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## ABSTRACT

The projects were funded to create curriculum and instructional materials for those allied health functions that can appropriately be taught in programs through the associate degree level, and to develop inservice and preservice programs for those health-related occupations in which on-the-job training plays a primary role. The staff, with the advice and guidance of a National Technical Advisory Committee and other expert consultants, determines for each occupation concerned: (1) identification of all possible tasks, (2) verification of tasks, (3) determination of the processes involved in performance and the knowledge and skills required for satisfactory performance of each task, (4) development of behavioral objectives (performance goals), (5) development of curriculum, including consideration of the career ladder concept, continuing education, and attainment of degree objectives and transferability of credits earned, (6) development of innovative instructional materials and instructor manuals in modular form, (7) teacher education and testing of materials, (8) evaluation of student performance in terms of behavioral objectives, (9) production of instructional materials, and (10) distribution of materials. An outline of facility support services and clinical occupations is included. (JK)

UNIVERSITY OF CALIFORNIA, LOS ANGELES  
Division of Vocational Education

ALLIED HEALTH PROFESSIONS PROJECTS  
Research and Development Project for Curricula  
and Instruction in Allied Health Occupations

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THE UCLA ALLIED HEALTH PROFESSIONS PROJECTS

The Background

The Programs

The People

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UNIVERSITY OF CALIFORNIA, LOS ANGELES  
Division of Vocational Education  
ALLIED HEALTH PROFESSIONS PROJECTS

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## THE UCLA ALLIED HEALTH PROFESSIONS PROJECTS

The Allied Health Professions Projects, a national curriculum research and development program funded by the U.S. Office of Education, initiated operations in August, 1968. Establishment of the Projects reflects increasing awareness of the shortage of personnel to meet the fast growing demand for health care services. While growth in the number of practitioners graduated from medical, dental, nursing, social work and other schools has paced the rise in population, demand for their services has far outstripped the capacities of today's supply of medical manpower. Regardless of the statistics cited, health administrators everywhere can attest to the severity of the shortage, and to the need for large numbers of allied health personnel to extend the services of the highly trained professionals.

Objectives of the Allied Health Professions Projects are to create curricula and instructional materials for those allied health functions that can appropriately be taught in programs through the Associate degree level, and to develop in-service and pre-service programs for those health-related occupations in which on-the-job training plays a primary role.

The program has been developed under the guidance of a National Advisory Committee drawn from the fields of education, national professional associations, public and private agencies, and the public at large (see Appendix A).

In addition, research and developmental work for each of the occupations concerned is carried on with the help of a National Technical Advisory Committee of experts--practitioners, educators, users of the services, spokesmen for the national association(s) concerned, and physicians. Where necessary, consultants work with the Associate Director who is responsible for the occupation under study.

The basic methodology underlying the activities of the Allied Health Professions Projects may be summarized as follows:

"Staff, with the advice and guidance of a National Technical Advisory Committee and utilizing expert consultants as needed, will complete for each occupation selected:

1. Identification and listing of all possible tasks within the functional area described.
2. Verification of tasks -- a process which might include a survey or field test to determine appropriateness of the task list to the occupational category under consideration.
3. Determination of the processes involved in performance of the task and determination of the knowledges and skills required for satisfactory performances of each task.
4. Development of behavioral objectives (performance goals).

5. Development of curriculum, including consideration of the career ladder concept, continuing education, and attainment of degree objectives and transferability of credits earned.
6. Development of innovative instructional materials and instructor manuals in modular form, leading eventually to core curricula and exemplary curricula for each occupational category.
7. Testing of instructional materials preceded by in-service teacher education.
8. Evaluation of student performance by measuring attainment of behavioral objectives.
9. Production of instructional materials.
10. Distribution of materials."

The programs for specific occupations may vary, depending on whether the occupation concerned is well-established, gaining in importance, or emerging. Attention also will be turned to those occupations for which demand is anticipated in the future, in line with technological developments. Functions and occupations now in process, as well as those under consideration for future development, are listed below.

#### I. FACILITY SUPPORT SERVICES

Those activities that provide an environment appropriate to patient care and to efficient maintenance and operation of the hospital as a system.

##### 1. Admitting Office.

Obtains basic medico-legal and socio-economic information about the patient by direct patient contact, and distributes it to various areas where needed to treat and serve the patient. Personnel responsibilities range from routine non-patient-contact clerical duties to complex and decision-making matters relating to financial, social, and personal considerations. Varying numbers and levels of supervisors are required, depending on size of facility and days and shifts covered. Clerical-level positions range from junior through intermediate to senior levels.

\*Supervising admitting worker. Under general direction, supervises admitting workers, coordinates the activities of the admitting

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\*Occupations marked with an asterisk are now being developed.

services with other hospital departments, and establishes and implements procedures that create an orderly and sympathetic patient admission program. (OE 14.0406; DOT 237.368-010)<sup>1</sup>

\*Admitting Worker. Duties range from an entry-level category, performing routine admitting clerical duties under close supervision, to the higher levels where more complicated duties, such as financial detail, are performed with minimum supervision. (DOT 237.368-018, 237.368-030)

\*Patient Service Representative. This is a relatively innovative approach to patient administrative services whereby one hospital representative is assigned to a patient prior to admission, and serves him in all aspects of his hospital experience, and also is available after discharge if the patient wishes to ask questions.

## 2. Business Office.

Responsible for complete and accurate accumulation of charges to the patient on a current basis, and the efficient billing and collection of revenue due the hospital. Maintains current, accurate, and detailed records for all other accounting functions, e.g., payroll, accounts payable. Duties ranging from simple routine bookkeeping or coding to complex and difficult accounting and statistical functions involving gathering and compiling information for reports.

\*Hospital business office manager. Full responsibility for the operation and management of hospital business and admitting office functions. Plans, coordinates, and directs all business office activities. (DOT 169.168-062)

\*Cashier. Cashiers accept payments for hospital services, issue receipts, post receipts in a cash journal, and prepare bank deposits and daily cash reports. (OE 14.0103; DOT 211.368-010)

\*Account clerks. Positions range from a junior level, performing routine hospital accounting and billing duties under close supervision, to an intermediate level involving more difficult accounting and billing duties with less supervision. The senior is a specialist in patient accounting and billing functions, who assumes high-level clerical duties and supervisory responsibilities.

\*Hospital credit and collection worker. Performs collection follow-up of problem accounts, including individual debtors, insurance companies, governmental agencies, and cases involving litigation. Establishes direct communication with the debtor

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<sup>1</sup>U.S. Office of Education (OE) occupational code designations (six-digit) and occupational categories shown in the Dictionary of Occupational Titles (DOT) of the U.S. Department of Labor (nine-digit) are given where available, following each Project occupational category. Where not specifically related to the hospital fields, the number for the most closely approximating occupational title is given.



in person, by telephone or by letter. Recommends accounts for assignment to professional collection agency. (OE 14.0199; DOT 240.388-010)

### 3. Central Service.

Provides the processing, cleaning, and distribution of materials that are re-used for direct patient care; may overlap with the purchasing or storeroom function by handling the distribution of single-use disposables.

The entry-level personnel includes a Central Service Helper, or a Central Service Technician. The second-level individual normally is the supervisor of the central service department. There also may be shift supervisors.

Central Service Technician (Central Service Helper).  
Operates ultrasonic cleaners, autoclaves, and sterilizers, performs aseptic cleaning techniques, and receives and distributes cleaning supplies. (OE 07.0905; DOT 223.887-010)

### 4. Engineering Maintenance.

Responsible for operation and maintenance of the entire building and grounds, as well as equipment, appliances, and instruments.

Many of the skills and professions represented among the department's personnel are associated with membership in craft unions or brotherhoods which impose their own standards of performance. These include such occupations as Carpenter, Plumber, Refrigeration and Air Conditioning Mechanic, Steam Fitter, and Electrician. (DOT 638.281-026) The Projects are not working on curricula for these occupations. In-service orientation of maintenance personnel to health care facility requirements is needed, however, and is in process.

\*Emergency and/or disaster specialist. Develops and implements hospital-wide procedures for dealing with in-house and community emergencies and disasters. (OE 07.0907)

### 5. Environmental Sanitation.

#### Community Sanitation (Public Health Department)

Responsible for maintaining a clean, safe, and wholesome environment in and around a community. Personnel has varying skills and training including inspection of food and water supplies, sewage and waste disposal, insect and rodent control, and sanitation in public and private institutions and health care facilities. (OE 07.0701, 07.0702, 07.0703; DOT 199.187-010, 168.287-094). Consideration is being given to development of an overall orientation program for entry-level personnel in the community public health department.



## Health Care Facility Sanitation

The Hospital Environmental Control Specialist is responsible for keeping the facility clean, safe, and healthful. The personnel responsible for carrying out various assignments are sanitarians, with specialized skills in problems specific to hospitals, such as cross-infection and radiation control.

\*Food sanitation and kitchen area safety program (in-service); maintenance of cleanliness and safety, (OE 07.0799); management of emergency/disaster situations, including evacuation and relief work. (OE 07.0907)

### 6. Food Service (Dietary)

Prepares appetizing and nutritious meals for patients, professional and clerical staffs of the institution, and frequently for guests and visitors to the facility. Includes planning, management, and administration of meals, food purchase, storage, preparation, distribution, sanitation, and safety.

\*Food Service Supervisor. Responsible for the purchasing and inventory of food supplies; cleaning and maintenance of equipment; hiring, scheduling and management of personnel; instructs in use and care of equipment, food preparation techniques, and efficient food service. (OE 07.0908, 09.0203; DOT 319.138-010)

\*Dietary Technician. Under direction of consulting or chief dietitian, applies dietary principles to interpretation of menus and diets prepared for patients, and general menus for regular diets; supervision, preparation of food, maintenance of equipment, sanitation, and accounting.

\*Food Service Worker. Duties cover the whole range of food preparation, including storing, preparing, cooking, serving, and the care and cleaning of facilities. (OE 09.0203; DOT 317.887-010)

### 7. Housekeeping.

Maintenance and preservation of safe and clean environment by utilizing accepted cleaning techniques which allow for proper infection control. Entry-level occupations include the Aide, the Porter, the Maid, and the Janitor, who dry- and wet-mop floors, wash walls, operate scrubbing equipment, operate wet and dry vacuum cleaners, and dispose of refuse. Supervisory personnel includes Lead Men, Shift Supervisors, Assistant Housekeepers and Executive Housekeepers, who are responsible for seeing that the entry-level individuals accomplish the basic mission of creating a safe environment. (OE 17.1100, 09.0205; DOT 187.168-050)

## 8. Laundry and Linen.

Provide the hospital with clean, aseptic linen materials for patient care, both for direct use by patients and for use by medical facility personnel. Entry-level personnel might include Washmen, Flat Iron Workers, Pack Makers, etc., who handle and distribute linens using aseptic techniques, operate machinery, and make surgical packs. There normally are first line Supervisors and, generally, a Laundry Manager. (OE 17.1602)

## 9. Medical Records.

The information center of the health care facility, responsible for recording and storing all medical reports which describe how the patient's illness or injury was diagnosed and treated.

**\*Medical Record Technician.** Works in the Medical Records department of a hospital, clinic, or nursing home to maintain adequate patient, disease, surgery and physician indexes; analysis of medical records for completeness and accuracy to insure their applicability for research, case study, and patient treatment; supervises release of pertinent information to authorized personnel. Also supervises clerical staff engaged in routine medical records maintenance functions. (DOT 249.388-034)

**\*Transcriptionist.** Technically trained to transcribe dictated discharge and outpatient summaries, reports, and letters, from discs, or tapes, on to documents for medical record.

**\*Coding Clerk.** Under supervision, classifies and codes diagnoses of diseases and operations into the proper coding symbols on to source documents.

**\*File Clerk.** Locates and pulls requested charts, updates them, and distributes to requestors. Collects charts and replaces in proper manner. Answers telephones, assists at request desk, and issues identification numbers.

## 10. Pharmacy.

Advises and provides the correct therapeutic drug items to the patient as requested by the physician. Non-professional positions include Pharmacy Aides and Pharmacy Technicians, who provide a wide range of supportive functions to the Pharmacist, from clerical duties to manufacturing.

**\*Pharmacy Technician.** The person in this emerging occupation probably will assist the Pharmacist or actually perform the following tasks: dispense pharmaceuticals; manufacture bulk compounds; prepackage pharmaceuticals; manufacture sterile solutions; purchase, inventory, receive, and store pharmaceuticals. He also may administer pharmaceuticals.

\*Pharmacy Aide. Functions will include clerical, maintenance, inventory, receiving, storage, and simple accounting procedures.

## 11. Purchasing.

Purchasing has been defined as "buying at the right time at the right price the correct quantity of an individual item or a group of supplies or equipment of suitable quality." A key function, because while a shortage of supplies in industry may hamper the operation of the business, a shortage of supplies or equipment in a hospital may endanger the life of a patient.

The Purchasing Department may be headed by a Purchasing Agent or Purchasing Manager. Second-level personnel includes the supervisor of the stores operation, who keeps track of the flow of materials in and out of the facility, and the buyer who must buy wanted items at the right time at the right price. Entry-level occupations include the Distribution Clerk, Receiving Clerk, (DOT 222.387-018) and Inventory Clerk. (DOT 223.388-018)

\*Buyer. (DOT 162.158-102, 162.168-026, 162.188-010)

\*Assistant Purchasing Agent. (DOT 162.158-102, 162.168-026, 162.188-010)

## 12. Ward Administration.

The coordination of all non-medical and non-nursing ward responsibilities and functions with the administration of the hospital and the maintenance departments. Includes continuous inventory of ward supplies and equipment, supervision of time schedules, messenger services, transportation of patients, budgeting, attention to cost control and to economy of utilization as related to a patient unit. May involve accumulation of data for re-evaluation of existing procedures, quality control, sanitation, and on-the-job training of service department personnel.

\*Ward Manager. Has the business and managerial competence to be administrator of patient-care units in hospitals and other health agencies. Duties include teaching and training clerical personnel, supervision of patient services, physical environment, control and maintenance of supplies and needed equipment, dissemination of information about policies and procedures, and providing assistance in the solution of problems affecting the unit.

\*Ward Clerk. Responsible for the general office, clerical, and maintenance functions of a patient care unit. (DOT 219.388-286)

## II. CLINICAL OCCUPATIONS

Activities required for direct provision of patient care.

### 1. Bioelectrical Monitoring.

The process of observing and/or recording the electrical potential generated by the various systems of the body.

#### Occupations.

ECG (Electrocardiographic) Technician. Performs screening ECG tests in which he manipulates electronic equipment utilized in recording the electrical potentials generated by the pulsating action of the heart. Usually prepares and mounts ECG records and utilizes a filing system. He usually works with a single unit recorder. May assist in research projects or other tests that require additional electronic equipment. (OE 07.0902; DOT 078.368-018)

\*EEG (Electroencephalographic) Technician. Assists or aids the physician in obtaining information about the function of the brain by recording the electrical activity produced by the brain cells. Tasks include operating various items of electronic equipment, recognizing defective equipment and making minor repairs and adjustments; providing patient care during the diagnostic test; organizing the laboratory work schedule; preparing reports; and cataloging and storing records. (OE 07.0901, 16.0302; DOT 078.368-022)

EMG (Electromyography) Technician. Assists the doctor in recording and analyzing bioelectric potentials which originate in muscle tissue. Tasks include operating various electronic devices; calibrating, repairing, and adjusting defective equipment; assisting the doctor with patient care; organizing the laboratory work schedule; and preparing reports; catalogs and files reports; may assist the doctor in other neuro-physiological tests or research efforts.

### 2. Biomedical Photography.

\*Biomedical Photography Technician. Technicians in this field are responsible for the production of photographic films, prints, and transparencies utilized for teaching and research in the biological and health sciences. Subject matter includes surgical procedures, pathology specimens, anatomical and physiological studies of humans and animals, bacteriological specimens, and public relations activities. (OE 17.0901)



### 3. Dental Occupations.

\*Dental Assistant. An unlicensed dental auxiliary functioning under the direct supervision of a licensed dentist. Duties include providing another pair of hands at the chairside during dental procedures, preparing a variety of dental materials for use at the chair, caring for instruments and equipment within the dental operator, and a variety of other procedures related to secretarial, bookkeeping, receptionist and general office duties. Also is permitted in many states to expose and process dental radiographs. (OE 07.0101; DOT 079.378-010)

\*Dental Hygienist. Licensed by the state to function under the direct supervision of a licensed dentist. Performs in-the-mouth functions related to the cleaning and polishing of teeth, applies topical fluoride solutions to the teeth, and exposes and processes dental radiographs. Also is trained in patient education and instructs the patient in basic home care and oral hygiene procedures. (OE 06.0301, 07.0102; DOT 078.368-014)

\*Dental Laboratory Technician. Is trained to fabricate a wide variety of dental restorations: i.e., crowns, bridges, dentures, etc., and is responsible for filling the prescription of a licensed dentist and providing a finished dental restoration ready for placement in the patient's mouth by the dentist. Works either in a commercial dental laboratory or in the offices of a private dental practitioner. (OE 06.0303, 07.0103; DOT 712.381-014)

### 4. Medical Assistant.

\*Medical Office Assistant. High-level responsibilities include assisting the physician in the administrative and technical aspects of operating and managing a physician's office. Various levels of performance are related to the individual's training and skills and the delegation of duties by the physician. (OE 07.0904; DOT 079.368-022, 201.368-014)

Special Assistants. A group of workers with sub-specialty training which includes such categories as Gastroenterology Assistant, Ophthalmic/Optometric Assistant (OE 07.0603, 07.0699), Orthopedic Assistant, Physician's Assistant. Preparation for employment may range from in-service training to two or more years of formal instruction.

\*Gastroenterology Assistant (undertaken in cooperation with the Regional Medical Programs). Trained in and capable of performing most aspects of gastroenterology tests, including the preparation and instruction of the patient, care of equipment, collection of samples, and accurate performance of the technical procedures, under the supervision of a Gastroenterologist or a Clinical Pathologist.

## 5. Medical Laboratory Functions.

The medical laboratory, headed by a Pathologist, uses a team of Technologists, Technicians, and Aides to assist in the diagnosis and treatment of disease by scientifically testing the patient's blood, tissues, body fluids, and secretions.

**\*Medical Laboratory Technician.** Performs the scientific fact-finding tests in the clinical pathology laboratory. Is qualified through general and technical education to perform a high percentage of medical laboratory test procedures. Is capable of working, often without supervision, in blood bank, chemistry, microbiology, hematology, and other clinical areas. (OE 07.0203, 16.0303; DOT 078.281-018)

**\*Certified Laboratory Assistant (CLA).** An individual with a high school diploma plus 12 months of training in a school approved by the American Medical Association, who performs the more routine laboratory tests under supervision. Such tests include bacteriology, chemistry, hematology, parasitology, serology, blood banking, and urinalysis. (OE 67.0203; DOT 078.381.010)

**\*Laboratory Aide.** An entry-level position, whose duties include, but are not limited to, washing and sterilizing all laboratory glassware, maintaining inventory and storage of equipment, receiving and delivering supplies, laboratory animals and other related equipment, loading and unloading centrifuges, culture trays, etc.

**Cytotechnologist.** Screens slides of cell samplings (such as Pap smears) under the microscope for trace clues to disease in the delicate patterns of cytoplasm and nuclei which have been stained with special dyes. (OE 07.0201; DOT 078.281-014)

**Histologic Technician.** Cuts and stains tissues which have been removed from the body so that they can be examined microscopically by the Pathologist for signs of malignant or questionable cells. (OE 07.0202; DOT 078.381-018)

## 6. Nursing Occupations.

**\*Registered Nurse (Technical).** Licensed by law, attends to the physical comfort and safety, physiologic malfunctions, psychological and social problems, and rehabilitative needs of patients. Performs nursing measures, medically delegated techniques; participates in planning, implementation, and evaluation and revision of nursing care. (OE 07.0301, 16.0305; DOT 075.378-014)

**\*Licensed Vocational/Practical Nurse.** Licensed by law to practice in a number of states. Under the supervision of the Registered Nurse or physician, provides personal care to

patients, administers less complicated nursing procedures and treatments, assists in performing more complex procedures, and cares for the critically ill. (OE 07.0302; DOT 079.378-026)

\*Nursing Assistant. Nurse Aide (DOT 355.878-034), Attendant, Orderly (OE 07.0303; DOT 355.878-038). A non-licensed practitioner, working under the supervision of the Registered Nurse. Provides personal care to patients and performs routine housekeeping duties. Education usually is on the job, but is increasingly offered in community colleges and vocational high schools.

Operating Room Technician. (OE 07.0305; DOT 079.378-042)

Obstetrical Technician. (OE 07.0306; DOT 079.378-026)

Psychiatric Aide. (OE 07.0304; DOT 355.378-042)

## 7. Radiologic Technology.

\*Diagnostic Technician. Produces radiological films utilized for the diagnosis of disease and for research into its cause and process; under direction, applies X-ray radiation in prescribed amounts to specified areas of the body as part of disease treatment programs. (OE 07.0501, 16.0304; DOT 078.368-030)

\*Therapeutic Technician. Assists in carrying out diagnostic procedures utilizing radioactive isotopes. Also aids in the application of intense, high-level radiation in various treatment procedures usually related to human malignancies. (OE 07.0502; DOT 078.381-014)

## 8. Respiratory Care Functions.

Cardiopulmonary Technician. Performs a wide range of tasks related to the function and therapeutic care of the heart-lung system: performing blood gas analysis, oxygen consumption studies, the measurement of metabolic rate, and pulmonary function tests. May be called upon to assist in cardiac catheterization in the operating room, or in open heart massage in the emergency room. Other tasks include the post-operative monitoring, care, and treatment of the heart-lung patient.

\*Inhalation Therapist. Administers the therapeutic gases prescribed for the patient by the physician. Is directly responsible for regulating concentration of gas volume, pulmonary function tests, and assisting the patient's ventilation with various mechanical aids. May assist the physician in administering pharmacological aerosols or mists. (OE 07.0903; DOT 079.368-018)

## 9. Social Service Occupations.

A pre-baccalaureate worker employed in a community health, mental health, or other medical care facility to provide services to patients in their homes, at the agency, or in the community. Major function is to bridge the gaps in services among health professionals and between consumer's needs and the service delivery programs, including case finding. Many teach and "coach" clients on social, emotional, and health-related problems, and function as case monitor and client advocate. Also may provide counseling and other therapeutic services to families, groups, drug addicts, alcoholics, and adolescents.

\*Community Health Aide. (OE 07.0906)

\*Community Mental Health Aide. (OE 07.0801)

\*Family Health Worker. (OE 07.0307; DOT 354.878-014)

\*Health Assistant (Aide).

## 10. The Therapies.

### Occupational Therapy.

Employed in psychiatric, general, and chronic disease hospitals, in nursing homes, rehabilitation centers, schools, and clinics for handicapped children, and in facilities for the mentally retarded, for the purpose of rehabilitating persons with physical or emotional disabilities.

\*Occupational Therapy Assistant. Usually receives training in programs based in community colleges or on the job. Students who complete their training in programs approved by the American Occupational Therapy Association are eligible for certification as Occupational Therapy Assistants (COTA). They work under the supervision of or with consultation from Registered Occupational Therapists. (OE 67.0401; DOT 079.368-026)

\*Occupational Therapy Aide. Usually an entry-level position for which on-the-job training is provided in a medical or health facility. Aides work under the supervision of or with consultation from Registered Occupational Therapists.

### Orthotics.

The general term used to describe the design, manufacture, and fitting of all braces and splints useful for patients suffering from such conditions as paralysis, injuries, deformities, post-surgical conditions and the like.



### Occupations.

\*Orthotic Technician. Works with the physician and/or the Orthotist in the design, manufacture, and fitting of orthotic devices for the upper and lower extremities and the spine. (OE 07.0404; DOT 712.281-018)

The Allied Health Professions Projects program for the Orthotic Technician consists of the development of a Laboratory Manual in Lower Extremity Orthotics (leg and foot bracing) being produced by and under the direction of a sub-committee of the Joint Education Committee of the American Orthotics and Prosthetics Association and the American Board for Certification in Prosthetics and Orthotics. The Joint Education Committee has recommended that, upon completion of the Lower Extremity Orthotics Manual, work be undertaken on a Manual of Spinal Orthotics (back bracing).

### Physical Therapy.

Directed toward the restoration and maintenance of body movements in patients who have, through disease or accident, lost the use of a limb, or whose muscles or joints do not function properly, through use of various exercises, massages, and special training equipment.

### Occupations.

Physical Therapy Assistant. Has successfully completed a two-year community college program approved by the American Physical Therapy Association. Assists the Physical Therapist by carrying out specified physical treatment programs, such as ambulation and activities of daily living practices, and the application of heat, cold, light, water, and sound. Cares for braces and other assistive devices and carries out appropriate clerical and maintenance responsibilities. (OE 07.0402; DOT 355.878-014)

Physical Therapy Aide. A non-licensed worker, who has successfully completed a training program located within or affiliated with a physical therapy service. Both training program and service must meet the criteria established by the American Physical Therapy Association. Assists the Physical Therapist by preparing patients for treatment, bringing them to and from treatment areas, and aiding patients with prescribed exercises related to the development of muscle strength. Cares for equipment and supplies, and performs some general office procedures.

### III. SECONDARY SCHOOLS PILOT AND DEMONSTRATION PROJECT

#### (Introduction to Allied Health Occupations)

This project is a basic introduction to the Allied Health Professions for high school students, which is designed to prepare them for employment in this occupational area and motivate them to seek further training at the post-secondary level.

The project will operate through five hospital-high school complexes in the Los Angeles area, with the hospitals providing opportunities for field trips and orientation to the hospital environment, as well as the clinical training and job experience facilities to supplement classroom instruction.

The project will enroll both academically able students and under-achieving potential dropouts, providing necessary tutorial services to enable the latter to cope with academic requirements. A three-year program is in preparation, each year's instruction to be presented in ungraded classes providing facilities for approximately 20 students in each of the hospital-high school complexes.

Curriculum for the first-year course covers the three main aspects of the medical care field: Patient Care, Technical Services, and Facility Support Services. It will be taught as a two-hour daily block, with the classroom instructor conducting the academic portion of the program and accompanying students on field visits. In the second and third years, students will participate in work-study and cooperative education programs in the allied health areas of their choice.

Project staff includes both teaching and hospital-oriented personnel who will design the curriculum and select or develop instructional materials.

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APPENDIX A

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Gallagher, Dr. Joseph A.  
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Garrett, James F.  
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Social and Rehabilitation Service  
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Public Health Service  
Department of Health, Education, and Welfare  
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Deputy Assistant Secretary, Health Manpower  
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Matkin, Dr. R. L.  
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American Dental Association  
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Mendel, Mr. Levitte  
Associate Director, National Health Council  
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O'Farrell, Mr. Thomas  
Associate Director, Hospital Continuing Education Project  
Hospital Research and Education Trust  
American Hospital Association  
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Patrick, Charles W.  
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San Diego, California

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Association of Schools of Allied Health Professions  
Dean, School of Health Related Professions  
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Peters, Dr. Henry B.  
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Roberts, Mr. C. L., Executive Director  
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Rousselot, Louis M., M.D.  
Deputy Assistant Secretary  
Health and Medical Manpower and Reserve Affairs  
Assistant Secretary of Defense  
Washington, D.C.

Skaggs, Mr. Kenneth G.  
Coordinator, Service Projects  
Occupational Education Projects  
American Association of Junior Colleges  
Washington, D.C.

Staros, Mr. Anthony  
Chairman of North American Sub-Committee  
International Committee on Prosthetics  
Veterans Administration Prosthetic Center  
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American Dental Association  
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Traub, Mr. Joseph  
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Department of Health, Education, and Welfare  
Social and Rehabilitation Services  
Washington, D.C.

Wier, Brigadier General James A. MC USA  
Staff Director, Health and Medical  
Assistant Secretary of Defense  
Washington, D.C.

Williams, Mr. Phillip L., Chairman  
Vice President, Times Mirror Company  
Los Angeles, California

APPENDIX B

STAFFING PATTERN

ALLIED HEALTH PROFESSIONS PROJECTS

Katherine L. Goldsmith, Dr. P.H., Deputy Director, Allied Health Professions  
Projects

Robert R. Henrich, Senior Associate Director, Facilities Support Services  
Pharmacy  
Purchasing

Earl DiCicco, Associate Director  
Admitting Office  
Business Office  
Medical Office Assistant

Minna Gosman, Associate Director  
Food Service  
Medical Records  
Ward Administration

Najam Merchant, Research Assistant  
Environmental Sanitation task List  
Health Facility Engineering task list  
Health Facility Sanitation task list

Earl Raps, Consultant

\*John Boswell, Research Assistant  
Central Service task list  
Housekeeping task list  
Laundry Linen task list

\*Glenn Reeder, Research Assistant  
Ward Administration Inventory

Richard D. Kingston, D.D.S. Senior Associate Director, Clinical Occupations  
Dental Assisting  
Dental Hygiene  
Dental Laboratory Technology

Thomas E. Freeland, Associate Director  
Cardiopulmonary Technician  
EEG  
EKG  
EMG  
Inhalation Therapy

\*Summer 1969

STAFFING PATTERN  
(continued)

Mary E. Jensen, Associate Director, Nursing  
Aide (Attendant, Orderly)  
L.V.N. (L.P.N.)  
O.R./O.B. Technician  
Psychiatric Aide  
R.N. (tech.)

Richard A. McCartney, Associate Director, Diagnostic Laboratories  
Biomedical Photography  
Radiation Therapy Technician  
Radiologic Technician

Faye U. Munoz, Associate Director, Social Services  
Community Health  
Community Mental Health  
Social Work

Howard Taub, Associate Director, Medical Laboratories  
Cytotechnologist  
Histologic Technician  
Laboratory Aide  
Laboratory Assistant  
Laboratory Technician

Patricia C. Thouin, Associate Director, Rehabilitation and Therapy  
Occupational Therapy  
Orthotics  
Physical Therapy  
Prosthetics  
Rehabilitation

\*Joel Kuritsky, Research Analyst  
Gastroenterology Assistant

Diane E. Watson, Senior Associate Director, Secondary Schools Pilot and  
Demonstration Project

Barbara Rosenquist, Research Analyst

Harry Douglas, Consultant

Shirley Majchrzak, Consultant

\*Summer 1969



University of California  
Division of Vocational Education  
Dr. M. L. Barlow, Dir.  
Dr. David Allen, Dep. Dir.  
E. Shenkin, Adm. Asst.

Allied Health Professions Project  
Pr. Investigator & Director  
Dr. M. L. Barlow

National Advisory Comm.  
(Representatives of National  
Organizations in Health Fields)

Exec. Res. Procedures & Des. Grp.  
Allen, Anderson, Barlow  
Johnson, Nelson, Strohm

Deputy Director  
Dr. K.L. Goldsmith

Facil. Support Svc.  
Sr. Assoc. Dir.  
R.R. Henrich

Clinical Services  
Sr. Assoc. Dir.  
Dr. R.D. Kingston

Secondary School Curric.  
Sr. Assoc. Dir.  
D.E. Watson

Head Secretary  
F. Muhs

T. Cullen, Res. Analyst  
E. DiCicco, Assoc. Dir.  
M. Gosman, Assoc. Dir.  
N. Merchant, Res. Asst.

Consultants  
S. Majchrzak  
H. Douglas  
B. Rosenquist, Res.  
Asst.

Editor  
M. Ellison

Secretaries  
B. Atkisson  
J. Banuelos  
D. Barnum  
D. Baus  
S. Grossman  
M. Herrick  
G. Kimbrel  
E. Lee

Health Prof. Advisory Comm's.  
(Reps. of National Prof. Org's &  
Service Consumer Groups)