

prehensive approach toward serving all adults. Specifically, the Iowa law provides for the following:

1. The first two years of college work including pre-professional education.
2. Vocational and technical education.
3. Programs for in-service training and re-training of workers.
4. Programs for high school completion for students of post-high school age.
5. Programs for selected high school students in vocational-technical education.
6. Student personnel services.
7. Community services.
8. Vocational education for persons who have academic, socio-economic or other handicaps.
9. Training, re-training and all necessary preparation for productive employment of all citizens.
10. Vocational and technical education for persons who are not enrolled in a high school and have not completed high school.

GROWTH AND DEVELOPMENT OF IOWA HEALTH OCCUPATIONS EDUCATION

Throughout the nation there continues to be a shortage of qualified workers who can care for the sick in hospitals, nursing homes, clinics, doctors' offices and other health agencies. In recent years a restructuring of traditional health-care patterns has taken place. The greatest single change is the emerging role of health care personnel prepared in vocational-technical programs in which they achieve the necessary knowledge and skills to function as effective members of the health-care team. To date, 204 health occupations have been identified and new ones are constantly emerging.

In 1958 the Division of Vocational Education, Iowa Department of Public Instruction initiated an agreement and contracted with the University of Iowa to provide state consultant services for health occupations education in Iowa. The State consultant staff hold University of Iowa faculty appointments and compose the Program in Health Occupations Education in the University. This program is housed on campus and is promoting and implementing a strong health occupations education state-wide program.

The expansion of health occupations education in the many states has been enhanced by partial reimbursement with the George-Barden Act of 1956 and the Vocational Education Act of 1963. In addition, there are states which conduct some health occupations education programs federally reimbursed only with Manpower Development and Training Act funds. In Iowa, however, arrangements have been made with the State Employment Security Commission whereby any person qualifying for Manpower Development and Training Act funds may be admitted to a program funded under the Vocational Education Act provided he also meets the admission requirements of the program. Table I shows program growth in Iowa.

The Iowa Division of Vocational Education, like its counterparts in other states, cooperates with public educational institutions throughout the State to provide programs which prepare graduates for employment in various types of health occupations.

Presently in Iowa, 910 students are enrolled in 34 such preparatory programs of one and two years in length and 584 students have taken advantage of the supplemental programs. In the 1968-69 school year, several of these programs will increase enrollments and some will admit an additional class at mid-year. Also, during this same year 8 new preparatory programs will be in operation. Multiple 4-week pre-employment programs for nurse aides and orderlies are also offered throughout the State.

Health occupations education programs in Iowa are administered by community colleges and area vocational-technical colleges. All programs are approved by the Iowa Board for Vocational Education and those preparing practical nurses and associate degree nurses are also approved by the Iowa Board of Nursing.

While uniform standards, policies, and procedures are reflected in these programs, they have sufficient flexibility to allow tailoring to each local situation. All facets are controlled by the administering public educational institution. It employs the coordinator and instructors and is responsible for the provisions of adequate resources and facilities. Appropriate clinical facilities are made available through contractual agreements between the administrative agency and hospitals and other local health agencies.