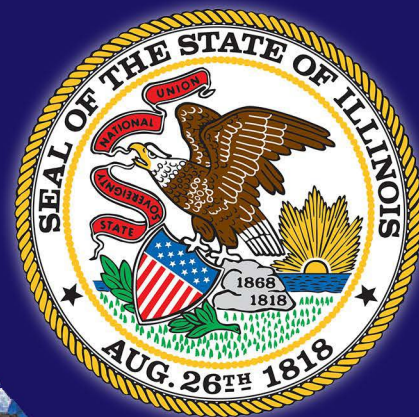


LPN 2023
Workforce
Survey
Report.
March 2024.



JB Pritzker
Governor

Mario Treto, Jr.
Secretary

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Completed in 2023, under the leadership of the Illinois Nursing Workforce Center's Advisory Board of Directors, this workforce survey was offered by Eblasts after individual on-line licensure renewal by the Illinois Licensed Practical Nurse (LPN) was closed. The acquisition of data was accomplished through the collaboration of the following IDFPR sections: Licensing, the Division of Nursing, the Board of Nursing, the Illinois Nursing Workforce Center and the State of Illinois Department of Innovation and Technology.

Special thanks to the Licensed Practical Nurses licensed in Illinois who voluntarily responded to the survey. The feedback provided will make a significant contribution to planning health services in Illinois, specifically those focused on the nursing workforce.

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Key Findings

Illinois Nursing Workforce Center Licensed Practical Nurse (LPN) Survey 2023

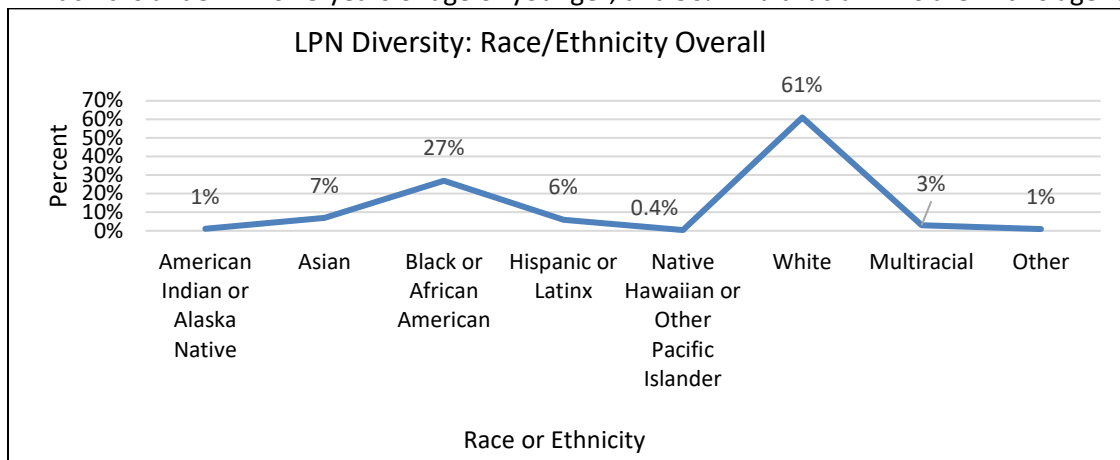
Voluntary survey participation was offered to Illinois LPNs through two eblasts, February 16 and March 3, 2023. The data portal remained open from February 16 through March 21, 2023. A total of 8,367 LPNs completed the survey for a survey response rate of 31% LPNs.

Key Findings

- Employment: 94% are employed full-time in nursing, 78% work one job.
- Employment setting: 56% Practice in long-term care/outpatient clinic/assisted living.
- Diversity: the LPN workforce is the most racial and ethnically diverse of Illinois licensed nurses. There is more racial and ethnic diversity in the LPNs that are less than 45 years of age.
- Age: 40% of LPNs are age of 55 years or older.
- Education: 44% of licensed LPNs received community college education.

Diversity

- 7.3% of LPNs are male, lower than national average, with 36% of male LPNs are under 45 years.
- 61% of Hispanic/Latino LPNs are less than 45 years of age.
- 45% (approximately) of Asian, American Indian or Alaska Native or Native Hawaiian or Other Pacific Islander LPNs 45 years of age or younger; and 50% Multiracial LPNs are in this age range.



- 27% of LPNs identify as Black/African American, the largest reporting minority; 36% are less than 45 years of age.

Age of the LPN Workforce

- 40% of the LPN workforce is over the age of 55 years of age.
- 24% of LPNs who practice in nursing homes/extended care facilities plan on retiring in 1-5 years.

LPN Employment Settings

- 48% Practice in long-term care/rehabilitation/assisted living.
- 13% Practice in outpatient settings such as ambulatory clinics, primary care clinics, offices.
- 9% Practice in the home health setting.
- 4% of LPNs are school nurses.

LPN Position Role

- 74% Provide direct patient care as staff nurses working primarily in long-term care, assisted living facilities, as well as outpatient and ambulatory settings.
- 7% identify as an administrator or manager.
- In Illinois the average staff nurse salary ranges from \$55,000-\$75,000.

Executive Summary

Illinois Nursing Workforce Center Licensed Practical Nurse Survey 2021

General Overview

This report details the results of the 2023 Illinois Licensed Practical Nurse (LPN) workforce survey. The survey was structured to capture data on the demographics of the current LPN licensed workforce, including their racial, ethnic and gender diversity, relative numbers of LPNs in each age group, educational preparation, specialty practice area, limited questions on the impact of COVID-19 SARS-2 pandemic and workplace settings.

Voluntary survey participation was offered to Illinois LPNs through two eblasts, February 16 and March 3, 2023. The data portal remained open from February 16 through March 21, 2023. The survey was completed by 8,367 LPNs representing approximately 31% of the 27,023 total LPNs licensed in Illinois. Data on the characteristics, size, practice foci, educational pipeline and distribution of LPNs in the State of Illinois is essential to planning for provision of essential health care services to many groups of Illinois citizens, particularly the elderly and home bound. These data are essential for LPN workforce planning.

Diversity

The Illinois LPN workforce is a racially and ethnically diverse group, especially in comparison to the RN workforce. Twenty-seven percent of respondents to the question on race placed themselves in the Black/African American category. The two age ranges of Black/African American LPNs with the highest percent African American/Black LPNs are age 45-54 years (30%) and 35-44 years (26%) of age. The Hispanic/Latinx percent was highest in the younger years, with approximately 60% less than 44 years of age. The gender diversity is slightly less than national average with approximately 7% males, though 36% of this group are 44 years of age or younger. While there is a clear need to increase diversity in the nursing workforce, the LPN group continues to demonstrate some promising trends.

Age of the Workforce

Similar to the RN workforce, LPNs are an aging group; 40% of the respondents are 55 years of age or older. When combined with the 45-54 years old age groups, the data indicate that 65% of the LPN workforce falls into upper age ranges, which is similar to the 2019 and 2021 survey results. Serious concerns about the capacity of this group to meet future population's health needs surface as 39% of respondents plan to retire in the next ten years.

Workplace Settings

Nursing homes/long-term care settings were the primary workplace settings for approximately 33% of the respondents. Another large group of LPNs practice in the ambulatory care/outpatient clinic setting (13%), assisted living facilities (10%) and (9%) practice in the home health setting. Demand projections for this workforce depend on the anticipated shift from

nursing home/long-term care to home health care for the elderly but long-term employment growth is expected to continue into 2030 (1) (2). Combining workplace setting, age and intent to retire data have clear implications for Illinois workforce planning groups, particularly the need to focus on the nursing home/ home health population, its growth, service needs and the demand/workforce capacity imbalance.

Summary

The LPN survey data indicates a workforce that is aging with a diminishing LPN pipeline to replace these nurses. It is well-known that aging of the U.S. population poses particular demands on health care services, one sector being long-term care needs. Recent reports on long term care raise concerns about the quality of these services (3). There is an urgent need for work force planning to meet future healthcare needs. LPNs traditional roles in nursing homes/extended care/assisted living environments and home care with the anticipated growth of the elderly population will increase the demand for LPNs. As we plan for the future LPN nursing workforce demands created by both population shifts and health care transformations, it would be helpful to have a better understanding of the drivers for choosing an LPN license and how we might optimize each individual's interest in a nursing career.

About the Data/Introduction

The Illinois Nursing Workforce Center Licensed Practical Nurse (LPN) Workforce Survey 2023

This is the fifth time that data has been voluntarily collected post Illinois LPN license renewal. However, this is the first time that data was successfully collected by two separate eblasts to the Illinois licensed LPN email addresses after the biennial license renewal process was completed. The two 2023 eblast messages can be found in Appendix B.

The primary source of data for this report was from a voluntary survey offered to individual Licensed Practical Nurses (LPNs) through two eblasts distributed in February and March 2023. The eblasts were distributed on February 16 and March 3, 2023, to the IDFPR LPN database of email addresses, approximately 27,000 LPNs licensed in Illinois. The biennial LPN license renewal was completed January 31, 2023. The eblasts were distributed after the LPN license renewal portal was closed, and at a time agreeable with Illinois Department of Financial and Professional Regulation (IDFPR) Licensing Section.

On February 16, 2023, 26,949 Licensed Practical Nurses (LPNs) licensed in Illinois received the first eblast request to voluntarily participate in completion of an individual survey. As of March 2, 2023, 5,015 (18.6%) responses were received. On March 3, 2023, a second eblast was distributed to 27,023 Illinois LPNs; the email message had been adjusted in two places. First, the end of the first line the phrase: "...deadline for survey submission March 17, 2023"; and second, a final sentence was added: "If you have already completed this survey, thank you, you do not need to complete the survey a second time". The survey was closed on March 21, 2023, with 8,367 or 31% response rate of those who hold an Illinois LPN license.

About the survey: The survey included 34 questions consistent with the National Forum of State Nursing Workforce Centers recommended Supply minimum set of data to standardize information collected. There were additional questions about workplace violence and the impact of COVID-19 SARS-2 pandemic. A comprehensive record of questions is provided in Appendix A. Information obtained from the survey is categorized into four areas. The first area, demographic information, includes the relative numbers in each age group; race, ethnic and gender diversity; and retirement horizon. The second area, human capital elements include education preparation, education advancement, specialty practice area, workplace setting and workplace role. The third area includes job characteristics of work setting, annual salary, workplace benefits. The final section includes information on workplace violence, and COVID-19 SARS-2 pandemic impact.

Demographics

General Overview

Data on the characteristics, supply, and distribution of licensed practical nurses (LPNs) in the State of Illinois are essential to expanding access to care and planning for provision of essential primary and other health care services. This report contains data on the demographics of our current LPN workforce, the relative numbers of LPNs in each age group, their racial, ethnic and gender diversity, educational preparation, employment specialty, employment role, annual salary, limited COVID-19 SARS-2 pandemic information and workplace setting.

Figure 1: Age Cohorts

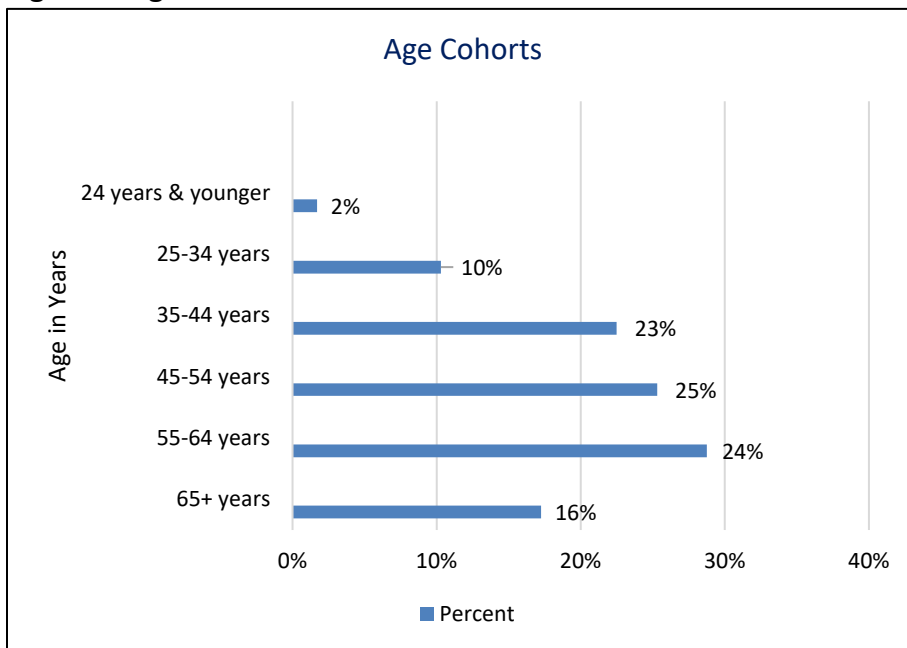


Figure 1 presents the distribution of Licensed Practical Nurse (LPN) survey participants by selected age categories. Age is derived from unfiltered participant responses to date of birth. The years of age are listed on the vertical axis, on the left of the horizontal bar, to the right of the horizontal bar is the percent. The

substantial share of Illinois LPNs in advanced age categories represents a significant context for many other observations in this report. Approximately 40% of Illinois LPNs are age 55 years or older. The value of these age categories as a cross-reference for other information is enhanced by the relatively small number of non-responses (n = 217).

The LPN voluntary survey age data were compared with the Illinois Department of Financial and Professional Regulation (IDFPR) active licensee age data. The ages are similar, though more, approximately 9% more LPNs age 55-70 years responded to the survey. The Illinois LPN active licensee database has approximately 7% more LPNs between the ages of 25-34 years of age. See Appendix #D for LPN age comparison. The LPN active licensee age data were obtained from the IDFPR licensure database in June 2023.

Diversity of the Illinois LPN workforce is illustrated in Figures 2 and 3. Figure 2 represents racial and ethnic diversity of respondents, and Figure 3 illustrates racial, ethnic and gender diversity distributed amongst age cohorts. The U.S. Census Bureau describes the Hispanic ethnonym as a culture regardless of race, so these data may represent duplicate counts. White females constitute a substantial majority (61%); however, there are indications of changing demographics observable across age categories.

The racial and ethnic diversity of the LPN nursing workforce in Illinois was determined by two questions asked in sequence: “Are you Hispanic or Latino;” followed by the question “What is your race/ethnicity (mark all that apply)”. Responses are illustrated in Figure 2. There were 4,948 responses, 29 individuals did not respond to the question regarding Hispanic or Latino ethnicity and 74 did not respond to the question regarding race.

Figure 2: Diversity: Race/Ethnicity Overall

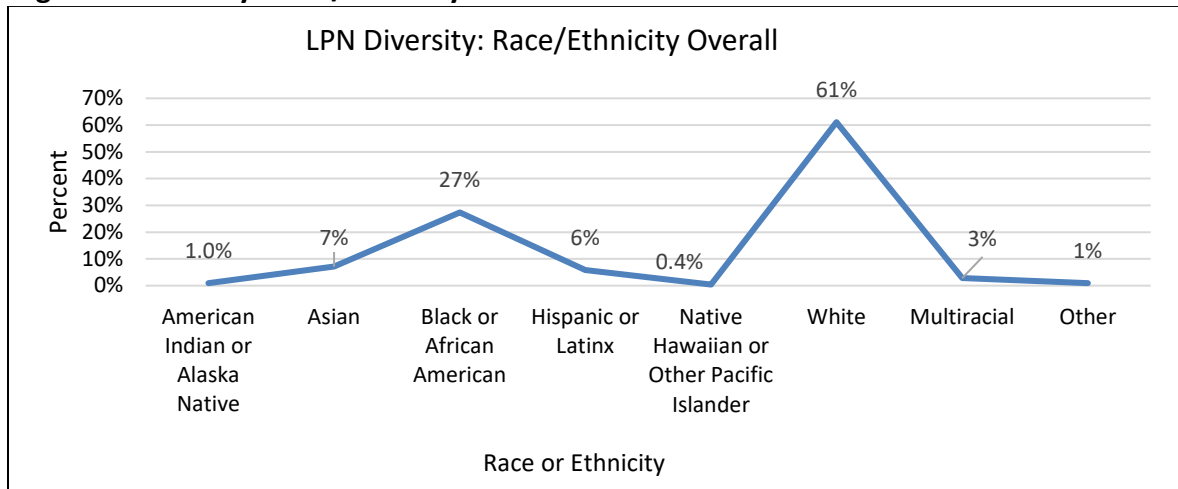


Figure 2. Hispanic or Latino no response n = 29
Race/ethnicity no response n = 74

Diversity of the workforce varies depending on age, with younger cohorts generally demonstrating increased diversity. Black/African American is the largest reporting minority group (27%). For Black/African Americans, the percent was similar for two age ranges: 35-44 years (26%) and 45-54 years (30%) of age. Interestingly the Hispanic/Latino percent was highest in the younger years, showing approximately 61% of Hispanic/Latino LPNs are less than 45 years of age.

Figure 3 Race, Ethnicity, Gender Diversity by Age Cohorts

		24 years and under (1998-2006)	25-34 years old (1988-1997)	35-44 years old (1978 - 1987)	45-54 years old (1968-1977)	55-64 years old (1958-1967)	65+ years old (1925-1957)		Total
American Indian or Alaska Native	% N	1.4% 1	17% 12	25.4% 18	40.9% 29	8.5% 6	7% 5		1% 71
Asian	% N	1.6% 9	13.0% 74	32.1% 183	25.8% 147	19.8% 113	7.7% 44		7% 570
Black or African American	% N	0.8% 17	9.8% 214	25.8% 564	29.8% 653	20.3% 444	13.6% 298		27% 2,190
Hispanic or Latinx	% N	2.3% 11	25.9% 122	32.5% 153	19.1% 90	14.2% 67	5.7% 28		5.8% 471
Native Hawaiian or Other Pacific Islander	% N	0% 0	13.3% 4	33.3% 10	33.3% 10	10% 3	10% 3		0.4% 30
White or Caucasian	% N	2.2% 107	9.4% 463	19.6% 968	22.9% 1,134	27.6% 1,367	18.4% 908		61% 4,947
Multiracial	% N	1.3% 3	18.9% 43	30.4% 69	27.3% 62	14.1% 32	7.9% 18		2.8% 227
Female*	% N	1.6% 122	10.2% 766	22.5% 1,684	25.1% 1,881	24.2% 1,814	167.2% 1,216		92% 7,494
Male*	% N	2.4% 14	10.8% 64	23.2% 138	27.3% 162	26.3% 156	10.1% 60		7.3% 594
		24 years and under	25-34 years old	35-44 years old	45-54 years old	55-64 years old	65+ years old		Total

**The gender question included the response options: prefer not to answer, and Other (please specify). The "Other" option collected comments, which does not allow to disaggregate responses by age.*

Figure 3: No response: race n = 74, ethnicity n = 29

In terms of race/ethnicity by age-groups, larger percentages of ethnic and racial minority LPNs are in the younger age ranges, as compared to those nearing retirement, suggesting the recruitment and retention in the LPN education programs is positively impacting an increased diversity of the workforce. For example, 47% of Asians reported being younger than age 45 years, while 8% reported being age 65 years or older. Another notable observation from Figure 3 (above) is the limited ethnic diversity of the youngest age category, but there are a limited number of responses from the youngest age group (n = 284, approximately 3%).

Women continue to dominate the Illinois LPN workforce. The majority of LPNs respondents, 92%, are women, which is the same as the 92% national average (5). The percent of male LPNs is 7.3%, which is slightly less than the national average of 8%. However, since 2007, the percent of Illinois LPNs who are male has doubled from 3.5% to 7.3% and the percent of LPNs who are women has decreased from 97% to 92% (6). It should be noted that approximately 36% of male respondents are less than 45 years of age.

Gender distribution does differ by race and ethnicity: for example, for Asian respondents, approximately 72% are female, 27% are male. In 2020 a third gender response option of “other” was added to the survey and selected by approximately 0.1% of respondents, and 0.5% chose the “prefer not to answer” response. While there is a continued need to increase the racial and ethnic diversity of the nursing workforce, the Illinois licensed practical nurses continue to have increase in the racial and ethnic diversity of the workforce.

Consistent with past Illinois LPN surveys, the overwhelming majority of respondents received initial LPN licensure in the United States. In 2023, 99.5% (8,264) received initial LPN licensure in the United States. For those that received initial nursing licensure in another country, 5% (500) indicated the license was an RN license. There are few LPNs that are licensed in another state. Of those LPNs who are also licensed in another state, the majority are licensed in the following: Indiana (4%), Missouri (3%), Wisconsin (2%), Iowa (2%) and Florida (1%). For those with licenses in another state, even less indicate they practice in that state: Indiana (2%), Iowa (1%), Wisconsin (1%), Florida (0.5%) and Michigan (0.2%).

The survey asked participants a pair of questions related to retirement plans: *“How much longer do you plan to practice as a nurse in Illinois”* and *“If you plan to retire within the next 5 years, is there a primary factor that would persuade you to... extend your date of retirement?”* Approximately 39% of survey participants report anticipated retirement over the next decade. On the first question there were a substantial number, 21% (n = 1,421) indicating uncertainty with regards to retirement plans, and there were 1,661 non-responders.

The second retirement question asked the primary reasons for potentially delaying retirement. The results of the question of are difficult to interpret. First, approximately 38% of survey respondents did not respond, and second approximately 43% of those who did respond indicated no eminent retirement. Economic conditions and increased salary were indicated as the primary factors that would delay retirement. Other responses included already retired, reduced physical demands and shortened, flexible work hours. Thus, salary and economic benefits continue to be an important component of maintaining LPNs in the workplace.

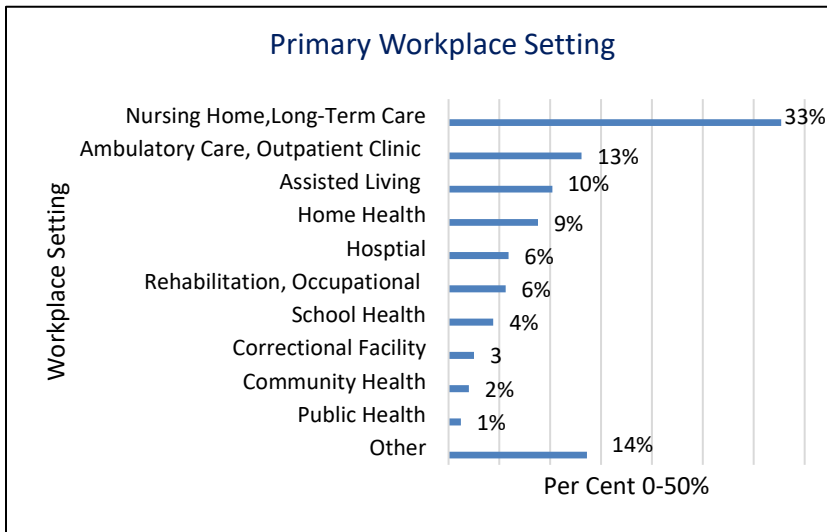
Human Capital

The concept of human capital frames workforce issues in terms of the productive capacity of each individual. Skills and knowledge can be general (productive in a variety of contexts) or specific (most valuable in a particular context, such as a unique industry setting or specialized occupational role). A human capital perspective is essential to the full appreciation of the role of health care, education, and workforce development in promoting economic growth and societal wellbeing. In this section we look at education preparation, area of clinical practice specialties, employment characteristics and COVID-19 SARS-2 impact in the Licensed Practical Nurse (LPN) survey responses.

Employment, Job Characteristics

The majority 82% (5,364) of respondents are actively employed full-time in nursing. Twenty-three per cent (1,507) work part-time and nineteen per cent work per diem; the number working per diem is approximately double what it was in 2021. The question regarding number of jobs, 78% (4,708) work at one job, though 2,296 respondents skipped that question. A small number of respondents, approximately 18% (1,121), work multiple jobs. Approximately half or 52% (2,969) of respondents work a total of 40 hours per week on all jobs. For those who work part-time, approximately 22% (1,262) work less than 40 hours per week, and approximately 22% (1,293) work between 50-60 hours per week. Very few respondents work more than 60 hours per week.

Figure 4: Employment Setting



Participants were asked to identify the type of setting that most closely corresponds to their primary nursing position. The most common setting was nursing home or long-term care setting (33%, 1,968, followed by the ambulatory care, outpatient clinics (13%, 782); assisted living facilities (10%, 614), home health (9%,

528) and acute care or hospital settings (6%, 357) (Figure 4: non-response n=2,355).

Most of the settings where Illinois LPNs are employed are non-acute care or non-inpatient hospital settings. The primary role of the LPN, in all the various employment settings

listed above, is as a direct care provider, a staff nurse providing care to patients and families 74% (4,649). The next highest categories are nurse administrator/manager 7% (410), followed by patient care coordinator 4% (240). The “other health-related” category is 8% (513); this question did not provide for individual comments as to what these other health-related roles are. These data are similar to the past LPN reports since 2017 where approximately 75% identified as staff nurses, 5% as nurse administrator/managers and 5% as patient or nursing care coordinators.

COVID-19 Impact

Four specific COVID-19 impact questions, were asked. The first asked: *Have you switched jobs since Fall 2020? If yes, please list the type of switch: a different care unit, a different employer, a temporary staffing agency, or if you are working as a travel nurse.* Approximately 50% skipped answering (approximately 4,689); of those that responded, 40% indicated that they had switched jobs since Fall 2020. The next highest response rate: slightly more than 7% indicated that they had not switched employers; 8% indicated they had switched jobs but are with the same employer. Six percent indicated that they are working per diem with a temporary staffing agency. Approximately 4% indicated that they are no longer working as a nurse and additional 7% are now retired.

There were two specific COVID-19 questions: *Are you required to provide proof of completion of COVID-19 vaccination series to maintain employment?* Approximately 25% (2,122) skipped the question; of those that responded, 70% indicated yes, a COVID-19 vaccination series is required to maintain employment. The second question: *If you have an approved COVID-19 exemption, how often are you required to complete a COVID-19 test to maintain employment?* Approximately 25% responded to the question; approximately 25% are tested weekly, 20% are tested twice weekly. Approximately 50% of those with a COVID-19 exemption indicated “other” as to how often they are COVID-19 tested.

A final question in this section asked about COVID-19 impact on the work environment, staffing, pay, scheduling and nurse support. The question: *Due to ongoing concerns about nurses’ emotional well-being and burnout, many organizations have implemented policies directly aimed at the safety, well-being, and support of the nursing workforce. Please check which revisions have occurred at your current place of employment since Fall 2020. Check all that apply.* There was a 63% response rate to this question. Response options: are divided into the following areas:

- Work environment: 50% experienced new PPE policies and practices; 8% experienced increased access to mental health services.
- Pay: 32% received an increase rate of pay; 17% COVID-19 received hazard pay; 22% received bonus pay; and 3% received an increased amount of paid time off.

- Scheduling: 19% received an increased flexible scheduling; 7% received an increased “ease ability” to schedule paid time off; 6% paid leave of absence.
- Temporary staffing assistance: 11% experienced increased number of travel nurses as coworkers; 13% increased number of temporary agency nurses as coworkers.

In summary, for nurses responding to this COVID-19 impact question there were many changes in the work environment including rate of pay, scheduling and support services.

Employment specialty

The types of specialty practice area reflect the breadth of clinical specialty knowledge required by the LPN’s primary role. For this question, more than one clinical specialty area could be selected by respondents. The most frequently reported specialty areas: long term care (27%, 1,655), geriatric/gerontology (14%, 855), home health (6%, 370), primary care (5%, 291), adult health (4%, 276) and psychiatric/mental health/substance abuse (5%, 291). Below is a list of specialty areas, and the percent of nurses specializing in each area.

- **Acute Care:** Acute Care or Hospital (2%), Emergency (0.6%), Orthopedics (1%)
- **Long Term Care:** Long Term Care (27%); Rehabilitation (3%),
- **Non-acute, Outpatient Clinical Practices:** Outpatient or Ambulatory Clinic (3%); Primary Care, includes Private Physician Offices (5%)
- **Community, Health Promotion:** Community (2%), Home Health (6%), Public Health (1%), School Health (4%)
- **Family Health:** Geriatric/Gerontology, (14%), Adult Health (4%), Women’s Health (1%), Pediatrics (4%)
- **Maternal-child Health:** Maternal-child Health (0.5%)
- **Medical, includes Specialties:** Medical (3%), Dialysis and/or Nephrology (0.3%), Oncology (0.6%), Occupational Health (0.5%), Wound Care (0.45%)
- **Other:** Other (7%)
- **Palliative Care:** Palliative Care (0.4%), Hospice (0.63%)
- **Prison/Corrections:** (0.46%)
- **Psychiatric/Mental Health/Substance Abuse:** Psychiatric, Mental Health, Behavioral Health, Substance Abuse (5%)
- **Surgical:** Surgical (1%), Perioperative (0.2%)
- **Tele-health:** Telehealth (0.6%)
- **Retired:** (0.58%)

The original “Other” response rate was ten per cent. If the specialty listed in the “Other” comments section was the same as or similar to a major category previously listed, such as “Home Health” or “Telehealth”, the comment was moved into that category and the

per cent total for that category was adjusted. The specialty areas with high response rates are listed above and include the comments that have been subtracted from the original “Other” response rate total. With the redistribution of individual specialties as described above, the “Other” category decreased to seven per cent. Approximately two thousand participants did not answer this question.

Figure 5: Post-Licensure Specialized Certification

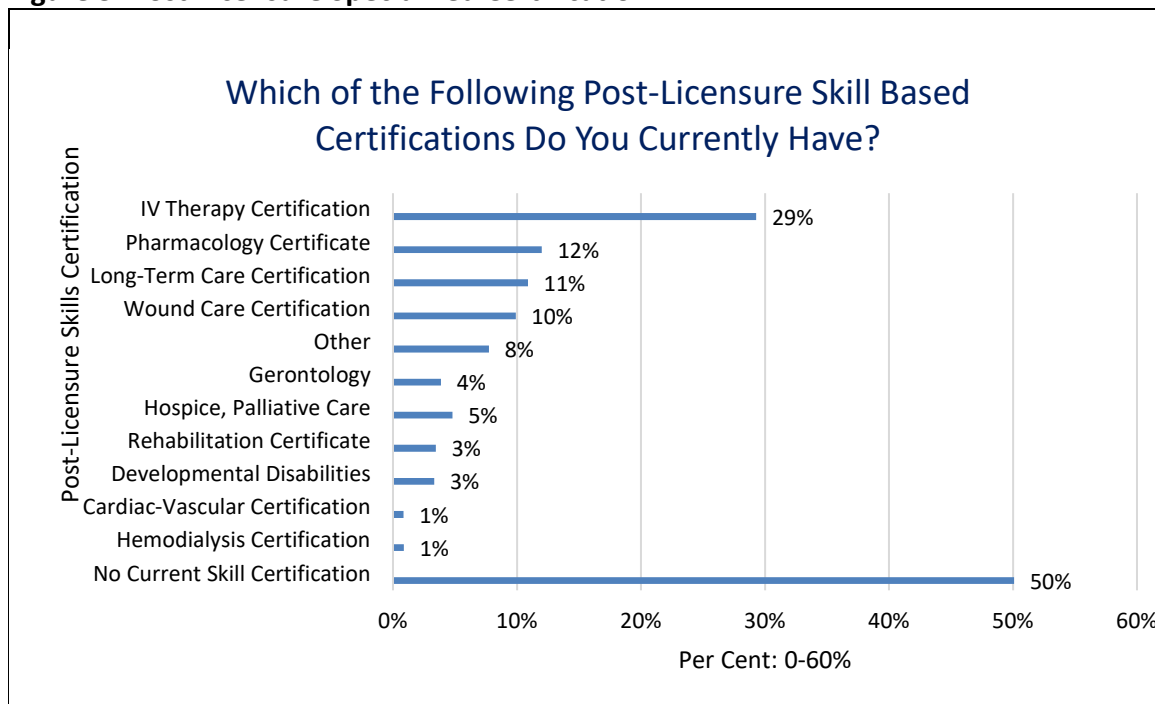


Figure 5: No response n = 1,198

Specialized certification enhances skills that are most valuable in a particular employment context. There are several specialty certifications available to LPNs. Figure 5 (above) reflects the specialty certifications held by the respondents. The top four specialty certifications are IV (intravenous) Therapy, Pharmacology, Long-Term Care, and Wound Care. These specialty certification areas, particularly IV training, could reflect demand in the field for these skills. In the “Other” category, the following certifications received a fair number of responses: Dementia (0.6%), Infection Control (0.7%), Phlebotomy (0.6%), and RAC-CT (0.42%). It should be noted that approximately half of the respondents (50%) do not hold any specialty certification.

Experience by Age Distribution

Years of experience as an LPN is another individual element that can be derived from survey responses. It is not surprising that the youngest age cohort, 25 years and younger, have the least experience. However, a more complex picture emerges for age groups 35-44 years,

45-54 years and even 55-64 years of age. In each of these age categories are individuals with diverse levels of experience. This observation is consistent with heterogeneity in the timing of LPN career choice. That is, individuals enter the field at different points in the life cycle, up to their late 40's and beyond. Thus, in these older age cohorts, age cannot automatically be equated with years of experience.

Educational Distribution

Figure 6: Highest Level of Education

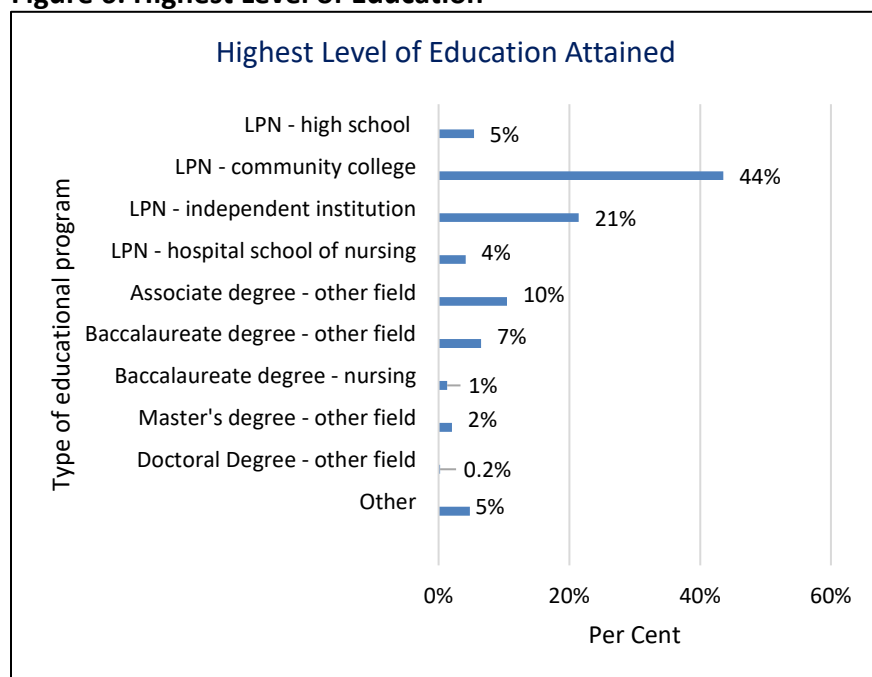


Figure 6 presents Illinois LPN educational attainment. The numerical per cent is to the right of each horizontal bar. LPN licensure obtained through a community college is the highest ranking, followed by independent institution. The advanced degrees through college courses are in addition to the LPN education and licensure.

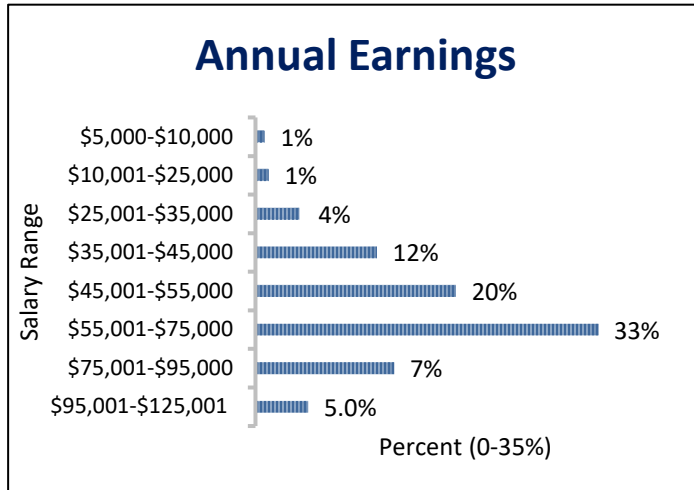
Figure 6: No response n = 279

Community college nursing education programs remain an important pipeline for the LPN workforce. In Illinois there are a total of 34 stand-alone licensed practical nursing education programs at either a community college or an independent institution. Seventeen of these LPN programs are located in community colleges. There are also 11 community college associate degree RN programs that do not have a stand-alone LPN pre-licensure education program but do have an LPN ladder-option. These 11 community college programs are approved by the Board of Nursing to offer an “LPN option-out”. These eleven “ladder and option” programs do not have a stand-alone LPN program, but at a pre-determined point in the curriculum, if the student meets requirements, the student is eligible to take the LPN licensure examination (7). These data are similar to the 2017 through 2021 Illinois LPN survey responses that also indicated that slightly less than half of the respondents received their LPN education through a community college. A list of Illinois LPN education programs is found on the Illinois Nursing Workforce Center website, tab: Education Opportunities, pre-licensure <https://nursing.illinois.gov/education/education-opportunities-pre-licensure-education.html#1>

The number of younger LPNs currently enrolled in an associate degree and baccalaureate degree programs could explain the large number of younger respondents who intend on retiring in one to five years. Perhaps they anticipate moving ahead with another career or an RN license level position.

Earnings

Figure 7: Annual Earnings



The 2023 LPN survey question “Please estimate your pre-tax annual full-time earnings from your primary nursing position” provided fifteen earning intervals. The median response was \$55,000 to \$75,000. The majority (65%) of respondents reported annual earnings between \$45,000-\$95,000. Approximately 36% of respondents reported an annual salary below \$55,000; 20% above \$75,000.

Figure 11: No response n = 3,061

The majority of Illinois LPNs work full-time, as reported earlier. The salary range is higher in the 2023 survey than in past surveys. The 2023 LPN survey for the first time had a separate question asking the respondent if they worked part time, less and an average of 30 hours of service a week. However, there was only a 30% response rate, with half of those that did respond indicating that they did not work part-time. The average Illinois LPN salary is similar to what the Bureau of Labor Statistics (BLS) reported nationally for 2022, \$54,620 annually, which is approximately \$6, 000 more than the BLS 2021 annual salary. (8)

In addition to asking a question about annual salary, the 2021 LPN survey included a question asking which benefits the respondents currently received. Overall, approximately half of all respondents indicate that they have a retirement plan (53%), dental insurance (57%), personal health insurance (56%) and life insurance (50%). Less have family health insurance (41%), tuition reimbursement (24%) and 29% do not have any benefits at all. The type of benefits received in addition to the salary varies significantly depending on the type of workplace setting.

The top four workplace settings, where the majority of Illinois LPNs (56%) work are: long-term care (33%), outpatient clinic (13%), assisted living (10%) and home health (9%). The

other types of settings where the majority of LPNS work were rehabilitation (5%), acute care or hospital (6%), school health (4%), correctional (3%) and hospice (1%). The benefits received in each setting are illustrated in Figure 8. Workplace settings not included in Figure 8 due to the small per cent: community health (2%), academic (1%), public health (1%), insurance claims/benefits (1%) and other (11%). Benefit compensation varies by workplace setting. Ambulatory clinics and acute-care hospital settings offer more benefits than other settings. For example, 79% hospitals and 69% clinics offer personal health insurance. 35% home health facilities and 55% long-term care facilities offer personal health insurance.

Survey responses to the question “What would make you delay retirement,” the top three conditions were: better salary (20%), better economic conditions (11%), and a less physically demanding position (12%). About forty per cent of participants did not answer this question.

Figure 8: Compensation Benefits Received by Employment Setting

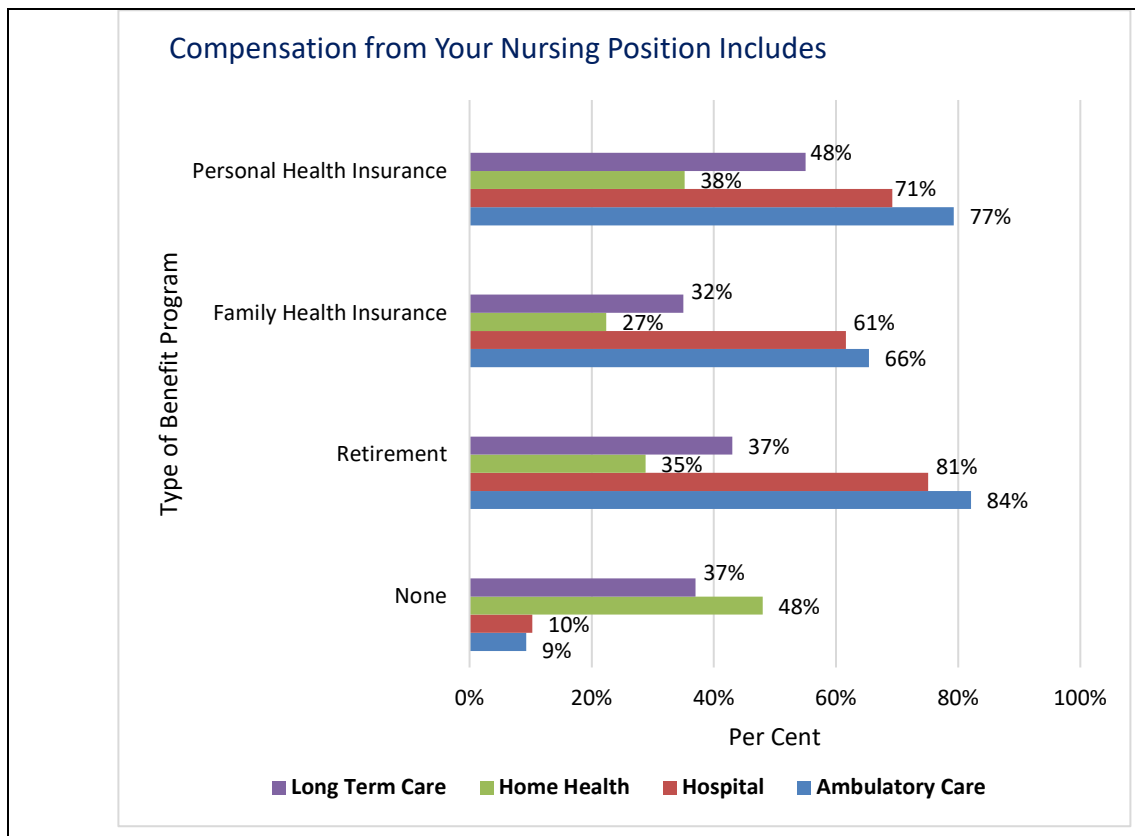


Figure 8: No response n = 2,290

Emerging Trends: Workplace Violence

The Illinois General Assembly (IGA) recently passed the Health Care Violence Prevention Act (Public Act #100-1051) to combat the violence that occurs against health care workers in nearly all care settings. To better understand workplace violence in healthcare settings, three

questions were added to the survey. The questions were prefaced by the Emergency Nurses Association (ENA) definition of violence: an act of aggression directed toward persons at work or on duty, ranging from offensive or threatening language to homicide. Workplace violence is commonly understood as any physical assault; emotional or verbal abuse; or threatening, harassing, or coercive behavior in the work setting that causes physical or emotional harm (9). Both the questions and the definition were used with permission from the Emergency Nurses Association.

Below are the three survey questions with summary of responses; approximately 2,000 respondents did not answer each question.

1. How often have you experienced patient/visitor/family physical or verbal abuse while at work? the range of options began with “on each shift” (10%) through “never” (22%). Weekly (19%), monthly (11%), quarterly (6%), semi-annually (4%), annually (3%), less than annually (13%), I am not currently working (8%).
2. Where have you attended workplace violence training: current facility (46%), other location (16%), both current facility and other location (14%), have never attended training (26%).
3. Does your facility have a policy in place for reporting workplace violence incidents: yes (81%), no (5%), don’t know (14%).

In summary, 46% of LPN respondents reported experiencing physical or verbal abuse (based on the ENA definition) at least quarterly. This is 13% higher than it was in 2021, for LPNs experiencing workplace violence at least quarterly. The per cent nurses who have never attended workplace violence training, 26% is also higher than in 2021. The clear majority, 81% indicated that the facility where they work has a policy for reporting workplace violence.

Limitations

There are several limitations to this survey report. First, different from previous years, data was not collected voluntarily post payment of biennial license renewal fee. An agreement was reached with IDFPR Licensing Section regarding the time of the eblast distributions to Illinois approximately 27,000 LPNs. There were two eblasts distributed to Illinois LPNs in February and March 2023. One eblast on February 16 and one on March 3, 2023, with a total response rate of 31%, 8,367 LPNs. The IDFPR license database collects limited information during the license renewal process, so it is difficult to compare other categories of survey data to the larger Illinois population of LPNs.

Discussion and Implications

Licensed Practical Nurses (LPNs) in our State are an aging workforce, as is the Illinois RN workforce. Forty percent of Illinois LPNs are 55 years of age or older, approximately the same as in 2019, when 45% of Illinois LPNs had reached this age. The median age of Illinois LPNs is slightly older than national average, which is 53 years of age (10). The most common care setting where LPNs practice is in nursing home/long-term care facilities (33%). The large number of older LPNs working in this sector raises serious concerns about the capacity of this group to meet future population's health needs. Adding to this concern are the data indicating that 33% of the group that responded to the retirement question plans to do so in the next ten years.

It is essential for Illinois workforce planning groups to focus on the needs of the non-acute care facilities such as nursing homes, long-term care, assisted living populations. The growth in this care recipient cohort indicates a demand/workforce capacity imbalance. The anticipated growth in the U.S. elderly population is well documented. The 65-and-older population grew by over a third during the past decade, and by 3.2% from 2018-2019 (11). The elderly population will more than double between now and the year 2050, to 80 million. Demand projections for the LPN workforce will depend on the anticipated shift from nursing homes to home health care for the elderly. Long-term employment growth is expected to continue into 2030 (12). Given this demographic trend, with the impending retirement of the LPN workforce, maintaining LPNs in the workforce and recruiting individuals to attend LPN schools should be a priority issue for Illinois workforce planning groups.

In terms of racial and ethnic diversity, 44% of responding LPNs identified themselves as a racial/ethnic minority, while 61% of the respondents are White/Caucasian. Black/African American LPNs are the largest reporting minority group (27%), which is higher than the national LPN average of 17% ([NCSBN Forum], 2022). Compared to 2019 data on the LPN workforce, the LPN cohort appears to be more diverse, and this diversity is clustered in younger age categories (IDFPR/Illinois Nursing Workforce Center, 2021). There is more racial and ethnic diversity amongst LPNs in the younger age ranges. These data suggest that the LPN workforce will continue to become more diverse and representative of our communities.

In terms of gender diversity, seven percent of respondents are male, though 36% of male respondents are under 44 years of age. This is similar to the national average, where data indicate that 8% of the LPN workforce are male and 92% are female. The national study also found increasing proportions of males in more recently licensed cohorts, suggesting higher percentages of males in the LPN workforce in future cohorts (13). While there is a clear need to

increase diversity in the nursing workforce, the LPN group demonstrates positive growth trends in multiple categories.

Nursing home long-term care facilities are the workplaces most respondents indicated as their primary nursing position (33%). This is followed by the ambulatory care or outpatient clinics (13%), assisted living (10%) and home health (9%). These responses are similar to the findings in the 2021 LPN report. In this report the individual responses in the “other” category were reviewed, and if the response better fit in an itemized category – then the response was moved to that category. This decreased the “other” category from 10% to 7%. The range of places worked is quite varied, indicating this workforce skill set fits with a variety of workplace needs.

The most common LPN workplace settings in Illinois are similar to national data: nursing home/long-term care facilities, hospitals, assisted living facilities and home health (14, 15). The findings support a report by Spetz et al, that indicate long-term care employs more LPN/VNs than any other industry (16). The number of LPN/VNs working in long-term care increased from 258,670 in 2008 to 289,946 in 2013, an increase of 13%, while the number of LPN/VNs working in hospitals, outpatient care, and other sectors decreased by 20%. Illinois has LPN data collected with individual on-line license renewal in 2021, 2019, 2017 and 2015 and with the 2023 ebcasts; these data also show that a high per cent of LPNs are employed in the long-term care industry.

Approximately 38% of survey participants report anticipated retirement over the next decade. On this question there were a substantial number, 21% indicating uncertainty with regards to retirement plans, and there were 614 non-responders. A concern is that, of those that work in long term care (LTC), approximately 40% anticipate retiring in ten years.

The overall LPN median earnings nationally increased from \$38,000 in 2015 to between \$55,000 - \$75,000 in 2023 according to the survey data (17). The median national salaries of LPNs differed by employment setting, position title, with LPNs working in rehabilitation having the highest median salary overall, and LPNs working in school health have the lowest. The median national salary for male LPNs is higher than the median salary for females.

The implications for LPN education are reflected in the demand for LPNs in long-term care settings relative to hospitals/acute care settings. LPNs who work in long-term care settings have less direct supervision than their counterparts in hospitals and need to exercise more independent judgment regarding patient care. LPN education programs need to ensure that students obtain sufficient clinical training in long-term care settings and have the critical thinking and communications skills necessary to practice effectively in these settings (Coffman

et al, 2015). There are decreased educational opportunities to replace retiring LPNs outside metropolitan areas, though 44% of LPNs currently licensed received their education in a community college.

The LPN survey data indicate a workforce that is aging with a small younger aged pipeline to replace retiring nurses. Workforce planning needs must consider the LPN traditional roles in nursing homes/long-term care and assisted living facilities as well as in home care along with the continued growth of the elderly population, especially in rural and low-income urban areas. An informed discussion on LPN demand/capacity must also consider the nursing competencies stipulated in evidence based practice (EBP) and often includes team-based care. (18). As we plan for the nursing workforce needed to meet health care demands created by population shifts and health care transformation, it would be helpful to have a better understanding of the drivers for choosing an LPN certification and how we might optimize each individual's interest in a nursing career and expand educational opportunities across the state.

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Appendix A

Questions from the 2023 LPN voluntary license renewal survey

1. What is your gender?
2. Are you Hispanic or Latino?
3. Select one of the following races that applies to you:
4. What year were you born?
5. In what country were you initially licensed as an LPN?
6. For this one question, if another country was your original place of nursing education and licensure, please answer this question, otherwise you may skip this question. If another country was your original place of nursing education and licensure, were you originally licensed in that other country as an RN or an LPN?
7. What is your highest level of education?
8. Are you currently enrolled in a nursing education program leading to a degree/certificate?
9. What is the greatest barrier to continuing your education? (Select only one)
10. What year did you obtain your initial U.S. license?
11. What is the status of the Illinois license currently held?
12. Please list all states or U.S. territories in which you hold an active license to practice as a nurse:
13. Please list all states or U. S. territories in which you are currently practicing as a nurse:
14. Which of the following post-licensure nursing skill-based certifications do you currently have? Check all that apply:
15. What is your employment status? (Mark ALL that apply) If you are not currently working, please skip to Q#16 – next question.
16. If you are unemployed, not currently working as a nurse, please indicate the reason(s): check all that apply:
17. In how many positions are you currently employed as a nurse:
18. Are you required to provide proof of completion of COVID-19 vaccination series to maintain employment?
19. If you have an approved COVID-19 exemption, how often are you required to complete a COVID-19 test to maintain employment?
20. Due to ongoing concerns about nurses' emotional well-being and burnout, many organizations implemented policies directly aimed at the safety, well-being and support of the nursing workforce. Please check which revisions have occurred at your current place of employment since Fall 2020. Please check all that apply.

21. Have you switched jobs since Fall 2020? If yes, please list the type of switch: a different unit, a different employer, a temporary staffing agency, if you are working as a travel nurse, etc.
22. How many hours do you work per week during a typical week in ALL your nursing positions?
23. Please indicate state and zip code of your primary employer:
24. Please identify the type of setting that most closely corresponds to your primary nursing position:
25. Please identify the position title that most closely corresponds to your primary nursing position:
26. Please identify the employment specialty that most closely corresponds to your primary nursing position:
27. Does your compensation from your primary nursing position include (check all that apply):
28. How much longer do you plan to practice as a nurse in Illinois?
29. If you plan to retire within the next 5 years, is there a primary factor that would persuade you to continue working as a nurse, extend your date of retirement? (Select only ONE):
30. Full-time employment: Please answer only if you work full-time. Please estimate your 2021 pre-tax annual full-time earnings from your primary nursing position. Include overtime, on-call earnings, and bonuses.
31. Part-time employment: Please only answer if you work part-time. Please estimate your part-time annual earnings. Report approximate rate for working less than an average of 30 hours of service per week or 130 hours of service per month.
32. How often have you experienced patient/visitor/family physical or verbal abuse while at work?
33. Where have you attended workplace violence training?
34. Does your hospital/facility have a policy in place for reporting workplace violence incidents?

Appendix B

Survey Eblast wordings

Date: February 16, 2023

Subject line: Licensed Practical Nurse (LPN) License – data collection from licensee:

We are requesting approximately 5 minutes of your time. All data will be reported in the aggregate for use in determining nursing workforce projections and needs in Illinois. Individual responses will remain anonymous and confidential. Although this report is not mandatory, your participation is critical, since employees in the field are our best and most reliable real-time source of information available. By participating in this report, you will be helping to ensure that there will be an uninterrupted supply of nurses to meet the increasing future demands in the healthcare industry.

Please click here to participate in the [survey](#)

Date: March 3, 2023

Subject line: Licensed Practical Nurse (LPN) License – data collection from licensee:

We are requesting approximately 5 minutes of your time. Deadline for survey submission March 17, 2023. All data will be reported in the aggregate for use in determining nursing workforce projections and needs in Illinois. Individual responses will remain anonymous and confidential. Although this report is not mandatory, your participation is critical, since employees in the field are our best and most reliable real-time source of information available. By participating in this report, you will be helping to ensure that there will be an uninterrupted supply of nurses to meet the increasing future demands in the healthcare industry.

Please click [here](#) to participate in the survey.

If you have already completed this survey, thank you, you do not need to complete the survey a second time.

Appendix C

Licensed Practical Nurses (LPNs) Ages

Age Ranges by Birth Year	LPN Active Licensees*	Per Cent of Respondents	Difference	LPN Survey Responses**	Per Cent of Respondents
17-24 yrs/ 1998-2005(6)	654	2.90%	AL: +1.21%	138	1.69%
25-34 yrs/ 1988-1997	4,016	17.78%	AL: 7.52%	836	10.26%
1978-1987 35-44 yrs	5,871	26.0%	AL: +3.48%	1,835	22.52%
1968-1977 45-54 yrs	5,646	25.0%		2,061	25.29%
1958-1967 55-64 yrs	4,778	21.15%	Survey: +3.22%	1,986	24.37%
1952-1957	1,539	6.81%	Survey: +4.86	951	11.67%
1941-1951	605	2.68%	Survey: +1.39%	332	4.07%
1925-1940	20	0.09%		11	0.13%
					Survey request sent to 27,023 emails
LPN total	23,129	Per Cent Respondents	Difference	8,367	31%

*LPN active licensee data includes LPNs licensed as an LPN, with a date of birth, and includes both those physically living in Illinois and those not living in Illinois.

**The 2023 LPN Survey was sent by Eblast February 16 and March 3, 2023, to approximately 27,023 actively licensed Illinois LPNs. The survey was sent to those that both have an Illinois address and those that do not. The survey portal was closed March 21, 2023. For this question about age/date of birth, approximately 217 survey participants or 3% did not respond. A total of 8,367, approximately 31%, of Illinois LPNs participated in the supply survey questions, including this question about age.

Summary:

Slightly more LPNs over 55 years of age responded to the 2023 LPN voluntary survey than younger LPNs.

The LPN survey shows that approximately 40% LPNs age 55 years and older completed the survey. The survey was sent by email to LPNs physically living in Illinois, and those that are licensed as LPNs in Illinois but do NOT live in Illinois. The IDFPR/DPR LPN Active Licensee database, done June 2023, shows that less, approximately 31% of the IL LPN workforce is 55 years of age or older. This data includes those physically living in Illinois and those living outside of the state.

Appendix D

Licensed Practical Nurses (LPNs)* per Illinois County

County (Est) Population June 2023	Illinois County	2023 LPN per county (Est June 2023)
65,326	Adams	1,435
4,340	Alexander	183
16,413	Bond	171
53,232	Boone	310
6,037	Brown	90
32,725	Bureau	376
4,242	Calhoun	50
15,798	Carroll	137
12,862	Cass	248
207,299	Champaign	1,302
33,801	Christian	563
15,191	Clark	308
13,129	Clay	228
36,641	Clinton	353
44,760	Coles	676
529,9802	Cook	29,954
18,337	Crawford	440
10,270	Cumberland	161
98,998	De Kalb	551
15,204	De Witt	148
19,668	Douglas	189
937,662	Du Page	3,236
16,353	Edgar	233
6,101	Edwards	141
34,797	Effingham	493
21,293	Fayette	260
13,369	Ford	159
37,276	Franklin	1,210
32,571	Fulton	706
4,754	Gallatin	275
11,415	Greene	253
53,274	Grundy	348
7,855	Hamilton	240
17,176	Hancock	321
County (Est) Population June 2023	Illinois County	2023 LPN per county (Est June 2023)

County (Est) Population June 2023	Illinois County	2023 LPN per county (Est June 2023)
3,448	Hardin	219
6,105	Henderson	102
48,924	Henry	608
26,285	Iroquois	379
50,802	Jackson	1,073
9,164	Jasper	164
36,600	Jefferson	846
21,071	Jersey	243
21,843	Jo Daviess	161
13,527	Johnson	405
516,897	Kane	1,766
105,717	Kankakee	1,218
137,008	Kendall	335
49,082	Knox	1,166
717,606	Lake	1,162
108,377	La Salle	2,535
14,815	Lawrence	319
33,578	Lee	553
34,873	Livingston	417
27,291	Logan	434
25,627	McDonough	1,762
310,670	McHenry	659
171,368	McLean	2,283
101,967	Macon	777
44,127	Macoupin	115
264,833	Madison	232
37,216	Marion	317
11,472	Marshall	421
12,612	Mason	1,123
13,791	Massac	1,099
12,174	Menard	155
15,477	Mercer	181
35,562	Monroe	232
27,742	Montgomery	425
32,126	Morgan	611
14,430	Moultrie	235
51,275	Ogle	400
County (Est) Population June 2023	Illinois County	2023 LPN per county (Est June 2023)

County (Est) Population June 2023	Illinois County	2023 LPN per county (Est June 2023)
180,432	Peoria	1,634
20,525	Perry	509
16,655	Piatt	177
14,232	Pike	286
3,550	Pope	150
4,902	Pulaski	179
5,526	Putnam	77
29,170	Randolph	691
15,687	Richland	406
143,811	Rock Island	1,251
253,602	St Clair	2,469
23,426	Saline	1,037
196,007	Sangamon	2,486
6,710	Schuyler	145
4,826	Scott	123
20,579	Shelby	352
5,223	Stark	69
43,706	Stephenson	508
130,128	Tazewell	1,099
17,706	Union	587
71,956	Vermilion	1,412
11,184	Wabash	326
16,574	Warren	295
13,473	Washington	306
16,005	Wayne	431
13,640	White	480
54,848	Whiteside	804
701,995	Will	3,470
67,393	Williamson	1,611
282,374	Winnebago	2,167
38,407	Woodford	295
County (Est) Population June 2023	Illinois County	2023 LPN per county (Est June 2023)

IDFPR Active Licensee data: June 1, 2023: licensed as an LPN: 22,589, this number may include active licensee LPNs without an address in the database.

Summary: The above grid of the number of Licensed Practical Nurse Active Licensees (LPNs) per each of the Illinois 102 counties was completed June 2-6, 2023. The grid includes nurses that have a name, date

of birth, and an address including zip code in Illinois. The county address is based on the address that the LPN submitted with either license application or license renewal. Historically, the address is either where the nurse licensee lives or works - especially if the employer pays the licensure fee.

The June 2023 population number of individuals per county is from Illinois population by counties 2023 weblink <https://worldpopulationreview.com/states/illinois/counties>

Illinois population by counties 2023 <https://worldpopulationreview.com/states/illinois/counties>