To meet the health needs of Native Americans, the Indian Health Service (IHS) administers a large community health and medical care program, operating 51 hospitals, 99 health care centers, and 108 health stations in 24 states. Registered nurses can be employed by the IHS through either of two systems: the Commissioned Corps of the U.S. Public Health Service or the Federal Civil Service. Starting salaries range from $9,000 to $15,000 and nurses may choose their job location and health care setting within a wide range of clinical and specialty nursing positions. Nursing assignments include hospital care, ambulatory care, community health, or work as a family or pediatric nurse practitioner, midwife, or anesthetist. School, research, and mental health nurses are also needed, as are nurse educators. Further career development is possible through inservice training, paid leaves for post-graduate training, promotion, and relocation. This booklet describes the types of nursing careers available through the IHS, lists requirements and benefits of the 2 employment systems, and describes the 11 IHS areas, the populations they serve, and the types of health care offered within each area.
WHERE NURSING COUNTS
Careers for Nurses in the Indian Health Service
DO YOU WANT A CHANCE TO GROW IN NURSING?

Join us in the Indian Health Service

Help meet the health needs of the Native American patients we serve.

You can be employed if you are a qualified R.N. We hire nurses under two systems: the Commissioned Corps of the U.S. Public Health Service, and the Federal Civil Service.

Starting salaries range from $8,000 to $16,000 depending on individual qualifications.

You can choose your location and health care setting from a wide variety of clinical and specialty nursing positions. American Indian professional nurses are especially needed and preference is given to Indian candidates.
ARE YOU INTERESTED IN THE CHALLENGE?

The sad facts are, despite progress, Indians still live in an environment characterized by inadequate and understaffed health facilities, improper or nonexistent waste disposal and water supply systems and continuing dangers of deadly or disabling disease.

- The incidence of tuberculosis is 4 to 6 times higher for American Indians and Alaska Natives than for the total U.S. population.
- The rate for diabetes is at least 3 times as high.
- Infant mortality is 1.5 times the national average while the birth rate is 2 times the general population.
- Maternal mortality is 3.6 times as high compared with 19.5 for white women per 100,000 live births.
- Suicides are 2 times the figures for the total U.S.

Respiratory disease, otitis media, cholecystitis, venereal diseases—all are significantly higher in the native American population.

And finally, life expectancy for the average American is 70.8 years while the Indian and Alaskan native expect 65.1 years.

To help meet the challenge facing Native Americans, the Indian Health Service administers a large combined community health and medical care program. It operates 51 hospitals, ranging in size from 6 beds to 183 beds, 99 health centers, including school health centers, and 108 health stations. These facilities are located in 42 states, including Alaska, with the majority located on reservations west of the Mississippi River. A detailed listing appears on Page 14.

The entire structure of IHS is built to act as the Indians' advocate, while offering every assistance to Indian efforts in the staffing and management of their own health programs. Emphasis is on Indian leadership in health activities and on closing the health gap between Indians and the rest of the population in the shortest possible time.

One way of doing this was provided with the recent passage of the Indian Self-Determination and Education Assistance Act (P.L. 93-638). This law provides Indian people with the unique opportunity to assure control of their own programs through contracting directly with nurses. Thus, in the future, IHS nursing personnel could be offered direct employment opportunities with specific tribal groups.
WHAT WOULD YOU LIKE TO DO?

Pick From a Variety of Nursing Assignments

Hospitals

A variety of programs offers the Indian Health Service nurses great flexibility and freedom in choice of work.

All IHS facilities provide generalized medical care, of course, but there are opportunities in the larger hospitals to work in specialized areas such as intensive care, pediatrics, obstetrics, psychiatric, and detoxification units. The challenges in the smaller hospitals come from providing care to patients from the various clinical services simultaneously. Many of the hospitals provide valuable clinical experience to students in professional nursing programs.
Ambulatory Care Nurse

Nurses encounter a greater variety of clinical conditions in the ambulatory care facilities of the Indian Health Service than in other health programs in the country. The **ambulatory care nurse** provides skilled nursing care in both emergency and non-emergency situations; provides triage services; assists the patient in carrying out the prescribed orders; and arranges for and manages clinics.

All hospitals have an extremely active outpatient department where preventive, diagnostic, therapeutic and restorative services are provided. In addition, mental health, alcoholism, otitis media, trachoma, family planning, diabetes and tuberculosis programs are made available to Indian and Alaskan native people to respond to priority health care needs.
Community health nursing is a family and community nursing specialty which utilizes the philosophy, content and methods of public health and the knowledge, judgment and skill of professional nursing. The CHN has a unique role in providing comprehensive community nursing services as she functions in the Indian consumer's home; the CHN office; the clinic; multidiscipline team conferences; the Bureau of Indian Affairs school and/or public school; tribal health committees; community meetings for health education; and other community health activities.
Nurses may also choose to serve in an expanded role as a family nurse practitioner or pediatric nurse practitioner in one of the varied primary health care settings. She assures a continuum of care—maintenance of health, evaluation and management of illness, health guidance, and appropriate referrals. The practitioner may work directly with the physician or at a great distance connected to the physician only by telephone.

Another expanded role is the certified nurse midwife who provides antepartum, intrapartum and postpartum care geared to the individual needs of the mother and family. The nurse midwife provides continuous physical and emotional support. Independently evaluates the patient's progress, and manages normal labor and delivery. The nurse midwife provides immediate and continued well-child supervision of the mother in the postpartum, gynecological and family planning clinics. Her services are very culturally and family-oriented.

Family Nurse Practitioner and Pediatric Nurse Practitioner

Nurse Midwife
The Indian Health Service utilizes the **nurse anesthetist** in the hospitals in which there is a surgical suite. In administering anesthetic agents and supportive treatments to patients undergoing surgery, these nurses have both formalized training and progressively responsible clinical practice. They must have ability to work independently yet work effectively with patients and surgeons.
The school nurse provides nursing services in the schools and dormitories of the Bureau of Indian Affairs, Department of the Interior. She has a distinct role in the provision of health education and health curriculum development for students as well as for the dormitory staff. The school nurse has the opportunity to provide a continuum of care for the student through the school health center. Additional preparation in public health nursing or school nursing is necessary.

In the Indian Health Service, new techniques for health care delivery, reporting systems, and manpower resources utilization are being developed to provide additional insights into the improvement of health care planning, programming, implementation and evaluation. The research nurse participates in these ongoing activities. In addition, there are opportunities in clinical research at various facilities and/or in conjunction with National Institutes of Health field activities.
Mental Health Nurse

As the Indian people have been caught more and more in the conflict between their old, traditional culture and the demands of modern American society, health problems have increased. To meet the need, professional mental health programs have rapidly expanded, and most of the community mental health care is provided by trained Indian mental health workers. There are opportunities for prepared community mental health nurse consultants and in-patient psychiatric nurses in a limited number of psychiatric units.

Nurse Educator

Professional education, training and career development is a large component of the Indian Health program. Nurse educators provide training to allied health workers such as community health representatives (CHR's), tutor students and coordinate programs for qualified licensed practical nurses enrolled in professional schools of nursing. They function as In-service directors in hospitals, monitor career development plans and continuing education geared to the needs of the professional and non-professional staff. In addition, they teach the advanced community health nursing program for LPN's.
WHAT ARE THE TRAINING OPPORTUNITIES?

Following assessment of a nurse's potential, a training and experience career development program is planned.

Professional in-service training and education are provided for all nursing personnel. Programs include: orientation, monthly in-service meetings, and continuing education in areas such as coronary care nursing, pharmacology review and cardiopulmonary resuscitation.

Post-graduate training is available, and nurses are encouraged to continue their education. One year's leave for education on full-pay status is available on a limited basis after three years of Civil Service employment. Indian Health Service provides community health nurse internships for a limited number of qualified nurses. Attendance at professional meetings is encouraged and supported.

As a part of a career ladder, a nurse may be promoted as a result of training and education or through established on-the-job promotion programs. Depending upon choice and ability, a nurse may advance to a supervisory, teaching, or administrative position or may choose to enter hospital or health services administration.

Another contributory factor toward professional advancements is the ease of relocating to another IHS facility which may offer greater career opportunities.
WHICH EMPLOYMENT SYSTEM IS BEST FOR YOU?

Appointments are made through one of two personnel systems. They are the U.S. Public Health Service Commissioned Corps and the Federal Civil Service. Each has its advantages, depending upon individual circumstances. (There is no time commitment made upon entry into either employment system.)

PHS Commissioned Corps

Rank is based upon number of years of qualifying education and experience. Nurse officers are periodically considered for promotion through the mechanism of an annual review. Pay and allowance are determined by rank and length of creditable service. Starting salaries range from $12,000 to $15,000.

Minimum Requirements for Appointment
1. United States citizenship
2. Graduation from an approved school of nursing
3. Bachelor's degree from a recognized college or university in nursing
4. Physical eligibility, as determined by a Medical Review Board after examination at a Public Health Service facility

Benefits
- Choice of assignment/location
- Longevity pay increases
- Transportation and moving expenses paid by the Federal Government
- Annual leave of 30 days
- Sick leave as needed
- Full medical care for officers and dependents
- Low cost Group Life Insurance
- Retirement pay, based upon rank and length of service, earned with no contributions by the individual. Twenty year retirement option
- Use of Commissary and Post Exchange facilities
- Officers' club privileges
- Federal income tax calculated on base pay only (exclusive of rental and subsistence allowance)
Civil Service

Pay scales in most localities are adjustable to make them comparable with local salaries. Fringe benefits approximate another third of the salary. Appointment grade and salary are based upon education and experience, and upon the level of the position to which assigned. Starting salaries range from $9,000 to $15,000. Salary increases within grade and promotions to higher grades are considered at regular intervals.

Minimum Requirements for Appointment

1. United States citizenship
2. Graduation from an approved school of nursing
3. Active, current registration as a professional nurse in a State, District of Columbia, the Commonwealth of Puerto Rico, or a Territory of the United States. (An applicant who has recently graduated from a school of professional nursing may be appointed at the entrance grade level for which qualified, pending attainment of State registration as a professional nurse within six months after appointment)
4. Physical eligibility

Benefits
- Choice of assignment location
- Overtime pay
- Premium pay for work on Sundays and holidays
- Shift differential pay for hours worked between 6 p.m. and 6 a.m.
- Longevity pay increases
- Merit pay increases
- Low cost health insurance with premium payments shared by the Federal Government
- Low cost Group Life Insurance
- Retirement plan, with payments shared by the Federal Government
- Uniform allowances
- Annual leave of 13-26 work days
- Sick leave of 13 work days per year
- Emergency medical care when injured or taken sick in the line of duty
- Transportation and moving expenses to the majority of locations paid by the Federal Government

Nursing Students

Under the employment system you can be eligible for nursing educational loan repayment. Employment at most Indian Health sites for a minimum of five consecutive years qualifies nurses for repayment of 50 percent of any educational loan incurred in their professional study. An additional third year of consecutive service would qualify the nurse for repayment of an additional 25 percent repayment by the Federal Government.

Further information on loan repayment or loan cancellation may be obtained from the Loan Repayment Program, Bureau of Health Manpower, U.S. Department of Health and Human Services, Building 31, Room 4C27, 9000 Rockville Pike, Bethesda, Maryland 20892.
WHERE WOULD YOU LIKE TO WORK?

Positions are available in all eleven IHS Areas. For general information or application forms, return the card on the back cover of this booklet to the Headquarters Office of the Indian Health Service.

If you wish specific information on a particular area, you may write directly to the IHS Area Office, as each has its own recruiting responsibility for the geographic area under its jurisdiction.

WASHINGTON HEADQUARTERS:
Indian Health Service
Nursing Services Branch
5600 Fishers Lane
Rockville, Maryland 20857
Telephone (301) 443-184O

ABERDEEN, South Dakota (Iowa, North Dakota, South Dakota, Nebraska)
Located in the northern prairies of Nebraska, North and South Dakota, the Aberdeen Area serves the Sioux, Chippewa, Omaha and Winnebago tribes. The Area has 9 small hospitals ranging from 24 beds to 84 beds, 4 Indian Health Centers and 2 school health centers.
Write to:
Indian Health Area Office
115 4th Avenue, S.E. Federal Building
Aberdeen, South Dakota 57401

ALBUQUERQUE, New Mexico (New Mexico and Colorado)
The Apache, Ute, and Pueblo Indians receive comprehensive health care through the four hospitals ranging in size from 15 to 64 beds, four health centers and two school health centers in New Mexico and Colorado. Located in the cultural heart of the southwest, you will live in a tri-ethnic (Indian, Spanish, and Anglo) community where the mountain air is always clean and fresh.
Write to:
Indian Health Area Office
Room 4005 Federal Building and U.S. Courthouse
500 Gold Avenue, S.W.
Albuquerque, New Mexico 87101

ANCHORAGE, Alaska (Alaska)
The “Great Land” – the 49th and largest state – has nine hospitals (6-17Q beds), seven ambulatory health centers and a school health center, all serving Alaskan native clientele – Eskimos, Aleuts and Thlinget, Haida, Athabascan and Tsimshian Indians. Health care delivery challenges in providing comprehensive health services are everywhere in the seven Native Health service units which collectively cover this state. Nursing in either the specialized urban or generalized “bush” hospitals can be a stimulating and rewarding experience.
Write to:
Alaska Native Health Service
P.O. Box 7-741
Anchorage, Alaska 99510

BEMIDJI, Minnesota (Minnesota, Michigan, and Wisconsin)
Located in the beautiful northern states of Michigan, Minnesota, and Wisconsin, where outdoor sports activities abound year round, the Area offers you the challenge of helping the health care needs of the Menominee, Oneida, Wisconsin Winnebago, Chippewa, Sioux, Potowatomi, and Stockbridge-Munsee tribes. The Area has two small hospitals of 24 and 30 beds, one Indian Health Center, and four tribal community health development projects.
Write to:
Indian Health Program Office
203 Federal Building
Box 768
Bemidji, Minnesota 56601

BILLINGS, Montana (Montana and Wyoming)
Join the Billings Nursing staff in the mountainous state of Montana and Wyoming in providing care to the Crow, Northern Cheyenne, Assiniboine, Gros Ventre, Chippewa, Cree, Sioux, Flathead, Blackfeet, Arapahoe and Shoshone tribes. The Area has three small hospitals with 18 to 34 beds, 7 health centers and one school health center.
Write to:
Indian Health Area Office
2727 Central Avenue or P.O. Box 2143
Billings, Montana 59103
NASHVILLE, Tennessee
United Southeastern Tribes
(Florida, Mississippi, North Carolina, New York)
The United Southeastern Tribes (USE T) are a group of affiliated tribes with IHS facilities in Florida, Mississippi and North Carolina and tribal programs in Louisiana and New York for the Seminole, Miccosukee, Choctaw, Cherokee and Seneca tribes. There are two hospitals, 26 and 34 beds, four health centers and three health stations staffed by nurse practitioners.

Write to:
Indian Health Service
Corks Tower Building South 810
11G1 Kermit Drive
Nashville, Tennessee 37217

OKLAHOMA CITY, Oklahoma
(Oklahoma, Kansas, Mississippi, North Carolina, South Carolina, and Florida)
Oklahoma and Kansas range from rolling prairies and mesas to lush forests and mountains with lakes and parks to satisfy your outdoor enthusiasm. Oklahoma has only one reservation, but more Indian residents than Arizona. The Iowa, Kickapoo, Sac and Fox, Cherokee, Choctaw, Cheyenne and Arapahoe, Chickasaw, Caddo, Comanche, Delaware, Kowa, Wichita, Creek, Ponca, Osage, Quapaw, and Shawnee tribes receive health care in six hospitals ranging in size from 14 to 52 beds, 14 health centers, and five school health centers.

Write to:
Indian Health Service Office
Federal Building, Room 476
1220 S.W. 3rd Avenue
Portland, Oregon 97205

PHOENIX, Arizona
(Arizona except Navajo Reservation, Nevada, Utah, and California)
Join us where the seasons are the sunniest, and where the mountains and deserts abound in the states of Arizona, California, Nevada, and Utah. The Apache, Havasupai, Hopi, Cocopah, Pima, Mohave, Chemehuevi, Quechan, Maricopa, Yavapai, Palute, Hualapai, Washoe, Shoshone, Ute, and Uintah tribes are provided health care in nine hospitals ranging in size from 17 to 191 beds, seven health centers, and three school health centers.

Write to:
Indian Health Service Office
801 East Indian School Road
Phoenix, Arizona 85014

PORTLAND, Oregon
(Oregon, Washington, and Idaho)
The Bannock, Shoshone, Nez Perce, Confederated Tribes of Warm Springs and Umatilla, Ozette, Quileute, Colville, Chehalis, Yakima, Puyallup, Lummi and Nooksack live in the Northwest states of Washington, Oregon, and Idaho. There are nine health centers and one school health center but no hospitals.

Write to:
Indian Health Area Office
Federal Building, Room 476
1220 S.W. 3rd Avenue
Portland, Oregon 97205

TUCSON, Arizona
(Papago Reservation in Arizona)
The Office of Research and Development is the IHS research component and provides direct care to the Papago Indians at the Sells Hospital (40 beds), and two health centers. The Desert Willow Training Center for the IHS staff, tribal auxiliary and ancillary employees is located nearby.

Write to:
Office of Research and Development
Indian Health Service
P.O. Box 11340
Tucson, Arizona 85734

WINDOW ROCK, Arizona
(Navajo Area
(Arizona, New Mexico, Utah)
Join us in the high plateau country of Arizona, New Mexico and Utah where the Grand Canyon is less than a day's travel and outdoor activities are possible 365 sunny days of the year. The Navajo, which is the largest present day Indian tribe, receive care in six hospitals ranging in size from 40 to 181 beds and 10 health centers. Health services are also provided at 34 other Indian Health Service facilities, 11 of which are adjacent to schools. The remaining 23 are located in rural communities and services are provided at weekly or bi-weekly intervals by health personnel.

Write to:
Navajo Area Indian Health Service
P.O. Box G
Window Rock, Arizona 86515
Please send me necessary forms to apply for a nursing position in the Indian Health Service.

Name __________________________________________

Address _______________________________________

Check One

☐ CIVIL SERVICE  ☐ COMMISSIONED CORPS

Indicate area of specialty training (if any)