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ABSTRACT

The purpose of the study was to develop a formal, organized, widely agreed upon and accepted program for assuring the most effective and efficient advancement of persons interested in expanding their competencies and responsibilities in health occupations. Information was collected via personal interviews, mail questionnaires, and telephone interviews from 67 directors of health programs in Oklahoma, also from meetings with selected leaders in health education, with the Executive Director of the Oklahoma Board of Nurse Registration and Nursing Education, and with the President of the Oklahoma State Nurses Association. These data were interfaced with information on currently implemented career mobility plans, and policy statements published by the Oklahoma State Regents for Higher Education. Recommendations are made based on twenty six conclusions related to features of career mobility plans, currently available career mobility plans, and general feasibility. The appendixes, which make up more than half the document, contain the information derived during the course of the study, the questionnaires, relevant correspondence, and suggested health occupations career mobility plans. (KP)

A Study of the Feasibility of a Health Occupations Career Mobility Program for Oklahoma A Final Report

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A STUDY OF THE FEASIBILITY OF A HEALTH OCCUPATIONS CAREER
MOBILITY PROGRAM FOR OKLAHOMA
A FINAL REPORT

BY

Sharon K. Ward
with Patricia Jamison
and Don Frazier

Division of Research, Planning, and Evaluation
State Department of Vocational and Technical Education

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CHAPTER I

A SUMMARY

Background

In 1972 alone some \$83.4 billion was spent in the United States to cover the cost of medical care as compared to \$38.9 billion in 1965 and \$17.3 billion in 1955 (U.S. News, 1973). Yet, while the cost of health care was soaring to new peaks, the availability and quality of such care was still reportedly below desired levels (NBC, 1972). The urgency of the situation, referred to by the popular media as a "health crisis," was evidenced by the responses it received from our nation's traditional institutions. Large expenditures, both governmental and private, were made to fund studies on career mobility (Forni, 1973; Jamison, 1971; Johnson, 1971; The Basic Sciences, 1970; Goldsmith, et al., 1970; Meek, 1970; UCLA, 1970; Wood, 1970; Gilpatrick, 1968; Wallenstien, 1968; and Fullerton, 1966), and a "bewildering array of health bills" appeared before Congress (Radcliff, 1972).

As all of this unfolded, increased attention was given in educational and nursing literature to the concepts of open curriculum, career development, career mobility, career ladders, etc., as possible solutions to a portion of the problem. Many of these writers indicated that the shortage in health service personnel available and the reluctance of individuals to enter training in health occupations could be attributed in part to the "barriers" which appeared to be placed in the way of individuals interested in moving up to more responsible positions in health service.

Many educators, a number of training institutions, and professional nursing associations, both on the state and national level, began to recognize that it was socially, educationally, and economically unsound to require individuals with previous training and/or experience in nursing or health-related fields to make a complete new start in order to expand their competencies and responsibilities in the health field (Appendix A). Such repetition was considered a waste of human resources and inefficient in terms of training time and money. While some attempts were being made by educational institutions to solve this problem, most were sporadic, informally organized, and depended to a large extent on the initiative of teachers and directors of local programs. To further confound the situation, those individuals who could benefit from the currently available educational opportunities for facilitating career mobility were often unaware of their existence.

It was in response to these signals from society that the Oklahoma State Department of Vocational and Technical Education responded by approving a study of the feasibility of "A Health Occupations Career Mobility Program for Oklahoma." The proposal for this study, which was suggested and supported by the State Director, was initiated through the cooperative efforts of the Health Occupations Education Division and the Division of Research, Planning, and Evaluation, and funded in October, 1972, to develop two

Proposed Health Occupations Career Mobility Plans. (Appendix B contains copies of the Plans.)

Plan I, which was mailed to the directors of diploma nursing programs, associate degree nursing programs and selected collegiate and adult health-related programs, was essentially a "credit by examination" approach which proposed the evaluation and, where necessary, the development of instruments for assessing student qualifications for advanced standing by volunteer program directors or faculty from all levels of nursing and health-related programs.

Plan II, which was mailed to directors of licensed practical nursing and health service careers programs, also proposed the evaluation or development of instruments of assessment by committees of volunteer program directors and faculty, plus utilization of an integrated curriculum in health service careers programs and Area I of the licensed practical nursing programs. This integrated curriculum would allow individuals who had completed a health service careers program using the curriculum to enter a licensed practical nursing program using the same curriculum at the Area II level. The proposed curriculum is now being developed.

Oklahoma program directors have demonstrated their willingness to work cooperatively to implement the Proposed Career Mobility Plans by writing letters of commitment to the Plans. Letters have been received from:

- 36 of the 43 schools contacted affirming their interest in participating in the implementation phase of this project.
- 48 of the 63 program directors to whom the Plans were mailed expressing personal commitments to serve on committees or in other ways to evaluate or, if necessary, develop instruments for assessing student qualifications for advanced standing.
- 22 institutions stating they will use these instruments in their programs for the purpose of granting advanced standing to qualified individuals.
- 32 of the 63 program directors declaring a willingness to communicate to their students and interested individuals information on currently available career mobility opportunities.
- 10 of the 18 licensed practical nursing and 14 of the 18 health service careers program directors agreeing to implement an integrated curriculum (which is currently being written) that will provide health service careers students who have studied this curriculum with an opportunity to move directly into Area II of a licensed practical nursing program using the curriculum.

Further, 21 of the nursing and health-related program directors contacted were found to have currently available career mobility plans and, of these, 18 have given written permission to describe their plans in a publication to be disseminated to health program directors throughout the state.

Tables I and II provide a summary tabulation of the commitments made by each type of program. It should be noted that interest in participation in future phases of this project includes representatives of diploma nursing programs, as well as associate degree and

vocational nursing and health related programs. Further, three baccalaureate programs and the University of Oklahoma master's program have cooperated by approving descriptions of their currently available plans for career mobility for inclusion in a publication describing such opportunities which will be developed as a part of this study.

Purpose

The purpose of this study, as stated in the original proposal by Dr. William Stevenson, Assistant State Director and Head of the Division of Research, Planning, and Evaluation, was to:

...develop...a formal, organized, widely-agreed upon, and accepted program for assuring the most effective and efficient advancement of persons interested in expanding their competencies and responsibilities in health occupations.

The career mobility feasibility study resulting from this proposal was hopefully a forceful step toward establishing such a program. Phase II of the project, assuming its feasibility, would be the limited implementation of the program in those institutions which have agreed to participate.

Objectives

The objectives were:

- (1) To design a career mobility program which might provide the necessary arrangements so that individual advancement in the health field may be facilitated, and
- (2) To secure administrative agreement on the arrangements necessary to provide credit for previous training and experience.

The accomplishment of these objectives would hopefully result in more adequately trained medical support personnel and the use of persons trained in the health field at more nearly their maximum capacity.

Summary

Insofar as directors of nursing and health-related educational programs contacted in this study were concerned, career mobility in Oklahoma was feasible.

In this study, data were collected:

- (1) via personal interviews, mail questionnaires, and telephone interviews from 67 directors of baccalaureate through vocational nursing and health-related programs in Oklahoma,
- (2) in meetings with selected leaders in health education, and
- (3) through meeting with the Executive Director of the Oklahoma Board of Nurse Registration and Nursing Education and the President of the Oklahoma State Nurses Association.

These data were interfaced with:

- (1) information on currently implemented career mobility plans, and
- (2) policy statements published by the Oklahoma State Regents for Higher Education

TABLE I
SUMMARY TABULATION OF
COMMITMENTS TO PLAN # 1

Program	Admin. Sig.	To develop/use exams		Communicate	No Commit.
		Personal	Institutional		
Diploma St. John's St. Anthony's Hillcrest		Virginia Anderson Carole Bryant	¹ yes ²	yes yes	x
Associate Degree Connors St. College (MLT) Cameron College (Nursing) St. Gregory's (MLT) Murray St. College (Nursing) Oscar Rose Jr. College (HO) Sayre Jr. College (MLT) South Okla. City Jr. College (Nursing & H.O.) Northern Okla. College Bacone College (Nursing) Tulsa Jr. College	x x x x x x	Virgil Watson Delores Kruger George Ing Winnie Dunham ³ Lloyd Hill C. E. Christian Lynn Bales Tom Harned Billie Tower Carolyn Briggs	yes yes yes yes yes ⁴ yes ⁵ yes ⁴ yes depends	yes yes yes yes yes yes yes yes yes yes	
Vocational H.O. Okla. City AVTS (DOA) Tulsa AVTS (DOA) Tulsa AVTS (MOA) O.T. Autry AVTS (MOA) O.T. Autry AVTS (DOA)	 x x x x	Genevieve Garrett Frances Henderson Bonita Glover Mary Weldon Dollie Hefner		yes yes yes yes yes	

¹If not contrary to our beliefs concerning Nursing.

²Will participate in establishing Norms

³As long as time involved away from regular duties does not constitute a serious problem.

⁴If in accordance w/policies, rules and regulations of the Oklahoma State Regents for Higher Education.

⁵On verification.

TABLE II
SUMMARY TABULATION OF
COMMITMENTS TO PLAN # II

Program	Admin. Sig.	To develop/use Exams		Integ. Curric.		Commun.	No. Commit.
		Personal	Institutional	LPN	HSC		
Canadian Valley AVTS (HSC)	x	Neysa Davis Margaret Brock Wanda S. Wolf D. Waldschmidt	yes	yes	yes	yes	
Canadian Valley AVTS (HSC, LPN)	x					yes	
Oklahoma NW AVTS (HSC)	x					yes	
Oklahoma NW AVTS (HSC)	x					yes	
Byng School (HSC & LPN)	x	Louicia Oats Lueda Roegner Doris Golab Mary Randall Anna Slaughter Naomi Coston Virginia Owens 1 Mary Morris Doris Smith Ruth Killough Lois Holeman Edna Hill	yes	yes	yes	yes	
Okla. City Skills Center (HSC & HO)	x					yes	
Norman Voc. School of PN	x					yes	
Okla. City AVTS (HSC)	x					yes	
Midwest City (HSC, LPN)	x					yes	
Kiamichi AVTS (HSC)	x					yes	
Kiamichi AVTS (HSC)	x					yes	
Kiamichi AVTS (LPN)	x					yes	
Great Plains AVTS (HSC)	x					yes	
Great Plains AVTS (LPN)							
Clinton Voc. School of PN							
Central Okla. AVTS (HSC, LPN)	x						
Indian Capital AVTS (HSC, LPN)	x						
		Jan Harris 4 Stella Wetz Felicia Dauth	2 yes Program Closing 3 yes	3 yes	3 yes	yes	
Southern Okla. AVTS (LPN)	x		5				
Tri-County AVTS (HSC, LPN)	x	6 Ruby Patterson Nancy Harrison A. Sue Mitchell & faculty Peggy McLain Lou Ebrite	7 yes yes	8 yes yes	8	yes yes yes	x
Mid-America AVTS (LPN)	x						
Woodward School of PN	x						
Okla. City Voc. School of PN	x						

Northeastern Okla. A&M (LPN)	x	Dorothy Hall	10	11		
Western Okla. AVTS (HSC, LPN)		Jean Hanchey	yes	10		yes
Western Okla. AVTS (HSC)		12 Diane Asher				yes
Tulsa Voc. School of PN	x		11 depends	11 depends		
Pawhuska (HSC)		Rita Marak				
O.T. Autry AVTS (HSC, LPN)	x	13 Norma Seymour	depends	depends		depends
		Velma Laubhan				
		Terry Carmichael				

¹If doesn't interfere w/regular class duties.

²Following approval by a representative committee.

³If not drastically changed from last copy.

⁴With expense reimbursement.

⁵Interested in reviewing final instrument.

⁶If doesn't greatly interfere w/regular classroom duties.

⁷Depends on acceptability of instrument.

⁸Will consider, need more information on changes required.

⁹With additional evaluation.

¹⁰Not prior to development

¹¹Curriculum on a semester rather than tri-semester basis.

¹²Would like more specific information.

¹³One of the three faculty members listed will be available to serve.

CHAPTER II

RESEARCH DESIGN

This study was Phase I of a multi-phase program which will hopefully end in a complete network of training facilities and advancement arrangements in the State of Oklahoma. The first phase consisted of designing a program which would attempt to account for the needs of persons trained at all levels of health skills and facilitate their upward mobility, and securing in writing the agreement of administrative personnel at all levels which would be necessary to implement such a program. The procedures followed in the study closely adhered to the original proposal (Appendix C). However, it was found that no two nursing or health-related programs in the State were exactly alike. Therefore, a detailed description of the requirements at each level of the profession was not economically feasible. It did, however, appear that certain commonalities were identifiable. For example, comparison of the curriculum requirements with the example nursing curriculum in Assessment of Nursing in Oklahoma 1970 (Oklahoma Board of Nurse Registration and Nursing Education, 1971) revealed most of the courses listed were covered in each level program though not always in the terms designated or under the titles listed. However, all programs prepared their students to pass state board or certification examinations and to practice competently on a given level. Thus, all graduates of similar programs should possess common competencies and skills and each type of program should have common goals which could be identified. (Appendix D contains an example of common curriculum requirements identified in this study.)

Selection of Participants

The sample of participants to be contacted in this study was selected using a purposive or judgment technique. This method of selection was felt to be more reliable for the purpose of this study than simple random sampling because of prior knowledge about the characteristics of the groups making up the population (Green and Tull, 1970; Frazier, 1972). Expert judgment in selecting the sample was provided by Mrs. Patricia Jamison, State Supervisor, Health Occupations Education Division and Project Director; and her assistant, Miss Yvonne Bender.

Methodology

1. The first step in this study was to communicate with selected leaders in health occupations education, via mail questionnaire and personal interview, to determine their ideas and opinions on a health occupations career mobility plan. A total of 69 directors of nursing and health related programs were contacted--28 via personal interview and 41 via mail questionnaire. There were three non-respondents on the mail questionnaire.

The President of the Oklahoma State Nurses Association and the Executive Director of the Oklahoma Board of Nurse Registration and Nursing Education were personally interviewed. (Appendix E contains the list of participants, letters, and questionnaire used in this initial facet of the study.)

2. In addition, a meeting was conducted on November 3 with a selected group of leaders in health occupations education for the purpose of describing our study, presenting a brief progress report, and obtaining their ideas and opinions on the following questions:

- a. Based on your experience, what features do you think should be included in a career mobility plan for Oklahoma?
- b. What factors do you see which could aid Oklahoma in establishing a career mobility program?
- c. What factors do you see which could serve as barriers in establishing a career mobility program in Oklahoma?
- d. How could these barriers be overcome?

The Delbecq Technique (Delbecq et al., 1971) was utilized in this meeting to obtain answers and a ranking of responses to these questions. This technique was found to be very successful as a committee decision-making tool. (Appendix F contains the results of this meeting and a listing of the individuals who attended.)

3. Dr. Eleanor G. Knudson, then Dean of the University of Oklahoma College of Nursing, on receiving our questionnaire made arrangements to meet with representatives of the College of Nursing faculty and staff; Dr. William Stevenson, Assistant State Director; Mrs. Patricia Jamison, State Supervisor of the Health Education Division and Project Director; and Mrs. Sharon Ward, Project Investigator, all of the Oklahoma State Department of Vocational and Technical Education, to discuss the feasibility study. (Appendix G lists the College of Nursing faculty and staff attending and the resulting information)

4. The data collected in steps one through three was interfaced with current literature on career mobility, including recently published statements on this subject by the Oklahoma State Regents for Higher Education.

5. Based on this synthesis, two Proposed Health Occupations Career Mobility Plans were designed (Appendix B, Plans I and II).

6. The members of the Oklahoma Board of Nurse Registration and Nursing Education were invited in their January 25-26, 1973 meeting to interpret the current policy of the Board relative to advanced standing via Credit by Examination. (Appendix H contains the information presented to the Board, the questionnaire used, and the Board's response.)

7. The Plans were then mailed to the directors of diploma nursing and associate degree and vocational nursing and health-related occupations programs contacted in this study for their critique and the written commitment of administrators, directors, boards and other individuals needed to implement the Plans. (Appendix I contains copies of the letters accompanying the Plans.)

8. Simultaneously, a copy of Plan I was mailed to Dr. Larry Hayes, Coordinator of Academic Research, Oklahoma State Regents for Higher Education, for the purpose of coordinating the Plan resulting from this study with the Regents' plan and to obtain his critique of the Plan which would involve collegiate-level (associate degree) programs. Subsequently, at Dr. Hayes' suggestion, a meeting was scheduled on February 14 with

Dr. Dan Hobbs to discuss this subject. The meeting was attended by Dr. Dan Hobbs, Dr. Larry Hayes, and Dr. Gerald Williams, representing the Regents and by Mrs. Patricia Jamison and Mrs. Sharon Ward of the Oklahoma State Department of Vocational and Technical Education. (Appendix J)

9. Telephone calls were made to all 63 recipients of the Plans beginning one week after the Plans were mailed to answer any questions, obtain a "feel" for their reactions to the Plans, and to urge prompt return of the Letters of Commitment or a critique of the Plans. (Follow-up telephone calls were made on February 19 to all program directors who had not responded by that date.)

10. Descriptions of currently available Career Mobility Plans which were identified in this study were mailed to those institutions which had implemented such plans for their critique and written permission to publish. (Appendix K)

11. Final reports were generated. (See Findings and Conclusions)

The Data Collection Instrument

In an effort to establish a degree of validity, the questionnaire (Appendix E) developed for this study was critiqued by a specialist in instrumentation, Dr. William Frazier, Director of the Research Coordinating Unit, and by two specialists in nursing education, Mrs. Jamison and Miss Bender, prior to its usage. All three were experienced in communicating with directors of occupational programs.

The instrument was designed to:

1. Determine the current feasibility of a career mobility program in Oklahoma. The responses on the questionnaire lend themselves to analysis using a modified "Adoption Process Model" (Miller, 1971; Hull, Frazier, and Stevenson, 1969). Tables III and IV provide such an analysis. Questions 2 and 3 were analyzed to determine current interest in the concept of Career Mobility; questions 4 through 9, to identify individuals understanding of the concept; questions 4 and 7, to obtain insight on value placed on career mobility by individual program directors (Note: a high degree of subjectivity was involved in determining value); questions 4, 7, 15, 16, and 17, to gain information on personal and individual preference for a particular career mobility approach; and questions 13 and 19, to determine possible personal and organizational commitments to the concept. This preliminary analysis helped to reveal the current status of program directors in the adoption process, as well as to provide insight on the most acceptable approach for career mobility in Oklahoma.
2. Identify the course content which was believed by program directors to be repeated when their students moved from one type of program to another (Appendix L).
3. Isolate for analysis the currently existing "barriers" to career mobility as perceived by the participants and elicit their opinions on "how these 'barriers' can be overcome." This information helped to provide cognizance of the real obstacles which must be circumvented if the Plan was to be accepted and implemented. (Appendix M)

TABLE III
SUMMARY TABULATION
ADOPTION PROCESS

Questions		Interest			Understanding	Valuing	Preference				Commitment											
Type of Program	Advanced Programs		Similar Programs				Preference				Personal	Organizational										
	Aware	Unaware	No Response	Aware			Unaware	No Response	Core Curriculum	Credit by Exam		Combination	No Preference	No Response	Do Not Know							
Health Service Careers	2	14	2	3	15	0	16	17	0	12	7	6	2	3	0	0	2	1	8	4	3	4
	1	4	1	0	6	0	4	4	2	2	2	1	0	1	2	0	0	4	4	2	2	0
	3	15	0	9	9	0	17	17	0	13	3	6	3	0	2	0	2	1	7	5	4	2
	6	3	0	4	5	0	9	9	0	8	1	6	1	0	4	0	2	1	6	5	0	0
	5	3	0	7	1	0	8	7	0	7	1	3	1	0	2	1	3	1	5	5	0	0
Associate Degree and Certificate Health Occupations	3	0	0	2	1	0	3	3	0	3	2	1	0	0	0	1	2	0	1	1	0	0
	0	3	0	2	1	0	3	3	0	1	0	2	1	1	0	1	1	2	0	0	0	0
Diploma Nursing																						
Baccalaureate Nursing																						

TABLE IV
ADOPTION PROCESS

Questions	Interest		Understanding		Valuing		Preference		Commitment	
	School	Similar Programs	Advanced Programs	No Response	Credit by Exam	Core Curriculum	Personal	Organizational	Personal	Organizational
(I=interview) (M=Mail Questionnaire)		No Response								Do Not Know
		Unaware								No Response
		Aware								Facilities
Health Service Careers Indian Capital ORT (M)		No Response								Faculty
		Unaware								Funds
		Aware								To Current Program Only
O. T. Autry (M)		No Response								
		Unaware								
		Aware								
Shawnee (M)		No Response								
		Unaware								
		Aware								
Tri-County Tech (M)		No Response								
		Unaware								
		Aware								
Hugo (M)		No Response								
		Unaware								
		Aware								
Okla. N.W. AVTS (M)		No Response								
		Unaware								
		Aware								
Canadian Valley (M)		No Response								
		Unaware								
		Aware								
Okla. N.W. AVTS (M)		No Response								
		Unaware								
		Aware								

[illegible]

School	Interest			Understanding			Valuing	Preference					Commitment				
	Advanced Programs		Similar Programs					Personal		Organizational			Personal	Organizational			
Practical Nursing Byng (M)	No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	
	No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x
	No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
No Response	Unaware	Aware	x	x	x												

[illegible]

School	Interest			Understanding			Valuing			Preference		Commitment	
	Advanced Programs	Similar Programs								Personal	Organizational		
S Okla. City Jr. College [H.O.] (I)	No Response												Willing to Implement
	Unaware												Do Not Know
	Aware	x	x										No Response
Tulsa Jr. College [H.O.] (I)	No Response												Facilities
	Unaware												Faculty
	Aware	x	x										Funds
Assoc. Degree (Nursing) EOSC (M)	No Response												For Current Policy Only
	Unaware												
	Aware	x	x										
Murray State College (M)	No Response												
	Unaware												
	Aware												
NOC (I)	No Response												
	Unaware												
	Aware												
S. Okla. City Jr. College (I)	No Response												
	Unaware												
	Aware												
OSU Tech (I)	No Response												
	Unaware												
	Aware												
Bacone (I)	No Response												
	Unaware												
	Aware												

Tulsa Jr. College (I)
Cameron (I)
Seminole (M)
Diploma
St. John's (I)
Hillcrest (I)
St. Anthony's (I)
Baccalaureate
CSU (I)
OBU (I)
TU (I)
OU (I)

4. Determine what, if anything, was currently being done in individual programs in Oklahoma to facilitate career mobility through advanced credit for previous education or experience. These individualized approaches could contain elements which should be included in the Plan which will result from this study. (Tables V and VI)
5. Identify opinion leaders and possible sources of funding (Appendix N).
6. Elicit information on the acceptability and availability of existing instruments for assessing student qualifications for advanced standing (Appendix O).

TABLE V
SUMMARY TABULATION OF THE PROGRAMS CONTACTED AND THEIR
CURRENT STATUS ON CAREER MOBILITY

	NURSING PROGRAMS				HEALTH OCCUPATIONS PROGRAM		
	LPN	AD	DIPLOMA	B.S.	M.S.	Voc.	AD or CERTIFICATE
Total No. of Program Directors Contacted	18	9	3	4	1	24	8
Program Directors Contacted Via Personal Interview	4	6	3	4	1	7	3
Mail Questionnaire	14	3	0	0	0	17	5
¹ Currently Have an Implemented Career Mobility Plan	6	*4	2	2	0	2	*6
² Are Developing or Have Plans to Develop Means for Granting Advanced Standing	2	5	2	1	1	1	4
Interested in Participating in a Career Mobility Model Program	5	6	0	0	0	7	5
Have Indicated a Willingness to Serve On a Committee to Develop Means for Assessing Student Qualifications for Advanced Standing	15	7	3	1	0	16	7

NOTE: ¹Some additional Career Mobility Programs have been implemented since original tabulation included with the plans.

²Some replication from item above. While some programs have limited Career Mobility Plans available, they may also be working on means to expand opportunities for advanced standing.

*South Oklahoma City Junior College and Northern Oklahoma College have Nursing and Health Occupations programs included in their Plan for Career Mobility. Therefore a total of 20 rather than 22 currently implemented Plans exist.

TABLE VI
PROGRAMS CONTACTED
AND THEIR CURRENT STATUS ON
CAREER MOBILITY

School	Mail Questionnaire	Personal Interview	Have plan for granting advanced standing	Are developing or have plans to develop plan for advanced standing	Interested in participating in a Career Mobility Model Program	Have indicated a willingness to serve on a committee to develop means for assessing student qualifications for advanced standing
Masters Nursing Program - Okla. Univ.		x		x		Juanita Millsap
Baccalaureate Nursing Programs		x		x		
Central State University		x				
Oklahoma Baptist University		x	x			
Tulsa University		x	x			
Oklahoma University		x	x	1		
Totals		4	2		0	1
Diploma Nursing Programs						Virginia Anderson
St. John's		x	x	x		Charline Buck
Hillcrest		x				Carol Bryant
St. Anthony's		x	2	2	Need More Info	
Totals		3			0	3

[illegible]

School	Mail Questionnaire	Personal Interview	Have plan for granting advanced standing	Are developing or have plans to develop plan for advanced standing	Interested in participating in a Career Mobility Model Program	Have indicated a willingness to serve on a committee to develop means for assessing student qualifications for advanced standing
Great Plains AVTS		x	x		x	Edna Hill
Central Okla. AVTS		x			x	Jan Harris
Oklahoma City		x	x		x	Peggy McClain
Gordon Cooper AVTS				x 2	5	Pearl Hill
Totals	14	4	6			15
Health Service Careers						
Muskogee ORT	x		x		x	Idella Hughes
O. T. Autry	x					Terry Carmichael
Shawnee	x				x	
Tri-County Tech	x					Ruby Patterson
Hugo	x					Virginia Owens
Oklahoma NW AVTS (Alva)	x					(Perhaps)
Canadian Valley AVTS						Aileen Bland
Okla. NW AVTS (Fairview)	x					(Reim. for substitute)
Western Okla. AVTS	x					Neyssa Davis
Midwest City High	x					
Pawhuska	x					
Drumright	x					
Kiamichi AVTS (McAlester)	x					
Okla. City Skills Center	x		x		x	Rita Marak
						Doris Golab

[illegible]

CHAPTER III

FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS ¹

Findings

Related to Features of the Plans

1. A number of national and state authority organizations in nursing and education supported career mobility.
2. Program directors seemed to take considerable pride in the "individuality" of their nursing and health-related programs.
3. On the baccalaureate level, the program directors were willing to continue with their current policies for granting advanced standing but stated they lacked the time to make a personal or institutional commitment to a career mobility plan developed in this study.
4. Thirteen of the thirty directors of diploma nursing programs, collegiate nursing and health-related programs, and vocational health-related programs contacted in this study preferred a credit by examination approach; while six indicated a preference for a core curriculum approach; three, a preference for a combination approach; and eight, no preference.
5. Of the thirty-six licensed practical nursing and health service careers program directors contacted, ten preferred a core curriculum approach, twelve preferred a credit by examination approach; eight, a combination of both approaches; and six indicated no preference.
6. While health occupations educators agreed there were skills and attitudes common to most nursing and health-related programs, they indicated there were differences in the depth at which various types of programs cover the content.
7. There was concern on the part of some nursing program directors over a difference in focus from one program to another. (It seemed to this researcher that the term philosophy was frequently used as synonymous with focus and goals.)

¹ Findings of this study relate only to individual and institutional responses during the time period of the study. Our conclusions and recommendations, therefore, are based on findings as interpreted at the time of this writing.

8. There were program directors at all levels who thought both theory and performance testing was needed to adequately assess a student's qualifications for advanced standing in nursing and health-related fields.
9. There was hesitancy on the part of some nursing program directors to agree to grant credit for courses taught in other programs without extensive validation that the material had been mastered.
10. When asked to identify available instruments for assessing student qualifications for advanced standing, few program directors were aware of such instruments and of those identified, many were considered "unacceptable."
11. Channels of information flow between various health occupations programs were limited.
12. Some program directors at each level indicated that committee efforts should be utilized to open lines of communication and overcome some of the existing barriers.
13. The Oklahoma Board of Nurse Registration and Nursing Education required that major curriculum changes be approved by the Board (Oklahoma Board of Nurse Registration and Nursing Education, 1968).
14. The Oklahoma Board of Nurse Registration and Nursing Education indicated that the Board approves individual programs.
15. The Oklahoma Board of Nurse Registration and Nursing Education by not answering the questions included on the questionnaire placed on their agenda for the January, 1973, meeting did not fully interpret their policy on credit by examination.
16. Oklahoma State Regents for Higher Education policies recommended that learning achieved in ~~non-collegiate~~ institutions and through work experience must be "evaluated and validated through examinations or proficiency testing by the receiving institution" before an individual could receive advanced standing in a collegiate program (Oklahoma State Regents, July, 1972).
17. Our February 14, 1973, meeting with three members of the Oklahoma State Regents for Higher Education did not result in any comments, suggestions or endorsement of Plan I. It was learned that any statement regarding the Plan should originate in discussions between the State Director of the Oklahoma State Department of Vocational and Technical Education and the Chancellor for the Oklahoma State Regents for Higher Education.
18. The Oklahoma State Regents for Higher Education were conducting research on Nursing Education in Oklahoma for the purpose of developing A State Plan for College Level Programs. A state plan for all nursing education in Oklahoma would include articulation. Dr. Hobbs in the February 14 meeting asked Mrs. Jamison if she "would be interested in the articulation aspect-in participating along with some directors of vocational nursing programs in sitting down and visiting about this aspect." Mrs. Jamison agreed.

Related to Currently Available Career Mobility Plans

19. Two baccalaureate level nursing programs in Oklahoma, Tulsa University and the University of Oklahoma, had career mobility plans which allowed individuals with previous nursing and/or health-related education or experience to seek advanced standing in nursing courses.
20. The advanced standing policy of the Central State University College of Nursing allowed advanced standing only in academic courses.
21. Twenty-one nursing and health-related programs in Oklahoma which had formal policies for granting advanced standing to qualified students with previous nursing or health-related education or experience were identified in this study.
22. Eight programs had been identified in this study which were developing or had plans to develop means for granting advanced standing to individuals with previous nursing or health-related education or experience.
23. Of the sixty-three program directors to whom the Plans were mailed, thirty-two made written commitments to use a publication describing implemented career mobility plans to inform their students and interested individuals of available opportunities for receiving advanced standing in nursing or health-related programs.
24. Eighteen of the twenty-one implemented career mobility programs in Oklahoma which were identified in this study have granted permission to describe their available plans in a publication (Table VII).

Related to Feasibility

25. Ten of the eighteen licensed practical nursing program directors and fourteen of the eighteen health service careers program directors contacted in this study were interested in "participating" in the implementation phase of a career mobility model program using the curriculum currently being revised for Area I. This would allow individuals who had completed a health service careers program utilizing the revised Area I curriculum to enter a licensed practical nursing program utilizing the same curriculum at the Area II level.
26. Of the sixty-three program directors to whom the Plans were mailed, sixteen health service careers, five vocational health occupations, fifteen licensed practical nursing, ten associate degree nursing and health occupations and two diploma nursing program directors had made written commitments to serve on a committee to assess or develop means for granting advanced standing to students with previous nursing or health-related education or experience.
27. Of the forty-three institutions contacted in this study, twenty-two had agreed to utilize the proposed instruments developed in Phase II of this project in their nursing or health-related programs to grant advanced standing to individuals with previous nursing or health-related education or experience.
28. Ten program directors had not made written commitments to the Plans.

TABLE VII
HEALTH OCCUPATIONS CAREER MOBILITY PROGRAMS
IN OKLAHOMA WHICH WERE IDENTIFIED IN
THIS STUDY

<u>PROGRAM</u>	<u>PERMISSION TO PUBLISH</u>
<u>Graduate Program</u>	
University of Oklahoma College of Nursing	Yes
<u>Baccalaureate Programs</u>	
University of Oklahoma College of Nursing	Yes
University of Tulsa College of Nursing	Yes
Central State University College of Nursing	Yes
University of Oklahoma Health Sciences Center	No Response
<u>Certificate and Diploma Programs</u>	
University of Oklahoma Respiratory Therapy Program	Yes
Hillcrest Diploma Nursing Program	Yes
St. John's Diploma Nursing Program	Yes
<u>Associate Degree Programs</u>	
Bacone College (Nursing)	Yes
Connors Jr. College (Med. Lab. Tech.)	Yes
Tulsa Jr. College (Nursing and Health Occupations)	Yes
Oscar Rose Jr. College (Health Occupations)	¹ No
Northern Okla. College (Nursing and Health Occupations)	Yes
South Oklahoma City Jr. College (Health Occupations)	Yes
<u>Practical Nursing and Vocational Health Related Programs</u>	
Northeastern Oklahoma A&M College	Yes
Kiamichi Area Vocational and Technical School	Yes
Oklahoma City Vocational School of Practical Nursing	Yes
Indian Capital Area Vocational-Technical School	Yes
Great Plains Area Vocational-Technical School	Yes
Clinton Vocational School of Practical Nursing	Program Closing
Oklahoma City Skills Center	Yes

¹The Career Mobility Plan at Oscar Rose Junior College varies with each health related program. For additional information contact Lloyd Hill, Chairman, Health Occupations.

Other Important Considerations

29. Career mobility was a popular concept in nursing and health-related professional journals.
30. Program directors at all levels emphasized that current demands on their schedules left little time to develop means for assessing student qualifications for advanced standing.
31. Protocol in dealing with the Oklahoma State Regents for Higher Education required communications from the State Director of the Oklahoma State Department of Vocational and Technical Education with the Chancellor.
32. Protocol in dealing with the Oklahoma Board of Nurse Registration and Nursing Education was to first contact the Executive Director.
33. Comparison of data in Table III and IV with Tables I and II indicated some program directors made greater commitments than they originally indicated while others made lesser commitments.
34. All three program directors who did not respond to the initial questionnaire wrote letters expressing a degree of commitment to the Plans.
35. It seemed to this researcher some program directors desired to employ more stringent screening standards for individuals seeking advanced standing in their programs than from initial beginning applicants.
36. In the opinion of this investigator, some program directors had a greater concern with preparing students to pass State Boards than with meeting the other educational objectives of the program. Extensive subjective screening was utilized in most programs.
37. It further seemed to this researcher that licensed practical nursing program directors felt they must be more accountable to the Board of Nurse Registration and Nursing Education than did associate degree, diploma, and baccalaureate program directors.
38. Only two of the letters of commitment received from collegiate level programs stipulated that usage of the instruments developed would be contingent upon "Regents" approval.

Conclusions

Related to Features of the Plans

1. The supporting statements given by state authority organizations relative to career mobility helped substantiate the need for career mobility and should be included in the Plans.

2. A plan for career mobility should allow for flexibility and should not be so detailed that it could be interpreted as threatening to "local" control.
3. Personal or institutional participation by baccalaureate programs in a career mobility plan developed in this study seems unlikely.
4. A plan for facilitating the mobility of individuals with previous non-collegiate education or experience into collegiate programs should utilize a "credit by examination" approach.
5. The plan for career mobility in vocational licensed practical nursing and health service careers programs should contain elements of both the "core curriculum" and "credit by examination" approaches.
6. Ideally a plan for career mobility should allow a student to challenge modules of course content and should offer open entry and exit. South Oklahoma City Junior College is the only program in the State which at the time of this writing had such a plan and they indicated an interest in participating in the implementation phase of this study.
7. Common behavioral objectives and goals should be identified for all modules within a course and used as a basis for developing instruments of assessment.
8. The instruments for evaluating a student's qualifications for advanced standing developed or assessed as a result of this study should include provisions for testing both theory and performance.
9. Initially, some licensed practical nursing program directors may want to individually evaluate students desiring to enter Area II from a "participating" health services careers program.
10. Since few acceptable instruments appeared to be available for assessing student qualifications for advanced standing, the Plans should include provisions for assessing or developing instruments.
11. There was a need for improved communication flow between various levels of health occupations education.
12. The Plans should provide individual program directors and/or instructors with an opportunity to participate in future phases of this project so that those implementing the plan will have an input in the development stages.
13. The Plans should include committee participation in future phases of this project.
14. The Oklahoma Board of Nurse Registration and Nursing Education, by policy, had not made any type of statement which could be interpreted as an endorsement of a state plan but stated "as faculty in the separate schools of

nursing develop plans for acceleration or career mobility and encounter difficulties related to specific criteria, they are encouraged to consult with the Board."

15. The Oklahoma Board of Nurse Registration and Nursing Education had not made a formal statement regarding their jurisdiction in the realm of credit by examination but stated "the degree of usage by schools is determined by the educational objectives of the programs and the readiness of the faculty to institute such plans."
16. A plan for direct transfer of credits from vocational programs to collegiate programs does not seem feasible at this time since vocational programs do not offer collegiate level credits.
17. The initial plans for articulation of curriculum between the levels of practice should be confined within occupational areas.
18. Open communications appeared necessary between organizations with primary responsibility for collegiate programs and those with primary responsibility for vocational programs and would require strict observation of protocol to maintain.

Related to Currently Available Career Mobility Plans

19. A number of program directors in Oklahoma were sufficiently interested in career mobility to take a personal initiative in providing opportunities for individuals interested in expanding their competencies and skills to move up to the career ladder.

Related to Feasibility

20. It is feasible to implement an integrated curriculum approach on a "model program" basis in Oklahoma.
21. It is feasible to assess and/or develop instruments for evaluating student qualifications for advanced standing as outlined in Plans I and II.
22. It is realistic to expect that exams developed or assessed according to Plans I and II will be utilized by program directors for the purpose of facilitating career mobility.

Other Important Considerations

23. For maximum cooperation to be achieved between State agencies and boards, channels of communication should be less stringent.
24. At the time of this writing, it appeared individual screening would continue to be a means of assessment employed by nursing and health-related program directors.

25. In some cases, it appeared that the sub-goal or objective of passing state boards had taken precedence over offering students career development opportunities.
26. There appeared to be a need to discuss the concept of subjective screening with program directors and increase their awareness of the functions and dysfunctions of such subjectivity.

Recommendations

SINCE

- forty-eight individual nursing and health-related program directors have made written commitments to serve on committees to evaluate, and where necessary, develop advanced standing theory and performance tests for facilitating career mobility of individuals with previous nursing and health-related education or experience as outlined in Plans I and II;
- twenty-two institutions have agreed to utilize these instruments in their programs for granting advanced standing to qualified individuals; and
- a total of twenty-four licensed practical nursing and health service careers program directors have agreed to implement an integrated curriculum as outlined in Plan II;

IT IS RECOMMENDED

1. That preparations be made to move into Phase II of this project by:
 - a. determining the Oklahoma State Regents for Higher Education approval requirements for implementing Plan I.
 - b. surveying students and individuals working in health occupations to determine if they are interested in career mobility.
 - c. employing an individual knowledgeable in instrument evaluation and development as well as health and health-related occupations to carry out Phase II.
 - d. informing program directors (who have indicated a willingness to participate in future phases of this study) as soon as possible of the Plans for Phase II and keeping them informed through periodic progress reports throughout this second phase.
 - e. completing, as soon as possible, the revision of the articulated curriculum for Area I of the licensed practical nursing program.
 - f. providing program directors with a clarification of the rules and regulations of the Oklahoma Board of Nurse Registration and Nursing Education as they apply to the Plans.
2. A discussion of the functions and dysfunctions of subjective screening, as well as the areas in which the Oklahoma Board of Nurse Registration and Nursing Education has authority, be included in one of the future inservice-training sessions.

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Appendix A

STATEMENTS FROM NATIONAL AND STATE AUTHORITY ORGANIZATIONS SUPPORTING CAREER MOBILITY

National Organizations

In February, 1972, the Board of Directors, National League for Nursing (1972) resolved:

Nursing Education should provide for student mobility according to the individual's ability, changing career goals and changing aspirations. The Board recognizes the potential of mobility from other health related fields.

A similar resolution was adopted by the National Student Nurses' Association in 1969 at their meeting in Detroit:

In order to insure the maximum utilization of manpower, let it be resolved that the National Student Nurses' Association support the concept of vertical mobility and be it further resolved that the National Student Nurses' Association support the development and demonstration of nursing education programs which recognize the individual's previously acquired education, skills, life experiences, and provide flexible program patterns which the individual may enter at his level of achievement. (Katzell, 1970)

State Organizations

In Oklahoma Higher Education--A Plan for the '70s, the Oklahoma State Regents for Higher Education (1971) recommended:

Institutions should be sensitive to the need for instructional and educational innovations in the preparation of institutional master plans for the decade of the 1970s. In an effort to meet the needs of students and Oklahoma citizens for higher education in the decade ahead, Oklahoma colleges and universities should carefully consider such approaches as individualized instruction, advanced standing and challenge examinations, cooperative education, extramural degrees, joint degree programs, new calendar approaches, televised instruction, and other promising avenues to improve efficiency and effectiveness.

The development of greater flexibility in teaching and learning through the use of such devices as individualized study, external degrees, televised instruction, and cooperative education will inevitably give rise to the need for evaluation of what students have learned apart from participation in formal classroom study. Therefore, institutions should give immediate attention to the development of standards and criteria by which to measure student learning acquired apart from the academic setting and to allow for the awarding of appropriate credit for such learning...In practical terms the adoption of such a concept would mean that students would no longer

be required automatically to sit through eight semesters of three-hour classes until enough hours have been accumulated to graduate. Rather, graduation would be dependent upon the achievement of predetermined standards and objectives established by the faculty, regardless of where or when such learning may have occurred.

Formal transfer policies should be developed by 1973 to assure that a graduate of a public two-year college in Oklahoma who has successfully completed the general education requirements for the associate degree will be eligible to transfer his work to a four-year college or university without the necessity of completing additional lower-division general education courses.

In October, 1972, the State Department of Vocational and Technical Education funded a study to determine if Career Mobility in Health Occupations is feasible in Oklahoma. In the proposal for this study Dr. Bill Stevenson, Assistant State Director, wrote:

The critical situation in health manpower needs makes it imperative that we take the best of what we know about training people for health occupations, the most efficient of the experimental attempts at facilitating upward mobility and develop from these a formal, organized, widely-agreed upon, and accepted program for assuring the most effective and efficient advancement of persons interested in expanding their competencies and their responsibilities in the health area.

The Oklahoma Board of Nurse Registration and Nursing Education recommended in the Assessment of Nursing in Oklahoma 1970:

....That faculties in all types of nursing education programs review their admission and placement procedures in consideration of the statements on "open curriculum," and "vertical mobility," as one means of increasing the effectiveness of each program in evaluating the individuality of potential students and in improving the quality of nursing services available.

Appendix B

PLAN I

A PROPOSED HEALTH OCCUPATIONS CAREER MOBILITY PLAN FOR OKLAHOMA

In published statements and actions during the past two to three years, a number of state boards and departments have recognized a need to reassess current institutional policies for granting advanced standing to individuals with previous learning and experience.

The Oklahoma Board of Nurse Registration and Nursing Education recommended in the Assessment of Nursing in Oklahoma 1970:

... That faculties in all types of nursing education programs review their admission and placement procedures in consideration of the statements on "open curriculum," and "vertical mobility," as one means of increasing the effectiveness of each program in evaluating the individuality of potential students and in improving the quality of nursing services available. (page 110)

In their Oklahoma Higher Education--A Plan for the '70s, the Oklahoma State Regents for Higher Education (1971) recommended:

Institutions should be sensitive to the need for instructional and educational innovations in the preparation of institutional master plans for the decade of the 1970s. In an effort to meet the needs of students and Oklahoma citizens for higher education in the decade ahead, Oklahoma colleges and universities should carefully consider such approaches as individualized instruction, advanced standing and challenge examinations, cooperative education, extramural degrees, joint degree programs, new calendar approaches, televised instruction, and other promising avenues to improve efficiency and effectiveness.

The development of greater flexibility in teaching and learning through the use of such devices as individualized study, external degrees, televised instruction, and cooperative education will inevitably give rise to the need for evaluation of what students have learned apart from participation in formal classroom study. Therefore, institutions should give immediate attention to the development of standards and criteria by which to measure student learning acquired apart from the academic setting and to allow for the awarding of appropriate credit for such learning...In practical terms the adoption of such a concept would mean that students would no longer be required automatically to sit through eight semesters of three-hour classes until enough hours have been accumulated to graduate. Rather, graduation would be dependent upon the achievement of predetermined standards and objectives established by the faculty, regardless of where or when such learning may have occurred.

Formal transfer policies should be developed by 1973 to assure that a graduate of a public two-year college in Oklahoma who has successfully completed the general education requirements for the associate degree will be eligible to transfer his work to a four-year college or university without the necessity of completing additional lower-division general education courses.

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The critical situation in health manpower needs makes it imperative that we take the best of what we know about training people for health occupations, the most efficient of the experimental attempts at facilitating upward mobility and develop from these a formal, organized, widely-agreed upon, and accepted program for assuring the most effective and efficient advancement of persons interested in expanding their competencies and their responsibilities in the health area.

In this study, 28 program directors in nursing and health-related educational programs were personally interviewed and 39 were contacted via mail questionnaire for their opinions and ideas on "career mobility." Based on the results of this study, it would appear that "the time is ripe for action" on career mobility. Our findings, see Table I, indicate that 16 nursing and health-related programs have implemented Career Mobility Plans, an additional 16 are developing or have plans to develop methods for granting advanced standing and 23 are interested in participating in a Career Mobility Model Program. Based on the input of 67 nursing and health-related program directors and current literature on national career mobility plans, the following Plan is submitted for your approval.

The Plan

While collegiate level programs can currently accept comparable transfer credits for students moving from one accredited college program to another, based on an evaluation of course descriptions and the student's transcript, the "Standards of Education Relating to Advanced Standing Credit" policy statement by the Oklahoma State Regents for Higher Education (July, 1972) recommends:

Work taken at proprietary schools, secondary vocational-technical schools, institutions offering clock-hour work, and other non-collegiate institutions must be evaluated and validated through examination or proficiency testing by the receiving institution. The name of the sending institution (proprietary school, secondary vocational-technical school, clock-hour school) shall not appear on the transcript of the awarding institution.

Recommended methods for evaluating students' previous learning experiences for awarding of advanced standing credit are:

- a. Institutionally prepared examinations, including performance testing.
- b. Standardized national tests especially designed for establishment of credit....
- c. Recognition of military service experiences...upon the basis of criteria and recommendations contained in the publication of the American Council on Education especially designed for that purpose.

The amount of advanced standing credit which may be awarded shall not exceed one-half of the total semester hours required at the lower-division level, and not more than one-half of the total semester hours required at the upper-division level.

Yet, in many health occupation areas standardized tests for assessing student qualifications for advanced standing do not exist and those which have been developed for nursing are in many instances viewed inadequate by program directors. Therefore, provisions must be made to evaluate or develop adequate testing instruments.

A total of 18 of the 25 directors of professional nursing and health-related programs, and 31 of the 42 directors of vocational nursing and health-related programs contacted in this study have indicated a willingness either in personal interviews or via mail questionnaire to serve on committees or in other ways to assess instruments for evaluating student qualifications for advanced standing. It is proposed that these individuals convene for the purpose of developing, or in cases where such instruments are available, evaluating, achievement tests to assess previous experience and/or non-collegiate training.

Development or evaluation of instruments with the assistance of volunteers from a number of nursing and health-related programs will allow for the pooling of judgment of many competent teachers and testing specialists (Garrett, 1959). The resulting instrument(s) will be based on a diversity of experience and an analysis of a wide range of textbooks, courses of study and numerous sets of exams, thus offering a much broader base for acceptability. Further, by utilizing a standard test in a number of programs across the state, norms for the participating population can be established.

A recurring concern of many program directors was that the "individuality of each program be respected." Examination of curricula at both the vocational and professional level revealed that no two programs were exactly alike. However, close scrutiny yielded many basic similarities. Further, all were found to have the common goal of preparing individuals to successfully pass state board or certification exams and to practice

competently on a technical or professional level. Thus, all graduates of similar programs possess common competencies and skills and each type of program has common goals which can be identified. (See Appendix A for Identification of Some of the Nursing Commonalities published by the Oklahoma Board of Nurse Registration and Nursing Education in Assessment of Nursing in Oklahoma 1970). It would seem, therefore, while approaches to content within each educational setting may differ, common behavioral objectives are identifiable.

An initial step in developing or evaluating instrument(s) of assessment would be to delineate those programs which train nurses from those which train for other health occupations. Further delineation will be needed by health occupation specialty.

Then, currently existing instrument(s) will be examined and evaluated. Preferably agreement can be reached on already existing instrument(s). However, should it be necessary to develop instrument(s), the following steps, among others, are proposed:

- (1) Subject areas in which exams are needed will be identified.
- (2) Within each subject area, basic sub-areas (modules) of content which must be mastered in order to practice proficiently will be identified. The amount of classroom time spent in each module will be estimated. Based on these estimates, percentage weights will be assigned to each module.
- (3) Behavioral objectives can then be developed for each module of content.
- (4) Portions of content which require paper and pencil assessment will be identified.
- (5) Portions of content which require performance evaluation will be specified.
- (6) Finally, both theory and performance tests will be developed to measure the behavioral objectives identified in step 3. The percentage of time spent in each sub-area of content will be considered in arriving at the number of questions for each module.

Validity and reliability will be established based on traditionally accepted methods. Committee decisions will be made concerning the minimum passing grade requirements on the instrument(s), provisions for standardization and periodic updating of the instrument(s), procedures for feedback, and evaluation.

A number of Career Mobility Plans are currently implemented in Oklahoma. However, in many instances, the individuals who could profit from these opportunities for career mobility are unaware of their existence. One function of this plan is to operationalize means for providing information on currently operating plans for granting advanced standing to individuals with previous nursing or health-related experience.

The currently operating Career Mobility Plans which were identified in this study will be described; sent to the implementing institution for their critique, comments and approving signature; and published in a report to be distributed to those institutions interested in receiving a copy.

PLAN II

A PROPOSED HEALTH OCCUPATIONS CAREER MOBILITY PLAN

In published statements and actions during the past two to three years, a number of state boards and departments have recognized a need to reassess current institutional policies for granting advanced standing to individuals with previous learning and experience.

The Oklahoma Board of Nursing Registration and Nursing Education recommended in the Assessment of Nursing in Oklahoma 1970:

. . . .That faculties in all types of nursing education programs review their admission and placement procedures in consideration of the statements on "open curriculum," and "vertical mobility," as one means of increasing the effectiveness of each program in evaluating the individuality of potential students and in improving the quality of nursing services available. (page 110)

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Formal transfer policies should be developed by 1973 to assure that a graduate of a public two-year college in Oklahoma who has successfully completed the general education requirements for the associate degree will be eligible to transfer his work to a four-year college or university without the necessity of completing additional lower-division general education courses. (page 23)

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most effective and efficient advancement of persons interested in expanding their competencies and their responsibilities in the health area.

In this feasibility study, 28 program directors in nursing and health-related educational programs were personally interviewed and 39 were contacted via mail questionnaire for their opinions and ideas on "career mobility." Based on the results of this study, it would appear that there is considerable interest in career mobility in Oklahoma. Our findings, see Table I, indicate that 16 nursing and health-related programs have implemented career mobility plans, an additional 16 are developing or have plans to develop methods for granting advanced standing and 23 are interested in participating in a career mobility model program. Based on the input of 67 nursing and health-related program directors and current literature on national career mobility plans, the following Plan is submitted for your approval.

THE PLAN

To Facilitate Career Mobility in Nursing and Health-Related Programs

APPROACH I--PROGRAMS

While current Oklahoma State Regents for Higher Education policies do not at this time provide for planning curriculum for the entire program from Nursing Assistant through the Baccalaureate Degree with "peel off" levels for each job entry accomplishment, it is possible through cooperative effort of the program directors and instructors in Vocational Health Occupations Education to establish planned articulation which will allow the Nursing Assistant to move into a Licensed Practical Nursing Program without needless repetition of content which has already been mastered.

Today a Nursing Assistant certificate is not one-third of a Licensed Practical Nursing Program--but it could be. A Licensed Practical Nursing Program is not the first year of an Associate Degree Nursing Program--but it could be. An Associate Degree in Nursing is not one-half of a Baccalaureate Degree in Nursing--but it could be. These possibilities can come about through planned articulation between levels of nursing career education (Colorado Nurse, July, 1972).

Currently, a priority for the Health Occupations Education Division is the review and integration of Health Occupations Nursing Programs curricula with the idea of

facilitating mobility. The first phase was to identify appropriate content in Area I of the Practical Nursing Program. This content was identified by a volunteer review committee and the first draft of this revision was mailed to you for comments and review on November 17. The committee will be reworking the draft according to your suggestions.

It is proposed that the approved revision of Area I be adopted by all participating Licensed Practical Nursing Programs and be utilized as the new revised curricula for Nursing Assistant Programs. This would allow individuals who have completed the upgraded Nursing Assistant Program desiring to continue their training in a participating Licensed Practical Nursing Program to move directly into Area II of the Practical Nursing Program.

This proposed plan would allow individuals who have already shown a commitment to the nursing profession to expand their competencies. Further, it would allow more efficient utilization of both training time and money.

APPROACH II--ASSESSMENT

Many authority organizations such as those previously quoted, as well as educators, employers and employees in health occupations, and laymen have in recent years recognized that mastery of knowledges and skills may be gained in a variety of ways--including formal learning in collegiate and non-collegiate institutions as well as informal learning apart from participating in formal classroom study.

Yet, in many health occupations areas, few acceptable standardized instruments exist which may be used by formal educational institutions to assess informal learning and by collegiate programs to assess learning obtained in non-collegiate programs. Therefore, provisions must be made to evaluate and/or develop adequate and widely-accepted testing instruments.

Findings of this research study indicate that 31 of the 42 Directors of Vocational Nursing and Health-Related Programs contacted were willing to work on committees to develop means for assessing student qualifications for advanced standing. It is proposed that these individuals meet with the representatives of college-level Nursing and Health-Related Programs who have also volunteered to serve on committees for the purpose of developing or, in cases where such exams are available, evaluating, achievement tests to assess previous experience and non-collegiate training.

Development or evaluation of exams through these committees would allow for the pooling of judgment of many competent teachers and testing specialists (Garrett, 1959).

The resulting exam(s) would be based on a diversity of experience and an analysis of a wide range of textbooks, various courses of study and numerous sets of exams, thus offering a much broader content base for acceptability. Further, by utilizing a standard test in a number of programs across the state, norms for the participating population can be established.

A recurring concern of many program directors was that the "individuality of each program be respected." Examination of curriculums at both the vocational and professional level revealed that no two programs were exactly alike. However, close scrutiny yielded many basic similarities. Further, all were found to have the common goal of preparing individuals to successfully pass state board or certification exams and to practice competently on a technical or professional level. Thus, all graduates of similar programs possess common competencies and skills and each type of program has common goals which are identifiable. (See Appendix A for Identification of the Nursing Commonalities published by the Oklahoma Board of Nurse Registration and Nursing Education in Assessment of Nursing in Oklahoma 1970.) Therefore, it would seem, while approaches to content within each educational setting may differ, common behavioral objectives are identifiable.

An initial step in developing or evaluating challenge exams would be to delineate those programs which train nurses from those which train for other health occupations. Further delineation will be needed by health occupation specialty. Then currently existing instruments will be examined and evaluated. Preferably agreement can be reached on an already existing instrument. However, should it be necessary to develop an instrument, the following steps are proposed:

- (1) Subject areas in which exams are needed will be identified.
- (2) Within each subject area, basic sub-areas (modules) of content which must be mastered in order to practice proficiently will be identified. The amount of classroom time spent in each area will be estimated. Based on these estimates, percentage weights will be assigned to each area.
- (3) Behavioral objectives can then be developed for each sub-area (module) of content.
- (4) Portions of content which require paper and pencil assessment will be identified.

- (5) Portions of content which require performance evaluation will be specified.
- (6) Finally, both theory and performance tests will be developed to measure the behavioral objectives identified in step 3. The percentage of time spent in each sub-area of content will be considered in arriving at the number of questions for each module.

Validity and reliability will be established based on traditionally accepted methods. Committee decisions would be made concerning minimum passing grade requirements, provisions for standardization and updating, and procedures for feedback and evaluation.

INFORMATION DISSEMINATION

A number of Career Mobility Plans are currently implemented in Oklahoma. However, often individuals who could benefit from career mobility opportunities are unaware of their existence. One function of this plan is to operationalize means for providing information on currently operating plans for granting advanced standing to individuals with previous nursing or health-related experience.

The currently operating Career Mobility Programs which were identified in this study will be described; sent to the implementing institutions for their critique, comments and approving signature; and published in a report to be distributed to those institutions interested in receiving a copy.

TABLE I
SUMMARY TABULATION OF THE PROGRAMS CONTACTED AND THEIR
CURRENT STATUS ON CAREER MOBILITY

	NURSING PROGRAMS				HEALTH OCCUPATIONS PROGRAMS		
	LPN	AD	DIPLOMA	B.S.	M.S.	Voc.	AD or CERTIFICATE
Total No. of Program Directors Contacted	18	9	3	4	1	24	8
Program Directors Contacted Via Personal Interview	4	6	3	4	1	7	3
Mail Questionnaire	14	3	0	0	0	17	5
Currently Have an Implemented Career Mobility Plan	6	2	1	2	0	2	3
Are Developing or Have Plans to Develop A Plan for Mobility	2	5	2	1	1	1	4
Interested in Participating in a Career Mobility Model Program	5	6	0	0	0	7	5
Have Indicated a Willingness to Serve On a Committee to Develop Means for Assessing Student Qualifications for Advanced Standing	15	7	3	1	0	16	7

*REQUIREMENTS IN NURSING EDUCATION PROGRAMS

EDUCATIONAL PREPARATION

PRACTICAL NURSE

1. 10th grade or equivalent as determined by the State Department of Education.
2. Successful completion of approved nursing curriculum (12 months--245 instructional days.)
3. Standard score of 350 on state board examination for practical nurses.

ASSOCIATE DEGREE

1. Has completed an approved high school course of study or the equivalent thereof as determined by the State Department of Education.
2. Successful completion of a basic curriculum of an approved nursing school. (minimum 68 hours--more may be required in some colleges.)
3. Standard score of at least 350 in each subject on the state board examination for registered nurses.

HOSPITAL DIPLOMA

1. Has completed an approved high school course of study or the equivalent thereof as determined by the State Department of Education.
2. Successful completion of an approved nursing curriculum (minimum 27 months.)
3. Standard score of at least 350 in each subject on the state board examination for registered nurses.

BACCALAUREATE DEGREE

1. Has completed an approved high school course of study or the equivalent thereof as determined by the State Department of Education.
2. Successful completion of a basic professional curriculum of an approved school of nursing. (4 to 5 years in college or university.)
3. Standard score of at least 350 in each subject on the state board examination for registered nurses.

* From: Oklahoma Board of Nurse Registration and Nursing Education. Assessment of Nursing in Oklahoma in 1970: Source Book, 1971.

CURRICULUM

Curriculum Plan reflects the purpose and philosophy of the school and provides for the achievement of the program objectives. Non-nursing courses may be taught by non-nurses. Clinical Nursing courses are taught by nurses and consist of both classroom instructions and patient care experiences.

PRACTICAL NURSE

1. Fundamentals of Practical Nursing. Courses which provide a foundation for nursing care.
2. Clinical experience in: nursing mothers and babies, nursing children, nursing medical and surgical patients.
3. Technic-centered, but lacks scope and depth in nursing.

HOSPITAL DIPLOMA

1. Essentials of curriculum-biological and physical science, behavioral science, nursing science.
2. Clinical experience in: medical-surgical nursing, maternal-child nursing, mental health nursing.
3. Technic-centered.

ASSOCIATE DEGREE

1. General education constitutes about one-half of 2-year college curriculum.
2. Nursing content grouped into broad areas of biological - physical - social - sciences throughout two years.
3. Clinical experience in: medical-surgical nursing, maternal-child nursing, psychiatric nursing.
4. Education-centered, but lacks scope and depth in nursing.

BACCALAUREATE DEGREE

1. A basic liberal education.
2. Biological - physical - social sciences and humanities are foundation prerequisite to teaching nursing courses.
3. Patient care experience in: medical-surgical nursing, maternal-child nursing, mental health nursing, public health nursing, leadership rolls in a variety of settings.
4. Education-centered. Problem solving is stressed with a broad general background for dealing with groups of people in the leadership roles of health services.

GRADUATES

PRACTICAL NURSE

Function under registered nurse or licensed physician.

Prepared to:

1. Perform nursing service for patients with relatively stable needs. (Activities of daily living)
2. Assist the professional nurse in the care of patients in the more complex situations.

ASSOCIATE DEGREE

Function - beginning staff position in hospital or similar agency.

Prepared to:

1. Correlate or transfer knowledge from other disciplines to nursing situations with some guidance.
2. Utilize basic nursing knowledge, principles, and skills in day-to-day care of patients.
3. Participate with other members of the health team in implementing care.
4. Plan for continuity of nursing care in the technical aspects of nursing.
5. Maintain standards of behavior that reflect safe, effective, and therapeutic nursing care.

HOSPITAL DIPLOMA

Function - beginning staff position in hospital or similar agency.

Prepared to:

1. Utilize basic nursing knowledge, principles and skills in day-to-day care of patients.
2. Participate with other members of the health team in implementing care.
3. Plan for continuity of nursing care in the technical aspects of nursing.
4. Maintain standards of behavior that reflect safe, effective, and therapeutic nursing care.

BACCALAUREATE DEGREE

Function - beginning professional positions in any setting and can move rapidly into leadership roles.

Prepared to:

1. Identify nursing problems, formulate solutions, implement a plan of care and evaluate effectiveness of care.
2. Provide leadership for the advancement of nursing care, the nursing profession, and health care.
3. Participate in research for improvement of care.
4. Coordinate components of care.
5. Pursue academic graduate study in nursing to assume teaching-consultative and supervisory roles.

Appendix C

A Proposal For a Feasibility Study of MOBILITY PROGRAM IN THE HEALTH FIELD

Introduction

Society in general and education in particular have begun to realize the importance of facilitating the upward mobility of persons engaged in occupations related to the health field. Much of the waste in human resources, the limitations in health care available, the excess cost in training time and money, and the reluctance of individuals to enter training in the health field can be traced to the fictitious barriers which have been placed in the way of individuals interested in moving up into more responsible positions in health care. We can ill-afford to disregard and fail to give credit for previous training and experience which many students may bring to training programs. It makes little sense medically, educationally, or economically to require a complete new start for each of our training programs as if every individual entering has had no previous training or experience. This is exactly what happens in many instances in the health training area.

Some progress is being made. Examples are available in which institutions have begun to recognize this problem and to attempt to solve it. Instances of this progressive attitude are generally sporadic and informally organized and depend to a great extent on the individual initiative of teachers or directors of programs.

The critical situation in health manpower needs makes it imperative that we take the best of what we know about training people for health occupations, the most efficient of the experimental attempts at facilitating upward mobility, and develop from these a formal, organized, widely-agreed upon, and accepted program for assuring the most effective and efficient advancement of persons interested in expanding their competencies and their responsibilities in the health area. This proposal would be the first step toward accomplishing this objective. This proposal would make it possible to designate an individual as responsible for designing a program and securing administrative agreement on the avenues of upward mobility which an individual might follow.

Statement of the Problem

Our educational institutions must work out the administrative procedures necessary to allow people the freedom to advance in the health occupations of their choice. These administrative arrangements must be worked out on a formal basis and agreed to by personnel of various kinds and levels of training institutions. These arrangements must be carefully examined in order to insure that the training provided and the subsequent certifications or licensure adequately protects the public in the health care which it receives. There seems to be general agreement that something "must be done." However, there is no general agreement as to who or how the doing shall be done.

Formal agreements between health occupations training institutions do not exist. If an institution or a training program does arrange to give advanced standing or extra credit for previous training and experience, it must be done on the individual initiative of the teacher or administrator. This haphazard system which may serve a few individuals does exclude many from any upward movement. The problem then is the lack of an organized arrangement agreed upon by all individuals involved, which takes into consideration and gives credit for the previous experience and training which individuals have received in order that they may be given work of more responsibility in the health area.

Objectives

The objectives of this project are: (1) To design an upward mobility program which will provide the necessary arrangements so that individual advancement in the health field may be facilitated, and (2) to secure administrative agreement on the arrangements necessary to provide credit for previous training and experience. This should result in more adequately trained medical support personnel and the use of persons trained in the medical field at more nearly their maximum capacity.

Procedures

This would be phase one of a multi-phase program which would eventually end in a complete network of training facilities and arrangements in the State of Oklahoma. This first phase would consist of the designing of a program which would account for the needs of persons trained at all levels of health skills and would facilitate their upward mobility. This program would describe in detail the requirements for each level of the profession such as nurse assistant or nurse aid, LPN, associate degree nurse, and degree nurse. This program would also outline the procedures which would be required in order to move from one level to the next. It would detail the credit which might be given toward one degree as a result of completion of the previous degree. This program outline would also specify the type of advanced credit which might be given for certain types of experiences.

This feasibility study would also secure in writing the agreement of administrative personnel at all levels which would be necessary to implement such a program. This would require individual conferences with the various administrative personnel of the different institutions to secure their agreement to the specified plan. This would be the formalization of the limited informal arrangements which presently exist.

An individual would be hired who is knowledgeable in the health field who would be responsible for designing the plan and securing the agreement of individuals involved. This person would have the full assistance of the staff of the Health Occupations Education Division of the State Department of Vocational and Technical Education as well as the State Director of Vocational and Technical Education who has expressed an intense interest in development of such a plan. The second phase which would follow immediately would be the limited implementation of the plan in those institutions which had agreed to participate. It is hoped that eventually all training institutions would be involved in the training program as the plan is eventually developed.

Contribution to Education

The benefits which would accrue from such a program involve first the individual who would be allowed to advance to whatever level of competency his own ability would allow him to achieve in the health field. The second benefit to society is that more competent and highly trained individuals would be available to deliver health care. The third benefit is to the institution in that their ability to train for the health field could be increased with a concomitant decrease in time and dollars. A formalized plan which has been agreed upon by the institution as well as certifying and licensing agencies in the state could put a solid foundation under greatly needed health training programs. The plan when it becomes operational could serve as a model for other institutions in the state or other states in their attempts to increase the opportunities for training in the health field.

Appendix D

*EXAMPLE NURSING CURRICULUM

*From: Oklahoma Board of Nurse Registration and Nursing Education. Assessment of Nursing in Oklahoma in 1970: Source Book, 1971, p. 122.

PRACTICAL NURSE PROGRAM (12 months)

First Term

Body Structure and Function
Personal and Vocational
Relations
Family and Community Health
Basic Nutrition
Nursing Principles and Skills I

Second Term

Nursing Principles and
Skills II
Medical and Surgical Nursing

Third Term

Nursing Care of Mothers
and Babies
Nursing Care of Children
Vocational and Legal
Responsibilities

ASSOCIATE DEGREE PROGRAM (2 yrs.)

First Year

(34 semester hours)
English Communication
Skills (2 sem.)
Physical Science
Psychology
Speech
Bacteriology
History
Growth and Development
Nursing (Fundamentals)
Nursing (Maternal-Child)

Second Year

(34 semester hours)
Anatomy and Physiology
Sociology
Political Science
Literature
2 Semesters Elective
Nursing (Physical and
Mental Illness)
Nursing (Physical and
Mental Illness)

HOSPITAL DIPLOMA PROGRAM (3 yrs.) (27 month minimum)

First Year

(1 semester each course)
English
Anatomy and Physiology
Microbiology
Psychology
Sociology
Chemistry
Nutrition

Second Year

Fundamentals of Nursing
Medical-Surgical Nursing

Third Year

Maternal and Child Nursing
Psychiatric Nursing

BACCALAUREATE DEGREE PROGRAM (4 yrs.)

Freshman Year

(34 semester hours)
Freshman Composition (2
semesters)
Physical Activities (2
semesters)
General Biology (2
semesters)
General Chemistry (2
semesters)
Algebra
General Psychology
Human Behavior
Humanities or Fine Arts

Sophomore Year

(32 semester hours)
Oral Communications
General Sociology

**BACCALAUREATE
DEGREE PROGRAM
(cont'd.)**

Comparative Anatomy
Microbiology
American Government
Mammalian Physiology
Nutrition
Humanities or Fine Arts
Foundations of Nursing Care

Junior Year

(30 semester hours)

Medical and Surgical Nursing
Maternal and Child Nursing
Religion
World Civilization
American Civilization
Social Sciences Course

Senior Year

(28 semester hours)

Public Health and Psychiatric
Nursing
Professional Leadership
Philosophical & Social
Foundations & Trends in
Nursing
Social Science Course
Humanities or Fine Arts

Note: Course Requirements in four Practical Nursing Programs, three Hospital Diploma Programs, four Associate Degree Nursing Programs and four Baccalaureate Degree Programs were compared to this "Example" and it was found to be representative of individual program listings although the courses were sometimes covered in different semesters (or terms), and the titles varied.

COURSES WHICH THE FOLLOWING HEALTH OCCUPATIONS PROGRAMS APPEARED TO HAVE IN COMMON*

EMERGENCY MEDICAL TECHNICIAN PROGRAMS at

Tulsa Junior College	88 hrs.	(Associate Degree)
South Oklahoma City Junior College	61 hrs.	(Associate Degree)

Appeared to have the following in common

Applied Composition and Speech
Anatomy and Physiology
Introduction to Psychology
Parts of some Emergency Medical Practicum Courses
Orientation to Health
Government
History

OCCUPATIONAL THERAPY PROGRAMS at

Tulsa Junior College	68 hrs.	(Associate Degree)
South Oklahoma City Junior College	63 hrs.	(Associate Degree)

Appeared to have the following in common

Applied Composition and Speech
History
Anatomy and Physiology
Introduction to Psychology
Fundamentals of Occupational Therapy
Community Recreation
Neuromuscular Functions and Dysfunctions
Government
Orientation to Health

MEDICAL LABORATORY TECHNICIAN PROGRAMS at

Tulsa Junior College	78 hrs.	(Associate Degree)
Northern Oklahoma College	64 hrs.	(Associate Degree)

Appeared to have the following courses in common

Applied Composition and Speech
General Biology
Microbiology
General Chemistry
Algebra
Introduction to Medical Laboratory Techniques
General Physiology
Parts of some Medical Lab. Technician Courses

MEDICAL SECRETARY PROGRAMS at

Northern Oklahoma College	64 hours
Tulsa Junior College	61 hours

Appeared to have the following courses in common

- Applied Composition and Speech
- Business Machines - Calculating
- Typewriting
- Shorthand
- Orientation to Health
- History
- Government
- Office Procedures and Practices
- Bookkeeping
- Medical Terminology
- Advanced Shorthand and Transcription

Appendix E

INDIVIDUALS TO WHOM THE QUESTIONNAIRE
WAS MAILED

(* denotes non-respondents)

ASSOCIATE DEGREE NURSING PROGRAMS

Seminole

Miss Gladys Scott
Chairman - Department of Nursing
Seminole Junior College
Seminole, Oklahoma 74868

Tishomingo

Mrs. Winnie Dunham
Chairman - Department of Nursing
Murray State College
Tishomingo, Oklahoma 73460

Wilburton

Mrs. Joy Regaldo
Director of Nursing
Eastern Oklahoma State College
Wilburton, Oklahoma 74578

Mr. Bob Keck
Vocational Director
Eastern Oklahoma State College
Wilburton, Oklahoma 74578

Mr. James Burruss
Director of Health Manpower Development
Eastern Oklahoma State College
Wilburton, Oklahoma 74578

PRACTICAL NURSING PROGRAMS

Ada

Mrs. Lou Oats
Coordinator-Instructor
Division of Practical Nursing
Byng Schools
Route 3
Ada, Oklahoma 74820

PRACTICAL NURSING PROGRAMS (cont'd)Ardmore

Mrs. Geraldine Toti
Coordinator-Instructor
Division of Practical Nursing
Southern Oklahoma Area Vocational-
Technical Center
P.O. Box 1709
Ardmore, Oklahoma 73401

Bartlesville

Mrs. Mildred Kurtz
Coordinator-Instructor
Division of Practical Nursing
Tri-County Area Vocational-
Technical School
417 East Fourth, Drawer 1197
Bartlesville, Oklahoma 74003

Burns Flat

*Mrs. Clara Jean Hanchey
Coordinator-Instructor
Division of Practical Nursing
Western Oklahoma Area Vocational-
Technical School
Box 149
Burns Flat, Oklahoma 73632

Clinton

Miss Margaret Krause
Coordinator-Instructor
Clinton Vocational School of
Practical Nursing
Oklahoma General Hospital
Clinton, Oklahoma 73601

El Reno

Mrs. Margaret Brock
Coordinator-Instructor
Division of Practical Nursing
Canadian Valley Area Vocational-
Technical School
P.O. Box 579
103 South Rock Island
El Reno, Oklahoma 73036

PRACTICAL NURSING PROGRAMS (cont'd)

Enid

Mrs. Norma Seymour
Coordinator-Instructor
Division of Practical Nursing
O. T. Autry Area Vocational-
Technical School
1201 West Willow
Enid, Oklahoma 73701

Miami

Mrs. Dorothy Hall
Coordinator
Division of Practical Nursing
Northeastern Oklahoma A&M College
Miami, Oklahoma 74354

Midwest City

Mrs. Ruth Killough
Coordinator-Instructor
Midwest City Vocational School
of Practical Nursing
213 Elm, Senior High
Midwest City, Oklahoma 73110

Norman

Mrs. Mary Randall
Coordinator-Instructor
Norman Vocational School of
Practical Nursing
901 North Porter
P.O. Box 1308
Norman, Oklahoma 73069

Poteau

Mrs. Doris Smith
Assistant Coordinator-Instructor
Division of Practical Nursing
Kiamichi Area Vocational-
Technical School
Poteau-Talihina Site
P.O. Box 825
Poteau, Oklahoma 74953

PRACTICAL NURSING PROGRAMS (cont'd)Shawnee

Mrs. Pearl Hill
 Coordinator-Instructor
 Division of Practical Nursing
 Gordon Cooper Area Vocational-
 Technical School
 P.O. Box 396
 Shawnee, Oklahoma 74801

Tulsa

Mrs. Pauline Hurlburt
 Coordinator
 Tulsa Vocational School of
 Practical Nursing
 P.O. Box 45208
 1516 South Quaker
 Tulsa, Oklahoma

Wayne

Mrs. Nancy Harrison
 Coordinator
 Division of Practical Nursing
 Mid-America Area Vocational-
 Technical School
 Box H
 Wayne, Oklahoma 73095

Woodward

Ms. Aline Sue Mitchell
 Coordinator-Instructor
 Woodward Vocational School of
 Practical Nursing
 Woodward Memorial Hospital
 Woodward, Oklahoma 73801

VOCATIONAL AND ASSOCIATE DEGREE
HEALTH RELATED OCCUPATIONSAlva

Ms. Aileen Bland
 Instructor - Health Service Careers
 Oklahoma Northwest Area Vocational-
 Technical School
 Box 784
 Alva, Oklahoma 73717

VOCATIONAL AND ASSOCIATE DEGREE
HEALTH RELATED OCCUPATIONS (con't)

Bartlesville

Mrs. Ruby Patterson
Instructor - Health Service Careers
Tri-County Area Vocational-
Technical School
417 East Fourth
Drawer 1197
Bartlesville, Oklahoma 74003

Burns Flat

Mrs. Winnefred Asher
Instructor
Health Service Careers
Western Oklahoma Area Vocational-
Technical School
Box 149
Burns Flat, Oklahoma 73632

Byng

Mrs. Ada Lou Roegner
Instructor
Health Service Careers
Byng Schools
Route 3
Ada, Oklahoma 74820

Chickasha

Mrs. Neysa Davis
Instructor - Health Service Careers
and Medical Office Assistants
Canadian Valley Vocational-
Technical School
Chickasha, Oklahoma 73018

Drumright

Mrs. Marie Boyer
Instructor - Health Service Careers
Central Oklahoma Area Vocational-
Technical School
Box 1237
Drumright, Oklahoma 74030

VOCATIONAL AND ASSOCIATE DEGREE
HEALTH RELATED OCCUPATIONS (cont'd)

El Reno

*Mrs. Wanda Sue Wolf
Instructor
Health Service Careers and Medical
Office Assistant
Canadian Valley Area Vocational-
Technical School
P.O. Box 579
103 South Rock Island
El Reno, Oklahoma 73036

Enid

Mrs. Dollie Hefner
Instructor - Dental Office Assistant
O. T. Autry Area Vocational-
Technical School
1201 West Willow
Enid, Oklahoma 73701

Mrs. Mary Jane Weldon
Instructor--Medical Office Assistant
O. T. Autry Area Vocational-
Technical School
1201 West Willow
Enid, Oklahoma 73701

Mrs. Terry Carmichael
Health Service Careers
O. T. Autry Area Vocational-
Technical School
1201 West Willow
Enid, Oklahoma 73701

Fairview

Mrs. DiAnna Waldschmidt
Health Service Careers
Oklahoma Northwest Area Vocational-
Technical School
P.O. Box 250
Fairview, Oklahoma 73737

VOCATIONAL AND ASSOCIATE DEGREE
HEALTH RELATED OCCUPATIONS (con't)

Hugo

Mrs. Virginia Owens
 Instructor--Health Service Careers
 Kiamichi Area Vocational-
 Technical School
 Box 699 (Hugo Site)
 Hugo, Oklahoma 74743

McAlester

Mrs. Winnie Thomas
 Instructor--Health Service Careers
 Kiamichi Area Vocational-
 Technical School
 (McAlester Site)
 McAlester, Oklahoma 74501

Midwest City

Ms. Naomi Coston
 Instructor--Health Service Careers
 Midwest City Public Schools
 607 West Rickenbacker
 Midwest City, Oklahoma 73110

Mr. Lloyd Hill
 Chairman, Health Occupations
 Oscar Rose Junior College
 6420 Southeast 15th Street
 Midwest City, Oklahoma 73110

Muskogee

Ms. Idella Hughes
 Instructor--O.R.T.
 Adult Education Special Project
 Indian Capital Area Vocational-
 Technical School
 Route 5, Box 237
 Muskogee, Oklahoma 74401

VOCATIONAL AND ASSOCIATE DEGREE
HEALTH RELATED OCCUPATIONS (con't)

Oklahoma City

Bertram E. Sears, M.D.
 Chairman--Inhalation Therapy
 Certificate Program
 Oklahoma University Medical Center
 Department of Inhalation Therapy
 Technology
 800 N.E. 13th Street
 Oklahoma City, Oklahoma 73104

Pawhuska

Mrs. Rita Marak
 Instructor--Health Service Careers
 Pawhuska Public Schools
 Pawhuska High School
 Pawhuska, Oklahoma 74056

Poteau

*Ms. Mary Helen Morris
 Instructor--Health Service Careers
 Kiamichi Area Vocational-
 Technical School
 Poteau-Talihina Site
 P.O. Box 825
 Poteau, Oklahoma 74953

Sayre

Mr. Clarence Christian
 Instructor--Medical Lab Tech
 Sayre Junior College
 Sayre, Oklahoma 73662

Shawnee

Mrs. Juanita Johnson
 Instructor--Health Service Careers
 Gordon Cooper Area Vocational-
 Technical School
 P.O. Box 396
 Shawnee, Oklahoma 74801

VOCATIONAL AND ASSOCIATE DEGREE
HEALTH RELATED OCCUPATIONS (con't)

Dr. George Ing
Director--Medical Lab Tech
St. Gregory's College
Shawnee, Oklahoma 74801

Warner

Mr. Virgil Watson, Junior
Instructor--Medical Laboratory Tech
Connors State College
Warner, Oklahoma 74469

INDIVIDUALS TO BE CONTACTED
VIA PERSONAL INTERVIEW

Drumright

Mrs. Jan Harris
Coordinator-Instructor
Central Oklahoma Area Vocational-
Technical School
Box 1237
Drumright, Oklahoma 74030

Lawton

Mrs. Delores Kruger
Chairman, Department of Nursing
Cameron College
Lawton, Oklahoma 73501

Mrs. Edna Hill
Coordinator-Instructor
Division of Practical Nursing
Great Plains Area Vocational-
Technical School
4500 West Lee Blvd.
Lawton, Oklahoma 73501

Mrs. Lois Holeman
Health Service Careers
Great Plains Area Vocational-
Technical School
4500 West Lee Blvd.
Lawton, Oklahoma 73501

Muskogee

Mrs. Stella Wetz
Coordinator-Instructor
Division of Practical Nursing
Indian Capital Area Vocational-
Technical School
Route 5, Box 237
Muskogee, Oklahoma 74401

Ms. Felecia Marie Dauth
Instructor
Health Service Careers
Indian Capital Area Vocational-
Technical School
Route 5, Box 237
Muskogee, Oklahoma

Muskogee (con't)

Sister Mary Schaan
 Department of Nursing
 Bacone College
 Bacone, Oklahoma 74420

OKLAHOMA CITY AND VICINITY

*Mrs. Doris Golab
 Health Occupations Training Program
 MDTA
 University of Oklahoma Medical Center
 Oklahoma City, Oklahoma 73100

Mrs. Juanita Millsap
 2733 West Country Club Drive
 Oklahoma City, Oklahoma 73100

Miss Frances Waddle
 Executive Director
 Oklahoma Board of Nurse Registration
 and Nurse Education
 4545 North Lincoln Blvd.
 Oklahoma City, Oklahoma 73105

Mrs. Lynn Bales
 Coordinator of Health Related
 Career Programs
 South Oklahoma City Junior College
 7777 South May
 Oklahoma City, Oklahoma 73158

Mr. Herman Reisenberg, Chairman
 Department of Nursing (Associate Degree)
 OSU Tech Institute
 900 N. Portland
 Oklahoma City, Oklahoma 73107

Mrs. Barbara Miller
 Instructor--Medical Office Assistant
 Oklahoma City Area Vocational-
 Technical School
 4901 South Bryant
 Oklahoma City, Oklahoma 73129

OKLAHOMA CITY AND VICINITY (cont'd)

Mrs. Anna Mary Slaughter
Instructor--Health Service Careers
4901 South Bryant
Oklahoma City, Oklahoma 73129

Mrs. Genevieve Garrett
Instructor--Dental Office Assistant
Oklahoma City Area Vocational-
Technical School
4901 South Bryant
Oklahoma City, Oklahoma 73129

Mrs. Peggy McClain, Coordinator
Oklahoma City Vocational School
of Practical Nursing
521 Northwest Sixth
Oklahoma City, Oklahoma

Mrs. Eleanor Gray Knudson, Dr. P.H., Dean
University of Oklahoma School of Nursing
800 N.E. 13th Street
Oklahoma City, Oklahoma 73104

Miss M. Elizabeth Wiebe, R.N.
Chairman, Department of Nursing
Central State College
Edmond, Oklahoma 73034

** Mrs. Claudine Dickey, R.N.
Chairman--School of Nursing
Oklahoma Baptist University
Shawnee, Oklahoma 74801
(NOTE: Okla. City Address--1213 N. Harvey)

Miss Carole Bryant, R.N.
Director
St. Anthony School of Nursing
1117 North Shartel
Oklahoma City, Oklahoma 73103

Tonkawa

Mr. Tom Harned
Chairman and Instructor
Department of Nursing
Northern Oklahoma College
Science Building, Room 100
Tonkawa, Oklahoma 74653

Tulsa

Mrs. Marty Doyle
 Director of Nursing
 Tulsa Junior College
 909 South Boston
 Tulsa, Oklahoma 74119

Mrs. Bonita Glover
 Medical Office Assistants Program
 Tulsa Area Vocational-Technical Center
 3420 South Memorial
 Tulsa, Oklahoma 74245

Mrs. Frances Henderson
 Instructor--Dental Office Assistants
 Tulsa Area Vocational-Technical Center
 3420 South Memorial
 Tulsa, Oklahoma 74245

Dr. Neila Poshek, R.N.
 Director, School of Nursing
 University of Tulsa
 600 South College
 Tulsa, Oklahoma 74104

Mrs. Charline Buck, R.N.
 Director, Nursing Education
 Hillcrest Medical Center
 School of Nursing
 1120 South Utica
 Tulsa, Oklahoma

Miss Virginia Andersen, R.N.
 Director
 St. John's Hospital
 School of Nursing
 1802 East 19th
 Tulsa, Oklahoma 74104

Mrs. Carolyn Briggs
 Director of the Health Institute
 909 S. Boston
 Tulsa, Oklahoma 74119

*Mrs. Golab was ill at the time personal interviews were scheduled but responded via mail.

**Mrs. Dickey ask that Mrs. Millsap respond for O.B.U.

October 19, 1972

(Letter to program directors who were personally interviewed)

The purpose of this letter is to seek your ideas and opinions on the feasibility of a career mobility program in health occupations education in Oklahoma. The feasibility study is being carried out as a cooperative project of the Health Occupations Education Division and the Research Division of the State Department of Vocational and Technical Education with Patricia Jamison as Program Director and Sharon Ward as Principal Investigator.

Society in general and educators in particular have begun to realize the importance of facilitating the upward mobility of persons engaged in health occupations. Much of the waste in human resources, the limitations in health care available, the excess cost in training time and money, and the reluctance of individuals to enter training in health occupations can be traced to the barriers which are placed in the way of individuals interested in moving up to more responsible positions in health occupations.

While some institutions have begun to recognize the problem and have taken steps to alleviate the barriers, examples of implemented career mobility programs in health occupations are generally sporadic, informally organized, and depend to a great extent on the individual initiative of concerned teachers or directors of programs. As demand for health manpower becomes increasingly critical, it would seem the time is ripe for action in career mobility. Oklahoma has an opportunity to provide formative leadership in this area.

This feasibility study is the first phase of a multi-phase project which could end in a complete network of training facilities and arrangements to facilitate health career mobility in Oklahoma. The objectives of this study are:

1. To design an upward mobility program to provide the necessary arrangements so that individual advancement in health occupations may be facilitated.
2. To secure administrative agreement on the arrangements necessary to provide credit for previous training and experience.

Page 2
October 19, 1973

This study seeks to describe in detail the requirements for each level of the profession and outline the procedures which would be required to move from one level to the next. It will detail the credit which might be given toward one degree as a result of the completion of the previous degree as well as specify the types of advanced credit which might be given for certain types of experiences. This study will also seek to secure in writing the agreement of administrative personnel at all levels which would be required to implement such a program.

The second phase of this project, which would follow immediately, would be the limited implementation of the plan in institutions which have agreed to participate. It is hoped eventually all training institutions will be involved in the training plan.

As you can see from the description of the study, your cooperation, opinions, and ideas, as an educator in health occupations, are of great value to the success of this project. We would like to discuss career mobility with you personally because we feel that your assessment of the feasibility of a health career mobility program in Oklahoma will offer considerable insight into the approach which is most appropriate for a model program. Sharon Ward will telephone you within the next two to three weeks to arrange a personal interview. In order that you will know in advance the topics on which we would like your opinion and ideas, we are enclosing an interview schedule.

Results of this project could benefit not only personnel in health occupations but also Oklahomans as a whole in that larger numbers of competent and highly trained individuals would be available to deliver health care. However, a major key to opening the door in health career mobility in Oklahoma rests in gaining the input of experienced personnel in health occupations education. We sincerely hope you will find it convenient to grant a personal interview in regard to this vital topic.

Sincerely,

(Mrs.) Sharon Ward
Principal Investigator and
Project Writer

(Mrs.) Patricia Jamison, State Supervisor
Health Occupations Education and
Program Director

Enclosure

SW/YZKK-02/10

October 20, 1972

(Letter accompanying the Mail Questionnaire)

The purpose of this letter is to seek your ideas and opinions on the feasibility of a career mobility program in health occupations education in Oklahoma. The feasibility study is being carried out as a cooperative project of the Health Occupations Education Division and the Research Division of the State Department of Vocational and Technical Education with Patricia Jamison as Program Director and Sharon Ward as Principal Investigator.

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Results of this project could benefit not only personnel in health occupations but also Oklahomans as a whole in that larger numbers of competent and highly trained individuals would be available to deliver health care. However, a major key to opening the door in health career mobility in Oklahoma rests in gaining the input of experienced personnel in health occupations education. May we have your response to the enclosed questionnaire?

A stamped return envelope is enclosed for your convenience in returning the questionnaire.

We sincerely appreciate any assistance you may provide in this study.

Sincerely,

(Mrs.) Sharon Ward
Principal Investigator and
Project Writer

(Mrs.) Patricia Jamison, State Supervisor
Health Occupations Education and
Program Director

Enclosures

SW/YZSX-09/8

November 7, 1972

(First Follow-up)

MEMORANDUM

TO: Program Directors in Health Occupations

FROM: Sharon Ward, Principal Investigator, Research Division, and Patricia Jamison, State Supervisor, Health Occupations Education Division

SUBJECT: Feasibility Study for a Career Mobility Program in Health Occupations

You were recently included in a survey request for information concerning career mobility. To date we have not received your response and would again like to request your assistance in this important survey.

You, as an educator in Health Occupations, represent a valuable source of information in determining the feasibility of career mobility in Oklahoma. Your opinion can have a major affect on the establishment of an improved network of career mobility plans for our State.

Your efforts in completing this survey are sincerely appreciated.

SKW/YZSX-07/8

November 27, 1972

(Second Follow-up)

On October 20 you were included in a survey requesting information concerning the feasibility of a Career Mobility Program in Health Occupations. As of this date, your response has not been received and once again we invite you to participate in this important survey.

As we approach the final stages of data collection in this study, we are anxious to receive your input because we feel you, as an educator in Health Occupations, represent a valuable source of information in determining the feasibility of a Health Career Mobility Program for Oklahoma.

Enclosed is a second copy of the questionnaire and a self-addressed return envelope for your convenience in providing us with your ideas and opinions on this vital subject. May we have your assistance.

Sincerely,

Bill Stevenson
Assistant State Director
Head, Division of Research,
Planning, and Evaluation

Enc: Mail Questionnaire
Return Envelope

WWS/XDN-01/18

December 7, 1972

(Letter of Appreciation)

Your cooperation during the recent Career Mobility Feasibility Survey conducted by the State Department of Vocational and Technical Education is sincerely appreciated. Participation by you and other Health Occupations Program Directors provides valuable insight in planning an acceptable program for advancement of persons interested in expanding their competencies and responsibilities in health occupations.

Thank you for your contribution to this survey.

Sincerely,

(Mrs.) Sharon Ward
Project Investigator

(Mrs.) Patricia Jamison
Program Director
State Supervisor
Health Occupations Education Division

SW/YZVG-01/18

Name of Program _____ Location _____

Current Enrollment _____ Program Length _____

Program Director _____

Q U E S T I O N N A I R E

The purpose of this study is to determine if a career mobility program in Health Occupations is feasible in Oklahoma. One procedure employed in achieving this purpose is contacting state personnel in job positions of influence in health occupations education for their opinions and ideas.

In talking with health personnel across the state, there seems to be some indication that individuals training in one area of health occupations on occasion desire to move into other nursing or health related fields. We are interested in your ideas on career mobility in health occupations.

1. Do you know if graduates of your program continuing their studies in another nursing or health related program would be required to repeat some of the course content they had already covered?

yes ()

no ()

If yes, what areas of training are repeated in moving from:

a. Your program to a _____ program?

b. Your program to a _____ program?

c. Your program to a _____ program?

2. Are you aware of any nursing or health related programs in Oklahoma which grant advanced standing to your former students for previous education or experience?

Type of Program Location How are the students who seek advanced standing evaluated?

3. Are you aware of any * _____ programs in Oklahoma which grant advanced standing to a student for previous nursing or health related education or experience?

Location

How are the students who seek advanced standing evaluated?

To date, the career mobility plans which have been implemented tend to take two distinct veins—a core curriculum approach or a credit by examination approach, with variations and combinations of each approach seen in isolated examples. In order to insure a common ground for communications, please refer to the last page of this questionnaire for a brief description of each approach.

4. What do you think of the Core Curriculum approach?

5. Please list barriers you see in implementing the Core Curriculum approach to career mobility in Oklahoma.

6. How could these barriers be overcome?

7. What do you think of the Credit by Examination approach?

8. Please list barriers you see in implementing the Credit by Examination approach to career mobility in Oklahoma.

*This question was personalized for each type of program, e.g., if mailed to an LPN program director, "Licensed Practical Nursing" was inserted.

9. How could these barriers be overcome?

10. Have you used the National League of Nursing Standardized Tests in your program for granting advanced standing?

yes ()

no ()

11. Do you have confidence in these tests for assessing a student's qualifications for advanced standing in nursing or health related programs?

yes ()

no ()

If no, why?

12. Do you use or are you aware of other tests, standardized or non-standardized, which you think may be useful in assessing student qualifications for advanced standing?

yes ()

no ()

If yes, please list title and indicate program for which it is used.

13. Would you be willing to serve on a committee to develop means for assessing student qualifications for advanced standing for specific levels of nursing?

yes ()

no ()

14. What officials would need to approve before credit or advanced placement could be offered in your school? (Please list names and addresses.)

15. Do you think these officials would approve of advanced standing based on the Core Curriculum approach?

yes ()

no ()

16. Do you think these officials would approve of advanced standing based on the Credit by Examination approach?

yes ()

no ()

17. Based on your experience in Health Occupations Education, please describe your approach to developing a career mobility model program for Oklahoma.

18. In developing your program for career mobility, who would you consult for opinions and ideas?

19. What contribution in the way of funds, faculty or facilities could your educational setting offer in implementing a model health career mobility program?

20. Please suggest other resources where you would seek assistance in these areas.

Core Curriculum -- The philosophy of core curriculum presumes that there are skills, knowledges, and attitudes common to all Allied Health Occupations.

Credit by Examination -- There are three general types of achievement tests upon which credit granted by examination is usually based.

1. Proficiency exams--designed for measuring an individual's competency to perform certain jobs at certain levels, a competency made up of knowledge and skills.
2. Equivalency exams--utilized to equate non-formal learning outside of a particular program with learning achieved within that program.
3. Challenge exams--essentially end-of-course tests intended to measure individual achievement in the particular subjects which make up the curriculum. Challenge exams were developed to measure mastery of information, ideas, and skills that would be expected of a student who had successfully completed a course in a particular subject.

CRITIQUE OF THE DATA COLLECTION INSTRUMENT

In the demographic section, current enrollment was found to be non-comparable from program to program because some of the vocational health occupations programs were half-time rather than full-time programs, total length of programs varied, and many of the full-time programs reported high dropout rates. It would seem number of graduates per year may be more appropriate data for comparing programs. Also, the identification information should request the name of the respondent rather than the name of the program director. Often program coordinators did not consider themselves program directors.

Wording in many of the questions could be improved to eliminate ambiguities; for example:

Interpretation of Question 1 would be facilitated if the question read:

Are graduates of your program continuing their studies in another nursing or health-related program required to repeat some of the course content they have already covered?

☐ Yes

☐ No

☐ Don't know

Question 12 is a double-barreled question and could be improved by asking..

Are you aware of other tests, standardized or non-standardized, which you think may be useful in assessing student qualifications for advanced standing?

Part two of this question should request the address from which the exams are available.

Question 17 was not answered by some respondents. Perhaps it would seem less overwhelming to the respondent if worded:

...list the features you think should be included in a Career Mobility Model Program for Oklahoma.

Appendix 7

RESULTS OF THE NOVEMBER 3, 1972 MEETING WITH FORMAL LEADERS

(NOTE: Questions were answered and the answers were ranked via use of a modified Delbecq Technique)

1. Based on your experience, what features do you think should be included in a Career Mobility Plan for Oklahoma?

- I. Adequate financing
- II. Written cooperation from State Regents and Board of Nursing
- III. Total involvement in established Core Curriculum
- IV. Terminal behaviors for different "levels".
- V. Respect for individual institutions to "do a good job".
- VI. Development of clinical and subject matter evaluation tests
- VII. Valid and reliable "tool" for assessment
- VIII. A. Mechanism for motivation and utilization of concept
B. Communication to above involved and employers of health workers
- IX. Acceptance "demonstrated competency" credit for work or education
- X. Criteria for challenging each "step"
- XI. A. Credit for life experiences and learning
B. Admission criteria removal as barrier
- XII. Acceptance of profession as "concept".

2. What factors do you see which could aid Oklahoma in establishing a Career Mobility Program?

- I. Involvement of all interested groups in planning and implementation
- II. Approval and acceptance of previously listed 5 major priorities
- III. A. Agreement as to "learning of content" for each "level" of education
B. Statement or formal agreement among and between cooperating institutions of education

- IV. Funding
 - V. Formal assistance to schools in determining behavioral objectives of courses and programs
 - VI. A. Continued committee discussion plus action
 - B. "True" educational consortium, i.e. "Free" exchange among educational institutions
 - VII. Setting up a model with interested agencies
 - VIII. Interest of nursing educators
 - IX. Planning collectively--involve all educational programs that Career Mobility may affect or involve
 - X. Communication and cooperation between agencies and schools
 - XI. A. Statement of policy - "credit and advance standing" by institution of learning.
 - B. Desire
3. What factors do you see which could serve as barriers in establishing a Career Mobility Program in Oklahoma?
- I. Educational jealousy
 - a. Institutions feel threatened by other programs
 - b. Institutions unwillingness to accept "inferior" transfers
 - II. Legal barriers - licensure, credit, Oklahoma Nurse Practice Act
 - III. Empire building
 - IV. Cooperation from Regents regarding Vocational-Technical students receiving credit where applicable when transferring into "higher education"
 - V. Stress of restructuring on-going programs
 - VI. Institutions of learning refuse to accept learning and experience for advanced standing.
 - VII. A. Time and willingness to accept and work from lowest to highest educational level.
 - B. Lack of funding

VIII. Hostility due to mis-understanding or lack of understanding concept.

IX. Professional jealousy. An unwillingness to accept idea of "upward movement" without "x" number of formal credits, years experience, et cetera.

X. Lack of understanding

XI. A. Visibility by faculties that their graduates would still be the "best".

B. There are different viewpoints as to the soundness or practicability of the concept.

C. Lack of commitment of "public" funding to health occupations education programs.

XII. A. Faculties unwillingness

B. High student-teacher ratios in practical nursing programs

C. High number of applications in relation to facilities and resources for number enrolled in Practical Nursing programs.

D. Lack of qualified faculty in some nursing education programs

4. How could these barriers be overcome?

I. Involve all in planning and implementation

II. Open Oklahoma's Nurse Practice Act - Remove barriers to career mobility

III. Create visibility of the value of the graduate by creating a model program

IV. Stick together!

V. Total educational dialogue

a. Joint committees

b. Faculty exchange (visiting lecture, etc.)

VI. A. ? "Educate" "Sell"

B. Offer release time for instructors from other responsibilities for planning and implementing

VII. A. Seek additional sources of funding

- B. Develop instrument for assessment that is acceptable to concerned parties - institutions, etc.
- VIII. Utilize various institutions for continuing academic preparation for faculty
- IX. Inform groups as to what has been done
 - A. In other states
 - B. In other technical fields
 - 1. Those directly involved in implementing the plan
- X. Define and provide job security and assurance for faculty and staff

INDIVIDUALS ATTENDING THE NOVEMBER 3, 1972
MEETING OF FORMAL LEADERS

Miss Yvonne Bender
Assistant State Supervisor
Health Occupations Education
4100 North Lincoln Blvd.
Oklahoma City, Oklahoma 73105

Mr. Clyde Hamer
Assistant State Supervisor
Health Occupations Education
4100 North Lincoln Blvd.
Oklahoma City, Oklahoma 73105

Mrs. Gloria Lightwine
Assistant State Supervisor
Health Occupations Education
4100 North Lincoln Blvd.
Oklahoma City, Oklahoma 73105

Mrs. Patricia Jamison
State Supervisor
Health Occupations Education
4100 North Lincoln Blvd.
Oklahoma City, Oklahoma 73105

Mrs. Juanita Millsap
2733 West Country Club Drive
Oklahoma City, Oklahoma 73100

Miss Frances Waddle, R.N.
Executive Director
Oklahoma Board Nurse Registration
and Nurse Education
4545 North Lincoln Blvd.
Oklahoma City, Oklahoma 73100

Mrs. Peggy McClain, Coordinator
Practical Nurse Program
Oklahoma City Public Schools
521 N.W. 6th
Oklahoma City, Oklahoma 73102

Mrs. Lynn Bales
Coordinator of Health-Related
Career Programs
South Oklahoma City Junior College
7777 South May
Oklahoma City, Oklahoma 73158

Mrs. Carolyn Briggs
Director of Health Institute
Tulsa Junior College
9095 Boston
Tulsa, Oklahoma 74119

Mrs. Shirley Davis
Oklahoma City Vocational School
of Practical Nursing
521 N.W. 6th
Oklahoma City, Oklahoma 73102

Mrs. Iris Johnson
Oklahoma City Vocational School of
Practical Nursing
521 N.W. 6th
Oklahoma City, Oklahoma 73102

October 16, 1972

This letter concerns the proposal for a feasibility study for a career mobility program in health occupations which was considered in a meeting you attended last May 25. It has now been funded and we are prepared to implement the procedures.

The feasibility study is being carried out as a cooperative project of the Health Occupations Education Division and the Research Division of the State Department of Vocational and Technical Education with Sharon Ward as Principal Investigator and Patricia Jamison as Program Director.

You are invited to attend a short get-together for a progress report on this project on November 3, 1972, at 10:00 a.m. at the Malco Building, 4100 North Lincoln, Oklahoma City. As a leader in health occupations education, your ideas and opinions are of great value to the success of this study. So please feel free to send a representative from your organization if you are unable to attend. A self-addressed envelope and reply form is enclosed for your convenience in indicating whether or not you plan to participate.

A copy of the approved proposal is enclosed. It provides detailed information on the feasibility study. Please note particularly the objectives and procedures outlined on the second page of the proposal. Any questions you may have relative to the project will be answered at the November meeting. Your comments will be welcome at any time.

The scope of the study is to be state-wide. The first phase of this multi-phase career mobility project is planned for completion on February 28, 1973. Resources to be used to develop the model education program are:

1. Opinions and ideas from formal and informal leaders in health occupations education;
2. A Program Guide, Career Development for Supportive Personnel, developed in an earlier research study by Patricia Jamison; plus
3. Recent information available on career mobility programs across the nation.

Page 2

October 16, 1972

As you are well aware, career mobility in health occupations has been widely discussed over the past 30 to 40 years, but only in the last 4 to 5 years have personnel in health occupations benefited from such programs. Even now, institutions implementing these programs are isolated and depend to a great extent on the individual initiative of concerned teachers or directors. As demand for health manpower becomes increasingly critical, we feel, along with you, that time is ripe for action in career mobility. Oklahoma has an opportunity to provide formative leadership in health occupations education by developing a complete network of training facilities and formal arrangements to facilitate health occupations mobility. Results of this project could benefit not only personnel in health occupations but also Oklahomans as a whole in that larger numbers of competent and highly trained individuals would be available to deliver health care. A major key to opening the door in health career mobility in Oklahoma rests in gaining the input of experienced personnel in health occupations education. And successful development of future programs for career mobility may very well depend on the design and acceptance of our model program. Your ideas, opinions, and cooperation are needed to insure the success of this project.

We sincerely hope that you will find it possible to join us.

Sincerely,

(Mrs.) Sharon Ward
Principal Investigator and Project
Writer

(Mrs.) Patricia Jamison
Director, Health Occupations Education Division
Program Director

Enclosure

YZSX-05/8

November 8, 1972

It was a pleasure to work with you in our committee meeting on November 3. Cooperative participation, such as that demonstrated in our meeting, helps to provide valuable insight on the most acceptable approach for career mobility in Oklahoma.

Thank you for your interest in our feasibility study and your fine cooperation in this recent committee effort. We will be contacting you in the future for additional assistance in evaluating potential tools or plans for career mobility.

Sincerely,

(Mrs.) Sharon Ward
Principal Investigator
Division of Research, Planning
and Evaluation

SW/YZSX-06/8

Appendix G

UNIVERSITY OF OKLAHOMA COLLEGE OF NURSING
FACULTY ATTENDING THE NOVEMBER 20, 1972
MEETING

Miss Lorraine Singer
Dean, Graduate Nursing Program
University of Oklahoma Health Sciences Center
424 N.E. 14th Street
Oklahoma City, Oklahoma 73104

Dr. Eleanor Gray Knudson, Dean
University of Oklahoma College of Nursing
424 N.E. 14th Street
Oklahoma City, Oklahoma 73104

Mr. Herbert A. Nishikawa
Assistant Dean, University of Oklahoma
College of Nursing
424 N.E. 14th Street
Oklahoma City, Oklahoma 73104

Mrs. Helen Chapman
Director, Student Affairs
University of Oklahoma College of
Nursing
424 N.E. 14th Street
Oklahoma City, Oklahoma 73104

*Mrs. Gloria Smith
Coordinator, Junior Year
University of Oklahoma College of Nursing
424 N.E. 14th Street
Oklahoma City, Oklahoma 73104

Mrs. Martha Stockwell
Coordinator, Senior Year
University of Oklahoma College of Nursing
424 N.E. 14th Street
Oklahoma City, Oklahoma 73104

Mrs. Martha Primeaux
Chairman, Admissions Committee
University of Oklahoma College of Nursing
424 N.E. 14th Street
Oklahoma City, Oklahoma

* Now Interim Dean

NOTES ON THE NOVEMBER 20, 1972 MEETING WITH THE
UNIVERSITY OF OKLAHOMA COLLEGE OF NURSING FACULTY AND STAFF

1. Does the University of Oklahoma have a policy for granting advanced standing to a student for previous nursing or health-related education or experience?

Yes

- a. How are the students seeking advanced standing evaluated?

Requirements to enter the Bachelor of Science Nursing Program

The University has a policy which allows a student to challenge any course. The total number of advanced standing hours which a student may receive is limited to not more than 30 hours in lower division courses and 31 hours in upper division courses. The challenge exams used are teacher-developed tests.

The College of Nursing does not accept transfer credits from other programs, but a student from another program may earn up to 30 hours credit by successfully passing advanced standing exams.

Requirements for entry to the Master of Science Nursing Program are:

1. Must have current licensure
2. Must be a Registered Nurse from an accredited upper division program
3. If not from an NLN approved program, individual evaluation through proficiency testing will be conducted
4. Bachelor of Science degree in nursing is not required to enter the Masters Program

The Master of Science Nursing Program is a new program which is being submitted to the Board of Regents for approval on November 28. Means for evaluation of students entering the program are currently being assessed.

(Additional details on the University of Oklahoma advanced standing policy was provided in a copy of the University of Oklahoma Bulletin.)

2. What features do you think should be included in a career mobility plan for Oklahoma?
 - a. Coordination with the Oklahoma State Nurses Association and the Oklahoma State Board of Nurse Education and Nurse Registration,
 - b. Evaluation of the quality of various course offerings (This should include evaluation of faculty preparation as well as course content.) No answers as to who should evaluate
 - c. Development of good proficiency exams.
 - d. Clear delineation of requirements of nursing graduates at various levels (For example, there is a lack of identification of what is needed to achieve a Bachelor of Science Degree in Nursing and to practice at that level.)

- e. Provisions for enlightened, intelligent counseling early
- f. Establishment of remedial programs
- g. Development of standards
- h. Respect for individuality of programs (It was noted, seemingly with pride, that no two B.S. Nursing Programs in the United States are alike.)
- i. No blanket credit

3. What contribution in the way of funds, faculty, or facilities would the University of Oklahoma be willing to offer in implementing a model health career mobility program?

The University of Oklahoma College of Nursing is currently committed to their present policy of offering challenge exams in every course, for up to 30 credits at the lower division level and up to 31 credits at the upper division level. This policy is formalized in the University of Oklahoma Bulletin issued for the College of Nursing. The Oklahoma University College of Nursing does offer an open curriculum at the Baccalaureate and Master's levels so individuals entering their program do not have to repeat content already mastered once this mastery is demonstrated on challenge exams.

4. What officials would need to approve for the University of Oklahoma to participate in the implementation phase of this study?

Approval of the current policy for career mobility has already been obtained and the mobility program is implemented.

5. Would you be willing to serve on a committee to develop means for assessing student qualifications for advanced standing for specific levels of nursing?

Miss Lorraine Singer and members of her staff are currently working on means for assessing student qualifications for entry in the Master's Program.

Appendix H

January 8, 1972

Miss Frances I. Waddle, R. N.
Executive Director
Oklahoma Board of Nurse Registration and
Nursing Education
Suite 76--Lincoln Office Plaza
4545 North Lincoln Blvd.
Oklahoma City, Oklahoma 73105

Dear Miss Waddle:

Subject: The Agenda of the January Meeting of the Board

As we approach the final stages of our feasibility study, we find that the assistance of the Oklahoma Board of Nurse Registration and Nursing Education is needed in providing interpretation of the Board's policy relative to such instruments of assessment as proficiency, equivalency and challenge exams to be used for advanced standing. May we have the enclosed "Questionnaire for the Board of Nurse Registration and Nursing Education" placed on the Agenda for the January meeting?

In addition to the questionnaire, we would like to provide each Board member with a description of our study and some of the findings as well as a copy of the original proposal and data collection instrument. A file copy and eight Xerox copies of each are enclosed along with a cover memorandum to each member.

Miss Waddle, we sincerely appreciate the assistance you have provided in our study.

Thank you.

Sharon Ward (Mrs.)
Project Investigator

Patricia Jamison (Mrs.)
Project Director

skw

Enclosures

DATE: January 8, 1972

TO: The Board of Nurse Registration and Nursing Education

FROM: Sharon Ward (Mrs.)
Project Investigator
Research Division, Phone: (405) 377-2000, ext. 280 or 281

Patricia Jamison (Mrs.)
Project Director
Supervisor, Health Occupations Education Division
Phone: (405) 521-3305

SUBJECT: A Feasibility Study of a Mobility Program in Health Occupations

As we approach the final stages of our feasibility study, we find that we need the assistance of the Oklahoma Board of Nurse Registration and Nursing Education in providing interpretation of the Board's policy relative to such instruments of assessment as proficiency, equivalency, and challenge exams to be used for advanced standing. We have asked that the Board react to the attached "Questionnaire for the Board of Nurse Registration and Nursing Education" in the January meeting.

For information purposes, we are enclosing a brief description of our feasibility study and some of the findings as well as a copy of the original proposal and data collection instrument. Should you desire to reply to the original data collection instrument, we would welcome your responses as nurses interested in nursing education.

If you have any questions regarding the study, please feel free to call either of the numbers listed above, and we will be happy to discuss them with you.

Thank you.

QUESTIONNAIRE

(NOTE: The Rules and Regulations referred to in this questionnaire have been reproduced for your convenience on the final page of this instrument.)

1. Would the approval of the Board be required to implement an institutional policy to grant advanced standing through Credit by Examination on nursing content?
2. How would a decision by a school to use Credit by Examination for granting advanced standing to students with previous nursing or health-related education or experience affect your approval of that institutional program?
3. If necessary for research purposes, could the Mobility Plan developed as a result of this feasibility study be considered an "experimental project" under the provisions of Article IV, Section 12 of the Rules and Regulations?
4. Could the Board or a Board member serve in a consulting capacity in the assessment of the adequacy of the instrument to be developed?
5. Would an institutional policy to grant advanced standing based on Credit by Examination come under Article III, Section 5.5, of the Rules and Regulations?
6. Would Article IV, Section 6.2, of the Rules and Regulations include Credit by Examination for experience?
7. Under Article IV, Section 13, Length of Approved Schools, minimum requirements are set for the various types of programs. How does this provision affect Credit by Examination?

8. In this study a number of "Barriers to Career Mobility" were identified including:
(a) Article IV, Section 6.2

"A student admitted by transfer shall be enrolled for at least the final one-fourth of the program in the school which issues his diploma."

"Re-admission of students or admission with advanced standing shall be at a time corresponding with regularly scheduled classes and/or nursing courses."

The recommendation that "credit not be given for courses in nursing content completed more than five years prior to application for transfer or re-admission."

Can these barriers be overcome? If so, how?

EXCERPTS FROM RULES AND REGULATIONS
RELATING TO NURSING EDUCATION LICENSURE
AND PRACTICE IN THE STATE OF OKLAHOMA*

Article III

5.5 Special Reports (page 9)

1. The Board shall be notified in writing of administrative changes relating to and affecting the school.
2. The Board shall approve major curriculum changes, that is;
 - (a) Changes in objectives which alter the present curriculum
 - (b) Increases or decrease in the length of the school
 - (c) Reorganization of the entire curriculum

The request for curriculum change shall include the reason and indicate the present plan as well as the proposed change.
3. All information must be submitted in writing and be available for the Board's consideration prior to the Board meeting.

Article IV (pages 12 and 13)

6.2 Re-admission and Transfer (Admission with Advanced Standing)

1. There shall be a written policy regarding re-admission of students and admission by transfer. A student admitted by transfer shall be enrolled for at least the final one-fourth of the program in the school which issues the diploma.
2. The Board shall be notified of the enrollment of students by re-admission and transfer on forms provided which indicate previous educational experiences and the curriculum plan for completing the requirements for graduation. Re-admission of students or admission with advanced standing shall be at a time corresponding with regularly scheduled classes and/or clinical nursing courses.
3. It is recommended that credit not be given for courses in the nursing content of the curriculum completed more than five years prior to the application for transfer or re-admission.

12. Experimentation

- 12.1 Experimentation is encouraged by the Board when educational principles are observed and there is a well qualified faculty which has the ability and the opportunity to develop a curriculum which may differ from the usual pattern both in content and method.

- 12.2 A school which wishes to initiate an experimental program shall apply to the Board in writing for the approval of its plan.

13. Length of Approved Schools

- 13.1 According to statutory requirements, the minimum length of approved schools shall be:

College or University-68 semester hours (more may be required to earn Associate or Baccalaureate Degree in an individual college)

Hospital Diploma-27 months exclusive of vacation

Practical-12 calendar months with a minimum of 240 instructional days.

- * As published by The Oklahoma Board of Nurse Registration and Nursing Education, 1968.

BRIEF DESCRIPTION OF THE FEASIBILITY STUDY AND SOME OF THE FINDINGS

In October, 1972, the State Department of Vocational and Technical Education funded a study to be conducted as a cooperative project between the Health Occupations Education Division and the Research Division to determine if Career Mobility in Health Occupations is feasible in Oklahoma. Some of you were involved in the origin of this study. In the proposal for the study, Dr. Bill Stevenson, Assistant State Director, wrote:

The critical situation in health manpower needs makes it imperative that we take the best of what we know about training people for health occupations, the most efficient of the experimental attempts at facilitating upward mobility and develop from these a formal, organized, widely-agreed upon, and accepted program for assuring the most effective and efficient advancement of persons interested in expanding their competencies and their responsibilities in the health area.

In this project, 28 leaders in nursing and health related educational programs were personally interviewed and 39 were contacted via mail questionnaire for their opinions and ideas on "career mobility." It appears, based on the results of this study, that the "time is ripe for action" on career mobility. Our findings, see Table I, indicate that 16 nursing and health related programs have implemented career mobility plans, 16 are developing or have plans to develop methods for granting advanced standing, and 23 are interested in participating in a Career Mobility Model Program.

Based on the ideas and opinions of the health occupations and nursing program directors contacted in our feasibility study and due to the current Oklahoma State Regents for Higher Education policy, a mobility plan allowing for movement from vocational to professional nursing or health related programs will require development of an acceptable instrument to assess student qualifications for advanced standing. As shown in Table I, a number of program directors have indicated a willingness to work on a committee to evaluate or develop such an instrument. By pooling the judgment of these competent teachers and testing specialists, the resulting instrument will be based on a diversity of experience and analysis of a wide range of textbooks, courses of study and numerous sets of exams, thus offering a much broader base for acceptability.

The assistance of the State Board of Nurse Registration and Nursing Education is now needed in providing interpretation of the Board's policy relative to such instruments of assessment as proficiency, equivalency and challenge exams to be used for advanced standing.

Findings of our study indicate that a number of state boards and departments have during the past two to three years recognized a need to reassess current institutional policies for granting advanced standing to individuals with previous learning and experience.

In Assessment of Nursing in Oklahoma 1970 the Oklahoma Board of Nurse Registration and Nursing Education recommended:

....That faculties in all types of nursing education programs review their admission and placement procedures in consideration of the statements on "open curriculum," and "vertical mobility," as one means of increasing the effectiveness of each program in evaluating the individuality of potential students and in improving the quality of nursing services available.

The Oklahoma State Regents for Higher Education (1971) in Oklahoma Higher Education--A Plan for the '70s recommended:

Institutions should be sensitive to the need for instructional and educational innovations in the preparation of institutional master plans for the decade of the 1970s. In an effort to meet the needs of students and Oklahoma citizens for higher education in the decade ahead, Oklahoma colleges and universities should carefully consider such approaches as individualized instruction, advanced standing and challenge examinations, cooperative education, extramural degrees, joint degree programs, new calendar approaches, televised instruction, and other promising avenues to improve efficiency and effectiveness.

The development of greater flexibility in teaching and learning through the use of such devices as individualized study, external degrees, televised instruction, and cooperative education will inevitably give rise to the need for evaluation of what students have learned apart from participation in formal classroom study. Therefore, institutions should give immediate attention to the development of standards and criteria by which to measure student learning acquired apart from the academic setting and to allow for the awarding of appropriate credit for such learning...In practical terms the adoption of such a concept would mean that students would no longer be required automatically to sit through eight semesters of three-hour classes until enough hours have been accumulated to graduate. Rather, graduation would be dependent upon the achievement of predetermined standards and objectives established by the faculty, regardless of where or when such learning may have occurred.

Formal transfer policies should be developed by 1973 to assure that a graduate of a public two-year college in Oklahoma who has successfully completed the general education requirements for the associate degree will be eligible to transfer his work to a four-year college or university without the necessity of completing additional lower-division general education courses.

An even more recent statement of policy and procedures was issued by the Oklahoma State Regents for Higher Education (July, 1972) relative to "Standards of Education Relating to Advanced Standing Credit."

Work taken at proprietary schools, secondary vocational-technical schools, institutions offering clock-hour work, and other non-collegiate institutions must be evaluated and validated through examination or proficiency testing by the receiving institution. The name of the sending institution (proprietary school, secondary vocational-technical school, clock-hour school) shall not appear on the transcript of the awarding institution.

Recommended methods for evaluating students' previous learning experiences for awarding advanced standing credit are:

- a. Institutionally prepared examinations, including performance testing.
- b. Standardized national tests especially designed for establishment of credit....
- c. Recognition of military service experiences...upon the basis of criteria and recommendations contained in the publication of the American Council on Education especially designed for that purpose.

The amount of advanced standing credit which may be awarded shall not exceed one-half of the total semester hours required at the lower-division level, and not more than one-half of the total semester hours required at the upper-division level.



BOARD OF NURSE REGISTRATION AND NURSING EDUCATION

SUITE 76 — LINCOLN OFFICE PLAZA • 4545 LINCOLN BLVD. • OKLAHOMA CITY, OKLAHOMA 73105

405/521-2363

February 9, 1973

Mrs. Patricia Jamison, R.N.
State Supervisor
Health Occupations Education Division
State Department of Vocational and
Technical Education
4100 Lincoln Boulevard
Oklahoma City, Oklahoma 73105

Dear Mrs. Jamison:

The Board of Nurse Registration and Nursing Education appreciated the opportunity to review the material and questionnaire relating to the career mobility project. The Board evaluates a school of nursing according to its total program, rather than any individual aspect, such as those mentioned in the questionnaire.

The instruments identified for evaluation (proficiency, equivalency, and challenge examinations) have been and are being utilized by faculty in different schools in a variety of ways. The degree of usage by schools is determined by the educational objectives of the program and the readiness of the faculty to institute such plans.

The Board and staff, by policy, do not participate in the development of evaluation tools used by schools of nursing. Individuals who are members of the Board have participated in the feasibility study in relation to their place of employment.

As faculty in the separate schools of nursing develop plans for acceleration or career mobility and encounter difficulties related to specific criteria, they are encouraged to consult with the Board.

Thank you for sharing this material with the Board.

Sincerely yours,

Frances I. Waddle
(Miss) Frances I. Waddle, R.N.
Executive Director

FIW/mmw

cc: Mrs. Sharon Ward

Appendix I

L

LETTERS ACCOMPANYING THE CAREER MOBILITY PLANS

Note: The same basic letter was mailed to all program directors--with only the commitment section varying.

Commitment Section

1. Your personal commitment to serve on a committee to evaluate or develop means for assessing student qualifications for advanced standing. (Included in all letters)
2. Your institutional commitment to utilize the instrument(s) agreed to according to the plan for assessing student qualifications for advanced standing. (Included in Letters to Associate Degree, Diploma, and Practical Nursing Programs)
3. Your commitment to communicate to your students and interested individuals, information on currently available plans for Career Mobility. (In this study we will be developing a publication describing the currently available plans for Career Mobility which have been implemented in Oklahoma.) (Included in all letters)
4. Your institutional commitment to participate in a "Model Program" using the revised Area I curriculum and accepting Nursing Assistant students who have successfully completed the upgraded curriculum (Area I of the Licensed Practical Nursing Program) at the Area II level. (Included Only in letter to Practical Nursing Programs)
5. Your institutional commitment to participate in a "Model Program" using the revised Area I curriculum. (Included only in letters to Health Service Career Programs)

"Model Program" is defined as an experimental model which, if successful, could serve as a prototype for a Career Mobility Program in Oklahoma.

January 17, 1973

(To Directors of Diploma Nursing and Associate Degree
Nursing and Health Occupations Programs)

During the months of October and November, 1972, you and a number of Health Occupations and Nursing Program Directors, as well as representatives of the Oklahoma Board of Nurse Registration and Nursing Education and the Oklahoma State Nursing Association, were contacted in a research study conducted by the Research Division of the State Department of Vocational and Technical Education through the Health Occupations Education Division to determine the feasibility of a Career Mobility Program in Oklahoma. Upon analysis of the information, a significant majority expressed a willingness to serve on a committee to develop or evaluate means for assessing student qualifications for advanced standing, 23 indicated an interest in implementing a "model program," 16 were found to have currently implemented plans for career mobility, and 16 were developing or have plans to develop methods for granting advanced standing to individuals with previous nursing or health-related education or experience.

A number of authority organizations in Oklahoma have via policy statements endorsed the concept of Career Mobility (see recommendations on pages 1 and 2 of "A Proposed Health Occupations Career Mobility Plan for Oklahoma"). Further, responses from 28 personal interviews and 39 mail questionnaires indicate that program directors in nursing and health-related occupations in Oklahoma are highly receptive to the idea of Career Mobility. A summary tabulation of the programs contacted in this study and their current status on Career Mobility is enclosed for your information and review.

From the ideas and opinions expressed by you and other individuals contacted in this study, we have developed a Career Mobility Plan. A brief abstract of the proposed plan as well as a copy of the plan are enclosed.

We now need your letter of commitment in order to implement the plan. May we have your letter, written on your letterhead and signed by you and the official(s) in your school whose approval would be required to implement the plan stating:

1. Your personal commitment to serve on a committee to evaluate or develop means for assessing student qualifications for advanced standing.
2. Your institutional commitment to utilize the instrument(s) agreed to according to the plan for assessing student qualifications for advanced standing, and
3. Your commitment to communicate to your students and interested individuals, information on currently available plans for Career Mobility. (In this study we will be developing a publication describing the currently available plans for career mobility which have been implemented in Oklahoma.)

Page No. 2
January 17, 1973

If there are parts of the plan with which you cannot agree, may I have your written critique in order that we may work out a plan which is acceptable to you. Since we hope to have this study completed, including final reports by February 28, I would greatly appreciate your response no later than February 5.

Within a few days of the anticipated receipt of the plan, I will be calling you to be sure that you did receive your copy. At that time we could discuss any questions, ideas, and criticisms you may have.

Your willingness to cooperate, as demonstrated in your positive response during the initial data collection phase of this study, is greatly appreciated. Cooperation in this study is considered as participation in research and results will be communicated to programs interested in having this information. Through active participation of leaders in Allied Health Occupations and Nursing Education, realistic opportunities for individuals to expand their competencies in Health Occupations can be developed; thus, hopefully providing better health care and services for Oklahomans.

Thank you for your cooperation.

Sincerely,

(Mrs.) Sharon Ward
Project Investigator

(Mrs.) Patricia Jamison
Project Director

Enclosures

SW/YZVG-02/18

January 17, 1973

(To Directors of Vocational Health Occupations Programs)

During the months of October and November, 1972, you and a number of Health Occupations and Nursing Program Directors, as well as representatives of the Oklahoma Board of Nurse Registration and Nursing Education and the Oklahoma State Nursing Association, were contacted in a research study conducted by the Research Division of the State Department of Vocational and Technical Education through the Health Occupations Education Division to determine the feasibility of a Career Mobility Program in Oklahoma. Upon analysis of the information, a significant majority expressed a willingness to serve on a committee to develop or evaluate means for assessing student qualifications for advanced standing, 23 indicated an interest in implementing a "model program," 16 were found to have currently implemented plans for career mobility, and 16 were developing or have plans to develop methods for granting advanced standing to individuals with previous nursing or health-related education or experience.

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2. Your commitment to communicate to your students and interested individuals, information on currently available plans for Career Mobility. (In this study we will be developing a publication describing the currently available plans for career mobility which have been implemented in Oklahoma.)

Page 2

January 17, 1973

If there are parts of the plan with which you cannot agree, may I have your written critique in order that we may work out a plan which is acceptable to you. Since we hope to have this study completed, including final reports by February 28, I would greatly appreciate your response no later than February 5.

Within a few days of the anticipated receipt of the plan, I will be calling you to be sure that you did receive your copy. At that time we could discuss any questions, ideas, and criticisms you may have.

Your willingness to cooperate, as demonstrated in your positive response during the initial data collection phase of this study, is greatly appreciated. Cooperation in this study is considered as participation in research and results will be communicated to programs interested in having this information. Through active participation of leaders in Allied Health Occupations and Nursing Education, realistic opportunities for individuals to expand their competencies in Health Occupations can be developed; thus, hopefully providing better health care and services for Oklahomans.

Thank you for your cooperation.

Sincerely,

(Mrs.) Sharon Ward
Project Investigator

(Mrs.) Patricia Jamison
Project Director

Enclosures

SW/YZSX-10/8

January 22, 1973

(To Directors of Licensed Practical Nursing Programs)

During the months of October and November, 1972, you and a number of Health Occupations and Nursing Program Directors, as well as representatives of the Oklahoma Board of Nurse Registration and Nursing Education and the Oklahoma State Nursing Association, were contacted in a research study conducted by the Research Division of the State Department of Vocational and Technical Education through the Health Occupations Education Division to determine the feasibility of a Career Mobility Program in Oklahoma. Upon analysis of the information, a significant majority expressed a willingness to serve on a committee to develop or evaluate means for assessing student qualifications for advanced standing, 23 indicated an interest in implementing a "model program," 16 were found to have currently implemented plans for career mobility, and 16 were developing or have plans to develop methods for granting advanced standing to individuals with previous nursing or health-related education or experience.

A number of authority organizations in Oklahoma have via policy statements endorsed the concept of Career Mobility (see recommendations on pages 1 and 2 of "A Proposed Health Occupations Career Mobility Plan for Oklahoma"). Further, responses from 28 personal interviews and 39 mail questionnaires indicate that program directors in nursing and health-related occupations in Oklahoma are highly receptive to the idea of Career Mobility. A summary tabulation of the programs contacted in this study and their current status on Career Mobility is enclosed for your information and review.

From the ideas and opinions expressed by you and other individuals contacted in this study, we have developed a Career Mobility Plan. A brief abstract of the proposed plan as well as a copy of the plan are enclosed.

We now need your letter of commitment in order to implement the plan. May we have your letter, written on your letterhead and signed by you and the official(s) in your school whose approval would be required to implement the plan stating:

1. Your personal commitment to serve on a committee to evaluate or develop means for assessing student qualifications for advanced standing.
2. Your institutional commitment to utilize the instrument(s) agreed to according to the plan for assessing student qualifications for advanced standing.

Page No. 2
January 22, 1973

3. Your institutional commitment to participate in a *"Model Program" using the revised Area I curriculum and accepting Nursing Assistant students who have successfully completed the upgraded curriculum (Area I of the Licensed Practical Nursing Program) at the Area II level. *("Model Program"--This would be an experimental model which, if successful, could serve as a prototype for Career Mobility Program in Oklahoma.)
4. Your commitment to communicate to your students and interested individuals information on currently available plans for Career Mobility. (In this study we will be developing a publication describing the currently available plans for Career Mobility which have been implemented in Oklahoma.)

If there are parts of the plan with which you cannot agree, may I have your written critique in order that we may work out a plan which is acceptable to you. Since we hope to have this study completed, including final reports by February 28, I would greatly appreciate your response no later than February 8.

Within a few days of the anticipated receipt of the plan, I will be calling you to be sure that you did receive your copy. At that time we could discuss any questions, ideas, and criticisms you may have.

Your willingness to cooperate, as demonstrated in your positive response during the initial data collection phase of this study, is greatly appreciated. Cooperation in this study is considered as participation in research and results will be communicated to programs interested in having this information. Through active participation of leaders in Allied Health Occupations and Nursing Education, realistic opportunities for individuals to expand their competencies in Health Occupations can be developed; thus, hopefully providing better health care and services for Oklahomans.

Thank you for your cooperation.

Sincerely,

(Mrs.) Sharon Ward
Project Investigator

(Mrs.) Patricia Jamison
Project Director

Enclosures

January 22, 1973

(To Directors of Health Service Careers Programs)

During the months of October and November, 1972, you and a number of Health Occupations and Nursing Program Directors, as well as representatives of the Oklahoma Board of Nurse Registration and Nursing Education and the Oklahoma State Nursing Association, were contacted in a research study conducted by the Research Division of the State Department of Vocational and Technical Education through the Health Occupations Education Division to determine the feasibility of a Career Mobility Program in Oklahoma. Upon analysis of the information, a significant majority expressed a willingness to serve on a committee to develop or evaluate means for assessing student qualifications for advanced standing, 23 indicated an interest in implementing a "model program," 16 were found to have currently implemented plans for career mobility, and 16 were developing or have plans to develop methods for granting advanced standing to individuals with previous nursing or health-related education or experience.

A number of authority organizations in Oklahoma have via policy statements endorsed the concept of Career Mobility (see recommendations on pages 1 and 2 of "A Proposed Health Occupations Career Mobility Plan for Oklahoma"). Further, responses from 28 personal interviews and 39 mail questionnaires indicate that program directors in nursing and health-related occupations in Oklahoma are highly receptive to the idea of Career Mobility. A summary tabulation of the programs contacted in this study and their current status on Career Mobility is enclosed for your information and review.

From the ideas and opinions expressed by you and other individuals contacted in this study, we have developed a Career Mobility Plan. A brief abstract of the proposed plan as well as a copy of the plan are enclosed.

We now need your letter of commitment in order to implement the plan. May we have your letter, written on your letterhead and signed by you and the official(s) in your school whose approval would be required to implement the plan stating:

1. Your personal commitment to serve on a committee to evaluate or develop means for assessing student qualifications for advanced standing.
2. Your institutional commitment to participate in a *"Model Program" using the revised Area I curriculum. *("Model Program"--This would be an experimental model which, if successful, could serve as a prototype for a Career Mobility Program in Oklahoma.)
3. Your commitment to communicate to your students and interested individuals, information on currently available plans for Career Mobility. (In this study we will be developing a publication describing the currently available plans for Career Mobility which have been implemented in Oklahoma.)

Page No. 2
January 22, 1973

If there are parts of the plan with which you cannot agree, may I have your written critique in order that we may work out a plan which is acceptable to you. Since we hope to have this study completed, including final reports by February 28, I would greatly appreciate your response no later than February 8.

Within a few days of the anticipated receipt of the plan, I will be calling you to be sure that you did receive your copy. At that time we could discuss any questions, ideas, and criticisms you may have.

Your willingness to cooperate, as demonstrated in your positive response during the initial data collection phase of this study, is greatly appreciated. Cooperation in this study is considered as participation in research and results will be communicated to programs interested in having this information. Through active participation of leaders in Allied Health Occupations and Nursing Education, realistic opportunities for individuals to expand their competencies in Health Occupations can be developed; thus, hopefully providing better health care and services for Oklahomans.

Thank you for your cooperation.

Sincerely,

(Mrs.) Sharon Ward
Project Investigator

(Mrs.) Patricia Jamison
Project Director

Enclosures

SW/YZVG-03/18

Appendix J

January 24, 1973

Dr. Larry Hayes
Coordinator of Academic Research
Oklahoma State Regents for Higher Education
Capitol Building
Oklahoma City, Oklahoma 73105

Dear Dr. Hayes:

The State Department of Vocational and Technical Education, in October, 1972, funded a study to be conducted as a cooperative effort of the Health Occupations Education and Research Divisions to determine the feasibility of a Career Mobility Program in Health Occupations. A copy of the original proposal which describes the study in detail is enclosed for your information.

In this study, 67 program directors in Nursing and Health-Related programs from the Vocational through the Master of Science level, as well as representatives of the Oklahoma Board of Nurse Registration and Nursing Education and the Oklahoma State Nurses Association, were contacted for their opinions and ideas on Career Mobility. (See Table I--Summary Tabulation of the Programs Contacted and Their Current Status on Career Mobility--for some of the preliminary findings of our study.)

Based on the ideas and opinions expressed by these individuals, a review of currently implemented Career Mobility Plans across the nation, and consideration of the current policies of the Oklahoma State Regents for Higher Education relative to advanced standing as stated in Oklahoma Higher Education--A Plan for the '70s and "The Standards of Education Relating to Advanced Standing Credit" (July, 1972), we have developed A Proposed Health Occupations Career Mobility Plan for Oklahoma. A copy of the Plan is enclosed.

After you have had an opportunity to review the Plan, may I meet with you personally for your critique? Your comments and suggestions will provide valuable insight in assessing the practicability and acceptability of the Plan. Within a few days of receipt of this letter, I will telephone you to arrange a personal interview at your convenience.

Thank you.

Sincerely,

(Mrs.) Sharon Ward
Project Investigator
Division of Research, Planning,
and Evaluation

Enclosures

SW/YZDV-03/18

Appendix K

January 25, 1973

(To Directors of Nursing and Health Occupations Programs Whose
Implemented Career Mobility Plans were Identified in this Study)

In a research study being conducted by the Health Occupations Education Division and the Research Division of the State Department of Vocational and Technical Education, we contacted you and 66 other Directors of Nursing and Health-Related programs, as well as representatives of the Oklahoma Board of Nurse Registration and Nursing Education and the Oklahoma State Nurses Association for opinions and ideas on the feasibility of a Career Mobility Program in Oklahoma. One finding of our study is that a number of Oklahoma Nursing and Health Related Career Mobility plans are currently available. However, in many instances, the individuals who could benefit from such programs are unaware of their existence.

Therefore, one function of this study will be to operationalize a means of providing information on Career Mobility opportunities which are available. We will develop a publication describing the currently implemented plans which will be available on request to all interested program directors.

Based on your response to our questionnaire, the enclosed description of your Mobility Plan has been developed. So that we may be sure the details which you would like to have specified are included and that your plan is accurately described, may we have your critique of this description and a letter granting your permission to describe your plan in our publication? A stamped return envelope is enclosed for your convenience.

Since we hope to complete this study, along with final reports by February 28, may we have your response no later than February 9.

Thank you for your cooperation in this project.

Sincerely,

(Mrs.) Sharon Ward
Project Investigator
Division of Research, Planning
and Evaluation

Enclosure

SW/YZVG-05/18

Appendix L

AREAS OF CONTENT IDENTIFIED AS REPEATED

In moving from:

(1) A Diploma to a Baccalaureate Program

<u>Content</u>	<u># of Prog. Dir. Identifying this Area</u>
All Nursing Content	2
Public (Community) Health	1

(2) An Associate Degree to a Baccalaureate Degree Nursing Program

<u>Content</u>	<u># of Prog. Dir. Identifying this Area</u>
Fundamentals of Nursing	1
Some Nursing Content	4

(3) An Associate Degree to a Baccalaureate Degree Health Occupations Program

<u>Program</u>	<u>Content</u>	<u># of Prog. Dir. Identifying this Area</u>
Occupational Therapy	All Course Content	2
Therapeutic Recreation	All Course Content	1
Physicians Assistant	All Course Content	2
Any B.S. Program	All Course Content	1
Medical Lab. Tech.	Repeat and Expand on the Practical in the Clinical Area	1
	Depends--some credit given for life and physical sciences	2

(4) A Practical Nursing to an Associate Degree, Diploma, or Baccalaureate Nursing Program

<u>Content</u>	<u># of Prog. Dir. Identifying this Area</u>
Fundamentals of Nursing	3
Basic Nursing Procedure	4
Nutrition	2
Body Structure and Function	3
Personal Vocational Relationships	1
Pharmacology	1
Maternal-Child Care	2
All Areas	3

(5) A Vocational to an Associate Degree Health Occupations Program

<u>Program</u>	<u>Content</u>	<u># Prog. Dir. Identifying this Area</u>
Medical Secretary	All Course Content	1
	Terminology, Anatomy,	1
	Sterilization Techniques,	
	Patient Positioning,	
	Draping, Injections,	
Dental Hygienist	Medication, and Film	
	Handling	
	Basic Sciences	1
	Grooming, Nutrition,	
	First Aid, and	
	Sterilization	2

(6) Health Service Careers to an Advanced Nursing Program

<u>Content</u>	<u># Prog. Dir. Identifying this Area</u>
Basic Nursing Skills (Fundamentals)	10
Anatomy and Physiology	4
Medical Terminology	4
Asepsis	1

Appendix M

PERCEIVED BARRIERS TO THE CORE CURRICULUM APPROACH
- A SYNTHESIS -

1. While skills, attitudes, and knowledges are similar, there are great variations in the depth of knowledge required at different levels. HSC V, LPN III, AD III, BS III
2. There may be a variance of competencies in a single program. Core curriculum does not give the student an opportunity to demonstrate where her competencies lie. HSC I
3. Core curriculum does not provide the school with an evaluation of the curriculum or quality of education to which the student has been exposed. HSC VIII
4. It is difficult to find instructors proficient in all areas desired in the core. LPN V, AD I, BS I
5. Core curriculum fails to provide credit for certain types of experiences. HSC II
6. Approval of all programs involved would be essential for successful implementation. It is difficult to get people from different health occupations to agree to a common core. HSC II, LPN IV, AD II, DIP I, BS II
7. Programs tend to resist change from traditional methods. HSC I, LPN I, DIP I
8. Many people build "little empires" and think that they and they alone are right. AD III, DIP I
9. There are variations in the way curriculums are set up from program to program making transferability of students between existing programs and establishment of a core difficult. HSC IV, LPN II, AD V, DIP I, BS I
10. There is a need for improved counseling to provide the right student with the right subject at the right time. HSC I
11. There is a lack of uniform curriculum objectives and goals. HSC III, AD I
12. The length of time an evaluation remains accurate has not been determined. HSC I
13. It is difficult to establish a core which meets the individual needs of a very diversified group. LPN III

14. Core curriculums have deterred some students from pursuing selected educational experiences to meet individual needs and goals. LPN I
15. There are differences in objectives and philosophies in various programs. LPN III
16. Quality facilities for clinical experiences are limited. LPN II, AD I
17. Additional funds will be needed to finance the development of the core and the additional faculty required to work separately with groups entering at different levels. LPN III, HSC I, DIP I
18. Finding individuals with experience to direct the organization and implementation is difficult. LPN IV
19. Regents approval is required to grant credit to Vo-Tech students. AD I
20. The time and effort required to develop a core curriculum seldom meets with the approval of program directors responsible for individual professional areas. AD I
21. Too much control would have an adverse affect on innovative approaches. AD II
22. Regents' approval is required to implement a new program. AD I
23. Core curriculum may create scheduling problems. AD I
24. How do you give credit for 1/3 of a course--administrative red tape? AD I
25. Explicit definition of sameness and difference is difficult. DIP I
26. People are hesitant to "speak their minds." DIP I
27. There are multi-definitions of what a core curriculum is. BS I
28. Team teaching would be required. BS I
29. Many consider team teaching a threat. BS I
30. The core curriculum concept applies more appropriately within given levels, rather than across levels. BS III
31. All areas of study need to be well developed. AD I

PERCEIVED BARRIERS TO THE CREDIT BY EXAMINATION APPROACH
- A SYNTHESIS -

1. Such an approach leaves rooms for gaps in education. (Some areas do not lend themselves to examination.) HSC I, AD I, DIP I
2. Tests may not adequately assess a student's qualifications. (The instrument may hit all of a student's strong or weak points, or if a person is exposed to only a portion of course content, he may fail the exam although he has mastered the segment he covered.) HSC VI, AD III
3. An adequate testing instrument for assessing both theory and performance is not available. HSC III, LPN IV, DIP I, BS III
4. People may create barriers. HSC I, LPN I, AD I
5. State Law Requirements may pose barriers. DIP I
6. There may be hesitancy on the part of some institutions of higher education to accept challenge exams. DIP I
7. There is no large scale agreement on what competencies must be held by all individuals on a given level (Closest: State Board exam scores or graduation from a State approved school of nursing). AD I
8. Due to differences in focus of each program, it will be difficult to find or develop a test to provide a means for assessing all graduates of all programs in Oklahoma. AD II, HSC I, DIP I, BS I, LPN II
9. Agreement on what material should be covered in an exam, who will decide what is a passing grade, and how much credit should be allowed is a problem. HSC II, LPN IV, AD I
10. Tests are often unrealistically difficult due to lack of awareness by individual(s) constructing the tests of course content on lower levels. LPN I
11. Meaningful objectives must be agreed upon.
12. Equating equivalency exams of non-formal learning outside a program with that achieved in that program is difficult. LPN II
13. Some feel credit by examination should be combined with the core approach. Such a policy would pose barriers to individuals with only informal learning experiences. LPN II

14. Time and experience of instructors in developing good exams and keeping them updated is limited. LPN III, AD I, DIP I
15. The expense of taking exams may deter some. HSC I
16. Fear of failure or non-acceptance may deter some. HSC I
17. A central testing location adequately large to administer state-wide tests will be needed. HSC I
18. Practicum demonstration on a 1-to-1 basis requires additional faculty time and may necessitate increased faculty--hence additional financing. AD I
19. Students given credit by exam need to be followed up in terms of their success in new programs. AD I
20. Limits should be placed on the amount of credit which could be given through advanced standing. (Patient contact is important.)
21. A standardization of the course exam and skill evaluation is needed to eliminate subjective evaluation by the tester. AD I

HOW TO OVERCOME THE BARRIERS TO THE CORE CURRICULUM APPROACH - A SYNTHESIS -

1. Develop a core for basics providing greater depth in each specialty area as required. HSC II, LPN II, AD I
2. Implement self-paced learning. AD I
3. Develop challenge and performance exams on modules. AD I
4. Test on an individual basis. HSC III
5. Standardize curriculum and objectives. HSC I, DIP I
6. Establish standard requirements for all teachers. PN I
7. Supplement the core curriculum approach with additional evaluation initially (both clinical and theory tests). LPN II
8. Require increased education to improve quality at all levels. BS I
9. Utilize team teaching. HSC I, AD I
10. Carefully survey and assess concepts to be included and their relationship to all health careers. HSC I
11. Use a committee or board to approve and regulate the program which is as representative of all various areas as possible. HSC I
12. Establish a committee composed of representatives from each level to look into unification of core curriculum and establishing uniform course descriptions and current bulletins. AD II
13. Implement statewide planning which includes directors of all schools (Statewide Planning Commission). DIP I
14. Establish a power center with power to coordinate and enforce. DIP I, AD I
15. Elicit mutual understanding and cooperation among all schools having similar programs. LPN II, AD I
16. Plan workshops that involve leaders (educators, faculty and employers in health careers) at all levels. HSC I, LPN III
17. Prove it can be done through trial projects. HSC I
18. Demonstrate the time and money which can be saved through use of a core curriculum. HSC I
19. Provide experienced persons to assist local schools. LPN I

20. Develop patience and allow time for acceptance. LPN I, DIP I
21. Secure a faculty that understands core curriculum. LPN I
22. Educate administration and faculty. LPN I, AD I
23. Communicate what is taught at each level. AD I
24. Maintain respect for disciplines other than own. AD I
25. Accompany grades with written evaluations. HSC I
26. Orient everyone to the philosophy and objectives of each health occupation group. LPN I
27. Require each school to offer the same subjects within the core. AD I
28. Keep counselors informed on prerequisites and guidelines for a core curriculum. HSC II
29. Develop written guidelines to aid persons in establishing a core curriculum. LPN I
30. Identify the length of time an evaluation remains accurate. HSC I
31. Synthesize a number of texts to meet the needs of a variety of students at a given level. HSC I
32. Recruit and enlist the assistance of students at the high school and junior college level. HSC I
33. Make observation visits to a number of implemented programs, try several approaches, meet to compare notes, develop the ideal approach. HSC I
34. Increase funds available. HSC I, LPN I, AD I
35. Provide adequate time to develop instruments. HSC I
36. Conduct a pilot study to determine if the Regents' guidelines are valid. AD I
37. Elicit policy changes. AD I
38. Students will educate the Regents. AD I
39. Establish a good system of standards and controls.

HOW TO OVERCOME THE BARRIERS TO THE CREDIT BY EXAM APPROACH - A SYNTHESIS -

1. Use other means of evaluation coupled with exams. HSC III
2. Conduct an in-depth study of curriculum to determine the material which lends itself to measurement. LPN I
3. Require course be taken prior to allowing challenge on nursing content. DIP I
4. Develop behavioral objectives at each level for which tests could be developed.
5. Include performance tests based on the objectives of the program. LPN II, DIP I, BS I
6. Determine which competencies must be demonstrated and how to test for them. AD I
7. Continually update curriculum with actual work situation. LPN I
8. Implement a plan for screening by the licensing agency to eliminate the risk of allowing advancement prior to mastery of skills and knowledges--at least they would or should have some good idea on what periodic screening would accomplish.
9. Strengthen the students' background prior to the exam.
10. Establish a follow-up system--study success of students both as students and graduates. AD I
11. Provide funds for hiring of competent individuals or allowing for release time for faculty to develop tests. LPN I, AD I, DIP I
12. Standardize tests for all areas. HSC I, LPN II, AD I
13. Use exams prepared by a certifying agency.
14. Utilize committees of instructors representative of all programs to develop written criteria and guideline for standardized tests.
15. Use NLN standardized exams.
16. Set up a committee composed of instructors representative of all areas to develop a valid and reliable measuring instrument of student's knowledge and skills. HSC IV, LPN IV, AD I
17. Insure good communication up and down the ladder (including communication of what is being taught at various levels). LPN I

18. Establish trial and error projects. LPN I, AD II
19. Promote interest. LPN I
20. Elicit outside assistance. LPN I
21. Work cooperatively. AD I
22. Investigate the philosophy of the faculty in regard to credit by exam prior to hiring. AD I
23. Elicit a willingness to change with the times. DIP I
24. Recognize individuality of programs and allow for in developing mobility plan(s).
BS I
25. Establish identical curriculum. I
26. Standardize procedures. HSC I
27. Change program focus by structuring programs with this in mind. AD I
28. Develop a statewide plan for major emphasis and philosophy. (This could eliminate the need for testing if the focus and philosophies are the same.) AD
I
29. Obtain agreement of all schools to accept the same standards. LPN I
30. Test quarterly. HSC I
31. Vary the amount of credit given from one program to another, i.e., more credit should be given in moving into some areas than others.
32. Administer controlled exams. AD I
33. Implement a plan for allowing students to challenge units within a course and receive credit value for less than the entire course.

Appendix N

OPINION LEADERS

In an attempt to identify opinion leaders in Health Occupations Education, respondents were asked:

"In developing your program for Career Mobility, who would you consult for opinions and ideas?"

From the responses received, it would appear that few state-wide opinion leaders exist in Health Occupations Educations. Opinion Leaders mentioned by two or more program directors are listed below:

<p>Dr. Wilson Stinnett Administrator, Baptist Hospital Oklahoma City, Oklahoma</p>	2
<p>Dr. Frances Tuttle, State Director State Department of Vocational and Technical Education Stillwater, Oklahoma</p>	2
<p>Dr. E. T. Dunlap, Chancellor Oklahoma State Regents for Higher Education State Capitol Building Oklahoma City, Oklahoma</p>	2
<p>Mrs. Patricia Jamison, State Supervisor Health Occupations Education Division State Department of Vocational and Technical Education 4100 North Lincoln Oklahoma City, Oklahoma</p>	5
<p>Miss Juanita Proctor Nursing Department Oklahoma Baptist University Shawnee, Oklahoma</p>	2

A number of respondents identified Formal Organizations such as:

<p>National League of Nursing</p>	2
<p>Oklahoma State Regents for Higher Education</p>	2
<p>Oklahoma Board of Nurse Registration and Nursing Education</p>	6
<p>Oklahoma State Department of Vocational and Technical Education</p>	8
<p style="padding-left: 40px;">Health Occupations Education Division</p>	4
<p style="padding-left: 40px;">Curriculum Division</p>	4

Further, the following members of formal organizational structures in Health Occupations and Health Occupations Education were identified:

Representatives of Educational Institutions

Local Administrators	7
Program Directors	7
Faculty	14
Advisory Committees	7

Representatives of Health Service Institutions

Hospital Administrators	4
Physicians	6
Nurses	6
Clinicians	2

as well as, the following miscellaneous categories:

Individuals with experience in developing Career Mobility Programs	3
Career Mobility Programs which have been implemented	3
Students	2

OTHER RESOURCES

The question:

"Please suggest other resources where you would seek assistance in these areas."

resulted in identification of the following:

Advisory Committees	3
Professional Organizations	3
Oklahoma State Regents for Higher Education	3
National League of Nursing	2
State Department of Vocational and Technical Education	2
Department of Health, Education and Welfare	2
National Institute of Health	2

Appendix O

EXISTING INSTRUMENTS FOR ASSESSING STUDENT QUALIFICATIONS FOR ADVANCED STANDING

QUESTIONS on which this tabulation was based:

10. Have you used the National League of Nursing Standardized Tests in your program for granting advanced standing? () Yes () No

11. Do you have confidence in these tests for assessing a student's qualifications for advanced standing in nursing or health related programs? () Yes () No

If no, why? (Succeeding pages give a synthesis of responses)

12. Do you use or are you aware of other tests, standardized or non-standardized, which you think may be useful in assessing student qualifications for advanced standing? () Yes () No

If yes, please list title and indicate program for which it is used. (Succeeding pages give a synthesis of responses)

	Health Occupations Programs						Nursing Programs			
	Vocational			Assoc. Degree			L.P.N.	A.D.	Diploma	B.S.
	HSC	MOA	DOA	MLT	Resp T	H O				
NLN Tests										
Have used for granting adv. standing	1	0	0	0	0	0	6	0	0	0
Have not used for granting adv. standing	14	3	2	3	1	3	12	9	2	3
Have confidence in for granting adv. standing	4	0	0	0	0	1	9	4	1	2
Do not have confidence in for granting adv. standing	6	0	0	0	0	2	5	3	2	1
Not familiar with	3	1	1	1	1	0	0	1	0	0
Other Tests										
Aware of	4	1	2	1	0	3	7	4	1	1
Not aware of	12	2	0	2	1	1	11	5	2	2
No Response										
No. 10	2	0	1	0	0	1	0	0	0	0
No. 11	4	2	2	1	0	1	4	1	0	0
No. 12	1	0	1	0	0	0	0	0	0	0

RESPONSES TO THE SECOND PARTS OF QUESTIONS 11 AND 12 CATEGORIZED BY TYPE OF PROGRAM

Vocational Health Occupations Programs

11. If no, why?

- a. I feel performance should be tested also
- b. Some of them have the dumbest questions
- c. Not applicable
- d. I feel some of the content is irrelevant (referred to content on "the arts")
- e. They do not adequately assess a student's qualifications in all areas
- f. They are outdated

12. If yes, please list title and indicate program for which it is used.

- a. Oklahoma's exams for Nursing Assistant--from basic to advanced
- b. Perhaps Area I Licensed Practical Nursing tests could be used for our Nursing Assistant students
- c. American Red Cross Standard Certificate Tests
- d. Medical Office Assistant Exam developed by AMA to certify students with two years experience (One program director felt these were good; a second, stated geographic differences make them unrelated.)
- e. Dental Assistant Certifying Exam--requires 2 years experience prior to taking the exam. They are developed by the American Dental Assistant Association.

Associate Degree--Health Occupations Programs

11. If no, why?

- a. Lack of knowledge on my part concerning these tests.
- b. Tend not to be current conceptual content.

12. If yes, please list title and indicate program for which it is used.

- a. CLEP for Medical Laboratory Technicians
- b. CLEP and ACT--The ACT Social Science score is a good indicator of reading ability.
- c. Teacher-developed tests (South Oklahoma City Junior College)

Licensed Practical Nursing Programs

11. If no, why?

- a. Too difficult and usually obsolete
- b. Am of the opinion they are not good tests for local situations. Also, they do not test skills
- c. Does not evaluate practical application
- d. Outdated--same tests since 1958

- e. My students have consistently scored low on the first test, while practicing competently and later scoring high on the second test and State Board examination.

12. If yes, please list title and indicate program for which it is used.

- a. Psychological Corporation, 304 East 45th Street, New York, New York 10017
- b. Teacher-made tests (Clinton, Lawton, Muskogee and Oklahoma City LPN Programs)
- c. MMPI
- d. OTIS Standard IQ (requiring a score of 90 or above)
- e. Nelson Denny Reading Comprehension Test
- f. Two literature sources were referenced:

Von Greppe and Broadwell. Practical Nursing Study Guide and Review. Philadelphia: J. B. Lippincott Company, 1971.

Thomas, Virginia E. Life Sciences for Health Technologies. Huntington Beach, California: Technicourse, Inc., 1970.

Associate Degree Nursing Programs

11. If no, why?

- a. Some items on each test may be outdated.
- b. A written test alone does not measure skills or aptitude of applicant
- c. Do not necessarily reflect what the individual courses stress
- d. May have been used in previous program
- e. Content not current

12. If yes, please list title and indicate program for which it is used.

Mesa College Exam (performance and academic exam in nursing)

CLEP and ACT Tests (Recommends if a score of 15 or below is made on Social Science section that remedial reading be required)

Teacher-made tests (Bacone College and South Oklahoma City Junior College)

Diploma Nursing Programs

11. If no, why?

- a. Programs are presented in different ways--achievement exams are disease oriented rather than integrated.
- b. Not constructed for this purpose
- c. Basic science tests have been used with some success to help junior colleges assess knowledge
- d. Depends, anything above 50% adequate knowledge

12. Schmeltzer's General Aptitude for Nursing

Dent Psychological Testing Service and Medical Exam Testing study guide for students.
(Did not recommend the latter, just mentioned)

Baccalaureate Nursing Program

11. If no, why?

- a. Not designed to.

Has confidence in

- a. as one method--supplemented with teacher-developed tests.
- b. personal experience indicates they work well with diploma students entering BS program

12. If yes, please list title and indicate program which it is used.

- a. Teacher-made theory and video tape tests (Tulsa University)
- b. GRE and Miller's Analogy--used for BS students entering MS program.