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COMMITTEE MEMBERS AND OFFICE OF EDUCATION STAFF MET WITH RESOURCE PERSONS IN HEALTH OCCUPATIONS AREA. HIGHLIGHTS OF THE SPECIALISTS REPORTS ARE--BY 1970, 60 TO 70 THOUSAND MEDICAL TECHNOLOGISTS WILL BE NEEDED. PROGRAMS DEVELOPED IN TECHNICAL AND HIGH SCHOOLS AND COMMUNITY COLLEGES ARE ALL NEEDED TO REACH THIS GOAL. SHORTAGES OF QUALIFIED TEACHERS LIMIT THE OUTPUT OF REGISTERED PHYSICAL THERAPISTS. TRAINING OF ASSISTANTS IS BEING EMPHASIZED. MANY MORE PERSONS NEED TO BE TRAINED IN PROSTHETICS AND ORTHOTICS. GUIDES FOR INSTRUCTION AND TEACHING MATERIALS ARE BEING DEVELOPED SLOWLY. THE DEVELOPMENT OF CHAINS OF NURSING HOMES WILL STIMULATE THE DEMAND FOR BOTH PROFESSIONAL AND SUBPROFESSIONAL PERSONNEL. ADDITIONAL SCHOOLS, QUALIFIED TEACHERS, AND OPERATING FUNDS ARE NEEDED FOR TRAINING DENTAL ASSISTANTS. PROJECTS FUNDED UNDER 4(C) OF THE VOCATIONAL EDUCATION ACT OF 1963, INCLUDING A RECRUITMENT FILM, WERE REPORTED. THE COMMITTEE SUPPORTED A MOTION THAT THE U.S. OFFICE OF EDUCATION SHOULD SUPPORT BOTH PRACTICAL NURSE EDUCATION AND THE 2-YEAR ASSOCIATE DEGREE NURSING PROGRAM. IT WAS GENERALLY FELT THAT APPROVAL FOR USE OF FEDERAL VOCATIONAL EDUCATION FUNDS FOR HEALTH OCCUPATIONS TRAINING PROGRAMS SHOULD BE BASED ON A SHOWING OF QUALITY IN ACCORD WITH ACCREDITATION STANDARDS WHERE AVAILABLE. COMMITTEE RECOMMENDATIONS CONCERNED PREPARING A POSITION PAPER ON CAREER LADDERS AND CIRCULATING A STATEMENT SUPPORTING PRACTICAL NURSING AND ASSOCIATE DEGREE NURSING PROGRAMS. (BS)
REPORT OF NATIONAL ADVISORY COMMITTEE ON HEALTH OCCUPATIONS EDUCATION
March 10-11, 1966

Present: (Committee Members)
Elwood F. Davidson
Loretta E. Heidgerken
Robert E. Kinsinger
Cornelia Knight
Norman P. Mitby

Etta B. Schmidt
Leo W. Simmons
Rose C. Thomas
Walter M. Arnold, Chairman

Resource Persons Participating:
Janet Burnham
Lois Kryger
Florence Linduff
Paul O'Connor
George Stevenson

Division of Dental Public Health and Resources
Division of Dental Public Health and Resources
Vocational Rehabilitation Administration
Division of Medical Care Administration, PHS
National Committee for Careers in Medical Technology

OE Staff Members:
Robert Hermann
David Bushnell
Jack Billings
Earl M. Bowler
Orieanna C. Syphax
Helen K. Powers
Dr. Arnold welcomed the group for the U.S. Commissioner of Education and described the program of work to which the Committee would address itself during the two day meeting.

**REVIEW OF PRIOR ACTIONS**

Actions taken at the previous meeting of the Committee, October 28 and 29, 1965, were reviewed and a progress report made on their implementation.

In discussion of the Committee's previous recommendation concerning implementation of Associate Degree Nursing Education under the Vocational Education Act of 1963, and the maintenance of high standards in these programs, attention was directed to the departmental position on accreditation as stated in letters addressed to the American Nurses Association and to Senator Yarborough from Under Secretary Wilbur J. Cohen. (See attachment #1). Dr. Arnold reported for the Division of Vocational and Technical Education and reviewed progress in staffing regional offices. Information on vocational and technical regional conferences, scheduled by the USOE, was also shared with the Committee.

In accord with the Committee's earlier request, a series of reports from specialists in the health occupations area were presented. These included the fields of medical technology, occupational therapy, physical therapy, dental hygiene, and dental assisting.

**OVERVIEW, MEDICAL TECHNOLOGY**

Dr. George Stevenson described development of the occupation, medical laboratory assisting. As early as 1920, physicians used the medical technologist to assist them. A pattern for training and utilizing laboratory assistants was established by the University of Minnesota and, in 1953, a board was set up for certification of the medical laboratory assistant. Today, there are 112 accredited schools preparing certified laboratory assistants.

Medical technology programs are conducted by colleges. Currently, between 700 and 900 operating programs of medical technology are accredited by the American Medical Association. An established trend in this field is removal of training from hospital control and structuring of the one-year clinical experience under the school's control.

Questions were raised concerning the need for an intermediate category, such as the medical laboratory technician, and the possibility of developing a "career ladder" that would provide for progression from laboratory assistant to clinical pathologist. Dr. Stevenson expressed the opinion that, while there is interest in progression and sympathy for "not boxing people in" at each level, there are practical problems in the education and utilisation of workers. The need for improved counseling and more career information was stressed. Moreover, many health occupations are not very well identified, especially those training programs that are conducted on-the-job. Consequently, potential trainees have difficulty making appropriate career plans.
Dr. Heidgerken pointed out that, in a democracy, there is opportunity for individuals to move vertically or laterally. This should not be confused with needs in an occupation or educational objectives of a program.

Dr. Thomas stressed the fact that the individual may select either short or long term goals that involve a particular occupational objective, but educational programs would have difficulty trying to serve both at the same time.

Dr. Kinsinger suggested that a position paper be prepared for the purpose of setting forth the concept of career ladders. The paper should present both positive and negative aspects of the topic. In California and in New York, a small percentage of programs are attempting to use a "ladder" system.

Dr. Stevenson observed that the junior college system offers a framework for a "ladder system." Plans are underway to initiate a ladder approach in four community colleges - Bend, Oregon; Phoenix, Arizona; Lansing, Michigan; and Miami, Oklahoma. Montgomery Community College in Maryland also provides a "ladder system" in selected curriculums.

In continuing his report, Dr. Stevenson stated that the one year C.L.A. program presently is hospital based and heavily oriented to the development of required skills. However, in the community college program, students can complete one year, qualify as a C.L.A. and be employed; they can then return for one more year of the college program, follow it with one year of hospital based training, and qualify as technicians. Practically speaking, this would be undesirable when only one more year is required to prepare a registered medical technologist. At present, none of the C.L.A. or technician training is acceptable toward baccalaureate preparation for a registered medical technologist.

The goal for preparation of technicians in this field calls for 60 to 70 thousand by 1970. Programs developed in technical schools, high schools and community colleges are all needed to reach this goal.

Summary of problems identified by Dr. Stevenson:

1. The field is very new. Certified laboratory assistants are not well known to employers or to school counselors. Some opposition to these is found even in the medical field.

2. Undesirable programs are being operated by commercial schools.

3. Liaison problems between employers and educators have not been resolved. Advisory Committees can help. For example, Florida's State Department of Education Advisory Committee has issued guidelines for use in the State.
4. Lack of funding for established schools limit their potential. Many train 2-4 students instead of the 12-15 that should be enrolled.

5. Selection of students has depended on their qualifying on the GATB at college level. This is probably expecting too much for this level of worker.

6. Teaching methods leave much to be desired. Technologists follow an "apprenticeship style" that perpetuates errors and misinformation.

7. Programs for C.L.A.'s are illegal in California where State licensure law requires students to obtain a permit to enroll in medical technician training in a State approved school. Upon completion of training, the graduate may qualify for a State license to practice as a medical technician.

PHYSICAL THERAPY

Mr. Paul O'Connor and Miss Florence Linduff presented an overview of needs in the field of physical therapy and occupational therapy, and the current status of assistants to the professionals in these groups. The present supply of registered physical therapists, according to a "head count" conducted by the Public Health Service, is quite inadequate. In July 1965, it was estimated that 20,000 professional physical therapists were needed. Some 8,000 advertised jobs went unfilled for more than a year. R.P.T.'s are licensed in 49 States, D.C., and Puerto Rico. Reciprocity is provided among jurisdictions. Courses for R.P.T.'s are approved jointly by the American Medical Association and the American Physical Therapy Association, with exception to this in New York and California. Shortages of qualified teachers, rather than students, limit the output of R.P.T.'s.

Assistants to R.P.T.'s are designated by one of two titles--aides or assistants. The trend in providing auxiliaries is toward two levels, the aide and the technician with the latter prepared at the community college level.

Occupational therapy has provided for the professional (OTR) and the assistant designated as a C.O.T.A. or certified occupational therapy assistant. There are currently 13 programs for the training of C.O.T.A.'s. One program, in Pennsylvania, provides a two year technician program that is open ended. Two out of 8 students in one class elected to remain in the school and earn baccalaureates in this field.

The C.O.T.A. has a three month training program; students must be high school graduates, and must be between 18 and 45 years of age. The course of study is intensive and prepares for work in nursing homes, psychiatric hospitals, and other long term care facilities.
In the fields of Orthotics and Prosthetics, technical level workers are prepared at the community college level. Following World War II, various levels of workers, from engineer to technician, were involved in this area. New York University now offers a four-year program. Other schools offer programs of nine months, two-years, or four-years, leading to certification by the professional membership organizations for prosthetists and orthotists.

Training programs are expensive, but many more persons need to be trained in prosthetics and orthotics. One contributing factor in training programs, patients are paid to serve as models for the learners.

Guides for instruction and teaching materials are being developed slowly in the above fields. Consulting services from Public Health Service are presently made available to employers wishing to use these workers. It was suggested that commercial publishers be encouraged to provide much needed materials for these and other similar areas.

The development of nursing homes, such as the new "chains" of homes operated by Holiday Inn and the Americana, will stimulate the demand for both professional and sub-professional personnel in health occupations such as Occupational and Physical Therapy. Currently R.P.T.'s number about 9,000 active and 2,250 inactive in the nation.

DENTAL AUXILIARIES

Mrs. Janet Burnham and Miss Lois Kryger gave an overview of dental auxiliary training and utilization (See attachment #2). Problems identified by the speakers included the following:

1. Additional schools are needed.
2. Shortages of qualified teachers limit training opportunities.
3. Training facilities are costly and sources of funds are limited.
4. Counseling for youth in schools is inadequate.
5. Operating funds should be greatly expanded.

Special legislation was suggested as a means to stimulate program development through:

1. Construction grants.
2. Operating funds for schools.
3. Stipends for students.
4. Traineeships for faculty.
Mr. Mitby raised a question concerning teacher training for teachers of dental auxiliaries and the necessity to provide a clinical setting for the instruction. Miss Burnham suggested that a university conducting teacher training could use facilities of various schools such as those for the deaf, the blind, and the retarded, or patients could be recruited from these and other sources to come to the university where a clinic is to be operated in conjunction with the teacher training.

**RESEARCH UNDER 4(C)**

Mr. David Bushnell discussed various strategies that are being employed in the research program to promote expansion of health occupations training. Projects funded under 4(c) of the Vocational Education Act of 1963, and others under consideration, were highlighted. (See attachment #3). Among these, Mr. Bushnell discussed a project for the development of a recruitment film on health occupations, to be carried out by the National Health Council and the United Hospital Fund of New York.

The Committee was cautioned by Mr. Mitby that emphasis should be placed on increasing opportunities for training rather than on recruitment, due to the inadequacy of present training facilities.

The National Association for Mental Health is concerned over the role and training of the psychiatric aide. This worker should be prepared to function at a technical level in nursing. Miss Knight stated that NAMI would be interested in conducting an experimental project in this level of training if funds could be found.

Dr. Zinsinger discussed the need for more projects in teacher education and suggested that teacher education be made a requirement in all research projects that involved new occupations.

Mr. Bushnell called for comments on the one-page flyer on research information distributed from the USOE. In reference to the flyer, Dr. Heidgerken objected to the single focus on the worker with failure to recognize that occupations in the field of health concern both the worker and the person being served.

**HEALTH OCCUPATIONS CURRICULUMS**

Mrs. Syphax reported progress on the Survey of Health Occupations Training Programs (See attachment #4).

Discussion of two year programs for health workers pointed up the fact that some junior college curriculums were a "hodge-podge" of courses with little justification for the liberal arts courses required for a particular program.

Suggestions made with regard to the survey included:

1. Make a thorough check of all hospitals listed in the Hospitals's Guide Issue for additional training programs.
2. Include in the Survey Title, "Education and Training...".

3. Set up an advisory committee with representation from AAJC, ACHA, AMA, ADA, ANA, and others as indicated, to assist with subsequent surveys in this area.

D/HEW - LABOR

Miss Knight reported to the Committee on her activities as a representative on the Planning Committee for the Job Development Conference, jointly sponsored by the Department of Labor and the Department of Health, Education, and Welfare. She indicated that the planning showed lack of coordination between the two departments, as evidenced by decisions made by the Department of Labor in almost all aspects of planning. The focus throughout the conference was on numbers of people and jobs, but very little evidence of concern for job development was expressed. The Chairman and Committee members commended Miss Knight for her work with the Conference Planning Committee.

ANA POSITION

The ANA position paper on nursing education was discussed in terms of its implications for the future of practical nursing and practical nurse education. A statement on page 15 of the position paper was the focus of most of the discussion. It states, "The Association, therefore, proposes that the nursing profession---systematically work to facilitate the replacement of programs of practical nursing with programs for beginning technical nursing practice in junior and community colleges."

Both the AVA resolution and the NFLPN statement in response to the ANA position were presented and discussed. (See Attachments #5 and #6). Reactions from school administrators, program directors, and State officials in vocational and technical education were also reviewed with the Committee.

The intent of the statement quoted above was questioned in view of the fact that the position paper was presented as a statement of goals. In light of the current acute shortage of qualified nurses available for employment, and the commitment under federal legislation in support of practical nurse education, the feasibility of implementing the above statement at the present time was briefly explored.

Dr. Simmons cautioned the Committee members to keep clear in their discussion the right of ANA to set goals for nursing education, and the matter of implementation of goals. The latter depends on many groups and individuals in our society. The Committee's concern, however, should be with the administration of the program under public vocational education and with the effect of the position paper on the administration of the program.
Miss Knight presented further clarification of the position paper and shared a communication from ANA to NFLPN on the subject. (See attachment #7).

The Committee unanimously supported a motion by Mr. Mitby to send a communication to State Departments of Education setting forth the Committee's belief that USOE should support both practical nurse education and the two-year associate degree nursing program as long as these programs meet the needs for practitioners in the community. (See statement, attachment #7). The Committee also recommended that two-year nursing programs be promoted to the fullest extent possible.

STANDARDS FOR TWO YEAR NURSE EDUCATION Program in Nursing was discussed with special consideration given to methodology. While Committee members supported the principle that national standards, where available, should be met in all health occupations training programs, an acceptable procedure for assuring that such standards be met could not be determined by the group. Several members supported NLN accreditation for the two-year nursing program wherever federal funds would be used. However, the group as a whole also recognized the inconsistency in requiring national accreditation for one program under vocational and technical education but not for others. It was generally felt that approval for use of federal vocational education funds for training programs in health occupations should be predicated on a showing of quality that would be in accord with accreditation standards where available.

SUMMARY OF RECOMMENDATIONS

Recommendation #1

That a position paper on "career ladders" in health occupations training be prepared setting forth the concept and presenting both positive and negative aspects of the subject; the paper to be ready for presentation at the next meeting of the Committee.

Recommendation #2

That the following communication be sent to State Departments of Education and others concerned with the progress of Practical Nurse education:

In response to the numerous inquiries concerning the anticipated effect of the American Nurses' Association's position paper on educational preparation for nurse practitioners and assistants to nurses, it is deemed necessary at this time to restate the goal of this Division in its support for nurse education. The ANA Statement of position to which this communication alludes was published in the December 1965 issue of the American Journal of Nursing.
The Division of Vocational and Technical Education has been charged with responsibility to carry out the mandates of Congress, and of the people, to provide training in all occupations that do not require a baccalaureate degree and that are not generally considered to be professional. Federal support for the practical nurse training program was initiated under Public Law 94-911. Under Public Law 83-210, Federal support for practical nurse training was continued and, in addition, support was provided for associate degree nurse education. These funds have provided for an increasing supply of well trained workers in response to local demands.

The need for nurses increases each year. Employers of nurses continue to urge educational institutions to expand or to establish additional training programs. In accord with the wishes of local communities and employers, this Office shall continue to support the establishment of quality programs of nurse education at both the practical and associate degree nurse levels as long as there is need for the programs and for their graduates.

It is our belief that vocational and technical educators should continue to work with nursing groups and employers to provide educational programs under Federal vocational education funds for both practical and associate degree nursing. (End of statement).

MOTION

The National Advisory Committee on Health Occupations Training agrees with the position of the Commissioner that "the accreditation function, being closely related to the control of education, is primarily the concern of the appropriate voluntary academic and professional communities, and that the Office of Education should enter this area only to the extent necessary for carrying out its statutory responsibilities."

The Committee is not sure how standards might be applied to assure quality in programs; therefore, the Committee is reluctant at this time to make any specific recommendation regarding accreditation.

Dates for the next meeting were discussed. November 3 and 4 are to be reserved until further notice. Because of the absence of the Chairman at this time and, also, because several new members are in process of being appointed, a letter will be sent to determine preferences before finalizing the dates for the next meeting.

The meeting was adjourned at 4 p.m.