26d

**VARIABLE NAME**

RSN\_LEAVEJOB\_INCONVEN\_GRP

**DESCRIPTION**

Reason to quit job: the hours are inconvenient

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	55	548
-8	Not applicable	804	7790
0	Not Important (1,2,3)	99	900
1	Important (4,5)	44	481
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

26e

**VARIABLE NAME**

RSN\_LEAVEJOB\_WAGES\_GRP

**DESCRIPTION**

Reason to quit job: the wages are insufficient given the workload and responsibility

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	44	458
-8	Not applicable	804	7790
0	Not Important (1,2,3)	51	502
1	Important (4,5)	103	968
TOTAL		1002	9718

---

---

<b>QUESTION NUMBER</b>	<b>VARIABLE NAME</b>	<b>DESCRIPTION</b>
26f	RSN_LEAVEJOB_BENEFITS_GRP	Reason to quit job: insufficient benefits (e.g. sick leave, health insurance)

<b>TYPE</b>	<b>LENGTH</b>	<b>FORMAT</b>
Numeric	8	Nominal

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---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	49	490
-8	Not applicable	805	7803
0	Not Important (1,2,3)	78	682
1	Important (4,5)	70	745
TOTAL		1002	9720

---

---

<b>QUESTION NUMBER</b>	<b>VARIABLE NAME</b>	<b>DESCRIPTION</b>
26g	RSN_LEAVEJOB_RESPECT_GRP	Reason to quit job: do not feel respected in work as an LPN

<b>TYPE</b>	<b>LENGTH</b>	<b>FORMAT</b>
Numeric	8	Nominal

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---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	48	489
-8	Not applicable	805	7793
0	Not Important (1,2,3)	54	556
1	Important (4,5)	95	881
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

26h

**VARIABLE NAME**

RSN\_LEAVEJOB\_CHALLENGE\_GRP

**DESCRIPTION**

Reason to quit job: do not feel the work is professionally challenging

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	51	527
-8	Not applicable	805	7795
0	Not Important (1,2,3)	82	793
1	Important (4,5)	64	604
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

26i

**VARIABLE NAME**

RSN\_LEAVEJOB\_EDUC\_GRP

**DESCRIPTION**

Reason to quit job: pursuing more education

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	49	505
-8	Not applicable	804	7790
0	Not Important (1,2,3)	74	756
1	Important (4,5)	75	668
TOTAL		1002	9719



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---

**QUESTION  
NUMBER**

26j

**VARIABLE NAME**

RSN\_LEAVEJOB\_HEALTH\_GRP

**DESCRIPTION**

Reason to quit job: health does not allow me to work

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**

Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	53	555
-8	Not applicable	804	7790
0	Not Important (1,2,3)	124	1111
1	Important (4,5)	21	263
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**

26k

**VARIABLE NAME**

RSN\_LEAVEJOB\_FAMILY\_GRP

**DESCRIPTION**

Reason to quit job: family responsibilities that interfere with ability to work

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**

Nominal

---

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	51	540
-8	Not applicable	804	7790
0	Not Important (1,2,3)	122	1191
1	Important (4,5)	25	198
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

26l

**VARIABLE NAME**

RSN\_LEAVEJOB\_RETIRED\_GRP

**DESCRIPTION**

Reason to quit job: retiring from the active workforce

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	49	522
-8	Not applicable	804	7790
0	Not Important (1,2,3)	123	1095
1	Important (4,5)	26	312
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

27b

**VARIABLE NAME**

INCENT\_RCV\_FLEXIBLE

**DESCRIPTION**

Receive incentive: flexible schedule

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	42	438
-8	Not applicable	297	2829
0	No	309	2902
1	Yes	354	3550
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

27c

**VARIABLE NAME**

INCENT\_RCV\_BONUS

**DESCRIPTION**

Receive incentive: Signing bonus

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	77	768
-8	Not applicable	298	2847
0	No	553	5514
1	Yes	74	590
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

27d

**VARIABLE NAME**

INCENT\_RCV\_TUITION

**DESCRIPTION**

Receive incentive: tuition reimbursement

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	58	612
-8	Not applicable	298	2832
0	No	503	4942
1	Yes	143	1333
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

28a

**VARIABLE NAME**

INCENT\_IMPORT\_LOAN\_GRP

**DESCRIPTION**

Incentive importance: student loan forgiveness

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	52	508
-8	Not applicable	297	2829
0	Not Important (1,2,3)	282	2814
1	Important (4,5)	371	3568
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

28b

**VARIABLE NAME**

INCENT\_IMPORT\_FLEXIBLE\_GRP

**DESCRIPTION**

Incentive importance: flexible schedule

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	33	334
-8	Not applicable	298	2832
0	Not Important (1,2,3)	77	679
1	Important (4,5)	594	5874
TOTAL		1002	9719

---

**QUESTION  
NUMBER**

28c

**VARIABLE NAME**

INCENT\_IMPORT\_BONUS\_GRP

**DESCRIPTION**

Incentive importance: signing bonus

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	47	444
-8	Not applicable	299	2857
0	Not Important (1,2,3)	249	2466
1	Important (4,5)	407	3953
TOTAL		1002	9720

---

**QUESTION  
NUMBER**

28d

**VARIABLE NAME**

INCENT\_IMPORT\_TUITION\_GRP

**DESCRIPTION**

Incentive importance: tuition reimbursement

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	39	339
-8	Not applicable	298	2833
0	Not Important (1,2,3)	186	1866
1	Important (4,5)	479	4682
TOTAL		1002	9720

---

---

**QUESTION  
NUMBER**  
29

**VARIABLE NAME**  
GREWUP\_CO

**DESCRIPTION**  
Grew up in CO

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	7	81
-8	Not applicable	1	10
0	No	553	5560
1	Yes	441	4068
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
30

**VARIABLE NAME**  
GREWUP\_URBAN\_RURAL

**DESCRIPTION**  
Community, grew up

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	12	135
-8	Not applicable	10	100
1	Urban	469	4822
2	Rural	511	4662
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
31

**VARIABLE NAME**  
BIRTH\_YR\_GRP

**DESCRIPTION**  
Year of birth, grouping

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Ordinal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	15	217
1	1948 or before	216	2167
2	1949-1954	194	1855
3	1955-1961	215	1991
4	1962-1970	173	1681
5	1971 or after	189	1808
TOTAL		1002	9719

---

**QUESTION  
NUMBER**  
32

**VARIABLE NAME**  
GENDER

**DESCRIPTION**  
Gender

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	6	78
1	Female	884	8738
2	Male	112	903
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
33

**VARIABLE NAME**  
RACE\_WHITE

**DESCRIPTION**  
Race: White vs. non-white

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	13	107
-8	Not applicable	4	30
0	Not white	157	1873
1	White	828	7709
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
34

**VARIABLE NAME**  
LANG

**DESCRIPTION**  
Fluency, other than English

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Nominal

---

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b>UNWEIGHTED FREQUENCY</b>	<b>WEIGHTED FREQUENCY</b>
-9	Missing	13	126
-8	Not applicable	1	12
0	No	859	7974
1	Yes	129	1607
TOTAL		1002	9719



---

---

**QUESTION  
NUMBER**

34b

**VARIABLE NAME**

LANG\_USE

**DESCRIPTION**

Communicate w/ patients in language other than English

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**

Nominal

---

---

<b><u>VALUE</u></b>	<b><u>VALUE LABEL</u></b>	<b><u>UNWEIGHTED FREQUENCY</u></b>	<b><u>WEIGHTED FREQUENCY</u></b>
-9	Missing	33	344
-8	Not applicable	860	7984
0	No	37	509
1	Yes	72	881
TOTAL		1002	9718

## Created variables

### QUESTION

NUMBER

CREATED

VARIABLE

VARIABLE NAME

GRAD\_AGE\_GRP

DESCRIPTION

Age at graduation with LPN diploma, grouping

TYPE

Numeric

LENGTH

8

FORMAT

Ordinal

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	43	448
1	25 years or younger	403	4128
2	26-35 years	272	2544
3	36 years or older	284	2599
TOTAL		1002	9719

### QUESTION

NUMBER

CREATED

VARIABLE

VARIABLE NAME

GRAD\_NUMYRS\_GRP

DESCRIPTION

Number of years since graduated with LPN diploma, grouping

TYPE

Numeric

LENGTH

8

FORMAT

Ordinal

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	29	235
1	5 years or less	271	2601
2	6-15 years	202	1931
3	16-25 years	158	1559
4	26-35 years	206	1829
5	More than 35 years	136	1563
TOTAL		1002	9718

---

**QUESTION****NUMBER**

CREATED

VARIABLE

**VARIABLE NAME**

PRIMARY\_RUCA2\_FROM\_ZIP\_GRP

**DESCRIPTION**

RUCA classification based on ZIP Code

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b><u>UNWEIGHTED FREQUENCY</u></b>	<b><u>WEIGHTED FREQUENCY</u></b>
-9	Missing	383	3932
1	Isolated	24	250
2	Rural Large	35	419
3	Rural Small	39	417
4	Urban	521	4701
TOTAL		1002	9719

---

**QUESTION****NUMBER**

CREATED

VARIABLE

**VARIABLE NAME**

PRIMARY\_URBAN\_FROM\_ZIP

**DESCRIPTION**

Urban/Not-urban: primary place of employment (derived from ZIP Code)

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b>VALUE</b>	<b>VALUE LABEL</b>	<b><u>UNWEIGHTED FREQUENCY</u></b>	<b><u>WEIGHTED FREQUENCY</u></b>
-9	Missing	86	1103
-8	Not applicable	297	2829
0	Rural	98	1086
1	Urban	521	4701
TOTAL		1002	9719

---

---

**QUESTION  
NUMBER**  
CREATED  
VARIABLE

**VARIABLE NAME**  
AGE\_GRP

**DESCRIPTION**  
Age, grouping

**TYPE**  
Numeric

**LENGTH**  
8

**FORMAT**  
Ordinal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	15	217
1	34 years or less	151	1506
2	35-44 years	191	1724
3	45-54 years	310	2931
4	55-64years	261	2558
5	65 years or older	74	783
TOTAL		1002	9719

---

**QUESTION  
NUMBER**  
CREATED  
VARIABLE

**VARIABLE NAME**  
HOME\_RUCA2\_FROM\_ZIP\_GRP

**DESCRIPTION**  
RUCA classification based on ZIP Code

**TYPE**  
Character

**LENGTH**  
15

**FORMAT**  
Nominal

---

<u>VALUE</u>	<u>VALUE LABEL</u>	<u>UNWEIGHTED FREQUENCY</u>	<u>WEIGHTED FREQUENCY</u>
-9	Missing	61	574
1	Isolated	47	538
2	Rural Large	56	714
3	Rural Small	76	803
4	Urban	762	7090
TOTAL		1002	9719

---

**QUESTION****NUMBER**

CREATED

VARIABLE

**VARIABLE NAME**

HOME\_URBAN\_FROM\_ZIP

**DESCRIPTION**

Urban/Not-urban: home address (derived from ZIP Code)

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Nominal

---

<b><u>VALUE</u></b>	<b><u>VALUE LABEL</u></b>	<b><u>UNWEIGHTED FREQUENCY</u></b>	<b><u>WEIGHTED FREQUENCY</u></b>
-9	Missing	61	574
0	Rural	179	2055
1	Urban	762	7090
TOTAL		1002	9719

---

**QUESTION****NUMBER**

CREATED

VARIABLE

**VARIABLE NAME**

ID

**DESCRIPTION**

Identification number

**TYPE**

Numeric

**LENGTH**

8

**FORMAT**Ordinal

---

<b><u>VALUE</u></b>	<b><u>VALUE LABEL</u></b>	<b><u>UNWEIGHTED FREQUENCY</u></b>	<b><u>WEIGHTED FREQUENCY</u></b>
1001-2002	1001-2002	1002	9719
TOTAL		1002	9719

## **APPENDIX A: BUSINESS RULES FOR DATA CLEANING**

The Colorado Health Institute (CHI) used the following business rules to edit data obtained from the 2007 LPN survey. Numbers in parentheses are the question numbers as they appeared in the survey.

For more information, contact Anna Furniss, CHI programmer/analyst, at 303.831.4200, x 204 or [furnissa@ColoradoHealthInstitute.org](mailto:furnissa@ColoradoHealthInstitute.org).

### **General Rules**

1. If a question should not have been answered, due to a skip pattern or instructions on the survey, but a response was given, the variable was coded as “-8” (Not applicable/skip pattern).
2. For a “Mark Only One” question that gives many possible choices, if a respondent marked more than one choice, the variable was coded as “-8” (Not applicable/skip pattern).
3. For questions that should have been answered, but a response was not given, the variable was coded as “-9” (missing).
4. For any type of violation to a survey instruction or skip pattern, or for out-of-range values, the corresponding variable was coded as “-8” (Not applicable/skip pattern).

### **Question-specific rules**

1. If a valid U.S. state was entered for the state where training program was located (1a), the corresponding variable was coded with the standard two-character postal abbreviation for that state. However, if more than one state was entered, only the state first mentioned was coded. If a response could not be reasonably mapped to a state, the variable was coded as “-8” (Not applicable/skip pattern).
2. If the year of completion for LPN training (1c) is after the year of first Colorado licensure as an LPN (1d), both variables were coded as “-8” (Not applicable/skip pattern) because there was no way of knowing which response was valid.
3. If “Other” was not the sole selection for location of classroom training (1e) but a descriptive text was entered on the “Please specify” line:
  - 3.a. If no selection was made for location, then the “Other” box was re-coded as having been selected.
  - 3.b. Otherwise, the descriptive text was replaced with “-8” (Not applicable/skip pattern).
4. If “Other” was not the sole selection for location of clinical training (3) but a descriptive text was entered on the “Please specify” line:
  - 4.a. If no selection was made for location, then the “Other” box was re-coded as having been selected.
  - 4.b. Otherwise, the descriptive text was replaced with “-8” (Not applicable/skip pattern).
5. If a response of “No” was given for “any prior experience” (4), then all variables regarding type of prior positions (4a) were coded as “-8” (Not applicable/skip pattern). If the variable was missing and

had been coded as “-9”, it was left as is.

6. If “Other” was not selected as type of prior experience (4a), but text was entered on the “Please specify” line, then the “Other” box was re-coded as having been selected.
7. If “Other” was not the sole selection for the facility where the respondent was first employed (7), but a descriptive text was entered on the “Please specify” line:
  - 7.a. If no selection was made for facility, then the “Other” box was re-coded as having been selected.
  - 7.b. Otherwise, the descriptive text was replaced with “-8” (Not applicable/skip pattern).
8. If text was entered on the “Please specify” line for additional on-the-job training (9g) but the “Yes” box was not checked:
  - 8.a. If no selection was made for “Yes/No,” then (9a) was re-coded as if the “Yes” box had been checked.
  - 8.b. If “No” was selected for (9a), then (9a) was re-coded to “-8” (Not applicable/skip pattern).
9. If “No” was selected for whether currently enrolled in an RN program (10), subsequent responses to questions 11, 12 and 13 were coded as “-8” (Not applicable/skip pattern).
10. If “Yes” was NOT chosen for whether currently enrolled in educational or certification program (12) but text was entered on the “Please specify” line, the text was replaced with code value of “-8” (Not applicable/skip pattern).
11. If “No” was selected for currently enrolled in educational or certification program (12), a subsequent response to question 13 was coded as “-8” (Not applicable/skip pattern).
12. If “Yes” was chosen for being currently employed as an LPN in a clinical position in Colorado (14), subsequent responses to 15 and 16 were coded as “-8” (Not applicable/skip pattern).
13. If “Other” was not the sole selection for reason not currently employed as an LPN in a clinical position in Colorado (15), but text was entered on the “Please specify” line:
  - 13.a. If no selection was made for location, then the “Other” box was re-coded as having been selected.
  - 13.b. Otherwise, the descriptive text was replaced with “-8” (Not applicable/skip pattern).
14. If “No” was selected for currently employed as an LPN by more than one employer in Colorado (17), any subsequent responses to 17a through 17d were coded as “-8” (Not applicable/skip pattern).
15. If “Other” was not the sole selection for type of facility for current primary employer (18) but a descriptive text was entered on the “Please specify” line:
  - 15.a. If no selection was made for location, then the “Other” box was re-coded as having been selected.
  - 15.b. Otherwise, the descriptive text was replaced with “-8” (Not applicable/skip pattern).
16. If a number was entered for ZIP Code of primary place of employment (19), but it did not map to a valid code in the CENTRUS database, all variables derived from that ZIP Code were coded as “-8” (Not applicable/skip pattern).

17. If “Yes” was selected for health insurance obtained from primary place of employment (22), any subsequent responses to questions 23 and 24 were coded as “-8” (Not applicable/skip pattern).
18. If “No” was selected for health insurance offered through current employer (23), any subsequent response to question 24 was coded as “-8” (Not applicable/skip pattern).
19. If “Yes” was selected for growing up in Colorado (29), any subsequent response to question 29a was coded as “-8” (Not applicable/skip pattern).
20. If a valid U.S. state was entered for the state or foreign country in which the respondent grew up (29a), the variable for state was coded with the standard two-character postal abbreviation for that state. However, if more than one state was entered, only the state first mentioned was coded. If a response could not be reasonably mapped to a state, the variable was coded as “-8” (Not applicable/skip pattern).
21. If a valid U.S. state was entered for (29a), the variable for country was coded as “USA.”
22. If “No” was selected for being fluent in a language other than English (34), any subsequent responses to questions 34a and 34b were coded as “-8” (Not applicable/skip pattern).
23. If a number was entered for ZIP Code of home address (35), but it did not map to a valid code in the CENTRUS database, all variables derived from that ZIP Code were coded as “-8” (Not applicable/skip pattern).



**APPENDIX B:  
SAMPLING AND RESPONSE SUMMARY**

<b><u>STRATA</u></b>	<b><u>NUMBER RESPONDING</u></b>	<b><u>ELIGIBLE</u></b>	<b><u>POPULATION</u></b>	<b><u>RESPONSE RATE</u></b>
Rural Males	67	177	182	37.9%
Rural Females	106	238	1838	44.5%
Urban Males	69	236	862	29.2%
Larimer Females	116	245	545	47.3%
Weld Females	122	240	440	50.8%
Denver Metro Females	117	299	3649	39.1%
Boulder Females	109	241	378	45.2%
El Paso, Teller Females	97	242	971	40.1%
Pueblo Females	89	239	592	37.2%
Mesa Females	110	236	262	46.6%
<b>TOTAL</b>	<b>1002</b>	<b>2393</b>	<b>9719</b>	<b>41.9%</b>

## APPENDIX C COVER LETTER AND POSTCARD

November 26, 2007

Xxxx  
Xxxx  
Xxxx  
Xxxx

Dear Mr./Ms. xxxx:

Colorado policymakers are very interested in understanding the training and practice issues related to licensed practical nurses (LPNs). We need your help by asking that you complete the enclosed LPN Workforce Survey. **Your responses** are extremely important to ensuring an accurate picture and understanding of the education, work experience and opinions of Colorado's LPN workforce. Your name was randomly selected from current licensees to represent the entire LPN workforce in the state. The responses you provide are confidential and your name will be removed from our database once the administration of the survey has been completed.

The Colorado Health Institute is conducting the survey. We have worked closely with other workforce and professional organizations to develop the survey you will be completing.

We value your participation. The survey should take approximately fifteen minutes to complete. A high response rate will ensure the reliability of the findings and help us to accurately portray the workforce issues faced by LPNs in Colorado. Please assist us in better informing Colorado policymakers by completing the survey.

If you have any questions about this survey or the Colorado Health Workforce database, please contact Michael Boyson at 303.831.4200, extension 207.

Warm regards,



Pamela Hanes, PhD  
President and CEO

You can also complete the survey form on line at: <http://www.ColoradoHealthInstitute.org/LPN2007.html>.  
Type the number shown at the top of your survey form (xxxx) → Complete the questionnaire and click the "submit" button when you finish.



Colorado Health Institute  
1576 Sherman Street, Ste. 300  
Denver, CO 80203-1728

November 16, 2007

Last week you received a letter inviting you to participate in an LPN Workforce Survey. Your name was drawn randomly from a list of currently licensed LPNs in Colorado.

If you have already completed the survey online or returned the form to us, please accept our sincere thanks. If not, we ask that you please do so today. We are especially grateful for your participation because it is only through nurses like you completing the questionnaire that the policymakers will fully understand the workforce issues faced by LPNs in Colorado.

If you did not receive a questionnaire, or if it was misplaced, please call Rose Rahman at 303.831.4200, extension 216 and we will get another one in the mail to you today.

Warm regards,

A handwritten signature in cursive script, reading 'Pamela Hanes', followed by a horizontal line.

Pamela Hanes, PhD  
President and CEO  
Colorado Health Institute