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## Articulation: Providing a System of Upward Mobility for Allied Health Disciplines

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# Lytle et al.: Articulation: Providing a System of Upward Mobility

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## ARTICULATION: PROVIDING A SYSTEM OF UPWARD MOBILITY FOR ALLIED HEALTH DISCIPLINES

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Abstract: Successful articulation programs in health related disciplines should incorporate a willingness to communicate and cooperate inter-institutionally. A system is described which illustrates a community working together to provide opportunities for individuals looking for career mobility. While this report centers on the respiratory

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therapy profession, the system and methods used may be useful for others to follow.

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Articulation is defined by Webster's New World Dictionary (1966) as: "The action or manner of **interrelating**;" or in other terms, "a joint between two separable parts" (p. 84). This definition, while often used in anatomic terms to describe the coordinated movement of joints, applies equally to the opportunities given or available to students attempting to acquire career mobility. This process can provide new and varied opportunities for students in all fields including health related professions. A lack of career improvement mechanisms can result in a dead end for a promising career. The respiratory therapy educational programs in Central Florida have had considerable success in providing such mechanisms.

#### Historical Perspective

Problems experienced by students in the articulation process are traced to an attitude about terminal degree programs. The origin of this attitude can probably be traced to Mildred **Montag** who was partially responsible for associate degree nursing programs in community colleges. These programs were originally intended to produce graduate nurses, and were considered as terminal (cited in Miller, 1980).

#### Contemporary Trends

John **Naisbitt** (1982), in Megatrends, writes that learning is a lifetime process. The process of education for the foreseeable future may last an entire career, not atopping after the usual period of high school or college. To prevent career stagnation, artificial barriers to further education need to be removed to allow people to advance in their chosen endeavor. Articulation,

or some appropriate synonym, should be incorporated as a "buzzword" into the vocabularies of educators and institutions to reinforce its need. The concept of Hohenstein (1980), should be continually advanced, suggesting that junior colleges serve as colleges of the community and that senior institutions function as multiversities, not the university.

Today, articulation of programs rests with cooperation and interrelationships that exist within professions and programs. Success in articulation also is related to the willingness of personnel in institutions to actively recruit non-traditional students. The problems include providing access to non-traditional learners, developing flexible schedules, using role models and identifying specific groups. These should be approached in a dignified and creative manner for both student and institution. The following articulation problems have **been** identified by Robinson, Cones, and Gentsch (1980), for health related students: (a) loss of credit due to institutional **policy**, (b) certain upper division requirements (or specific numbers of upper division credits), (c) problems in prerequisite courses (often due to poor advisement and planning), (d) general misunderstandings, and (e) lack of planning and communication by various allied health institutions. Similarly, solutions to these problems have been proposed: (a) development of formal articulation agreements; (b) publication **of** materials, such as brochures, that outline articulation programs; (c) improvement in academic advisement; (d) greater commitment to articulation; (e) expansion of the credit by examination processes; (f) use of interdisciplinary courses; and (g) open discussion of curriculum and degree requirements between articulating institutions.

Development Strategies

According to **Galín** (cited in Galín, **Russel**, and Stewart, 1981), the success of articulation depends upon full participation by faculty and administrators in developing programs. Equally important is a communication network to keep involved persons informed about prerequisites and requirements. With time, leaders in educational organizations may perceive the transferring student as an integral part of the institution.

The respiratory therapy programs in Central Florida encompass three separate and distinct institutions: (a) a one year technician program at Seminole Community College, (b) a two year therapist program at **Valencia** Community College, (c) and a four year program in the Department of Cardiopulmonary Sciences at the University of Central Florida. A system of agreements, developed by using formal and informal lines of communication, provides an articulation network which works well. Students may start at any level in the network and progress through the system as their academic and professional development permits. In this configuration, students may begin their careers in respiratory therapy at the one year technician program and progress through the two year therapist program and complete the bachelors degree in respiratory therapy at the university. Students may progress to graduate level in a variety of programs offered at the university.

The process of articulation in Florida is represented in letters of agreement and state law. An articulation agreement between the Community Colleges and the State University System, which is enforced by state law, provides a system of common course numbering and a common calendar. The two community colleges involved are linked together by close communication ties and letters of agreement. **Valencia** Community College will award college credit for

courses completed at the one year vocational-technical level. Qualified students may then progress to the university level if they desire, receiving credit for completed courses. Graduates may look towards the future knowing that they will be able to respond to an ever changing world.

The importance of effective communication with developing programs such as those described cannot be over emphasized. Communication should include every level in each organization. Program directors should communicate with each other among institutions and with deans or vice presidents. Everyone should have confidence in the system. Advisory committees usually serve as adequate, appropriate **forums** for sharing problems **and** successes and for planning the future. In the experiences described in Central Florida, respiratory therapy programs at each level are linked to each other through advisory committees sharing common members including individuals from each college (faculty and administrators) and local industry.

When attempting to develop articulation programs, competency and performance criteria should be stressed. Removal of barriers to facilitate progression from one **level** to the next should be the primary goal. The advanced career level also can provide some incentive for additional education. **This** is obvious in well designed systems. The programmatic goal is to maximize use of all competencies or performance objectives as a foundation to develop upwardly mobile graduates.

#### Advantages to Articulation Programs

Well designed systems may have positive influences on enrollments. Student may be more willing to enter a program if they know that articulation is possible, a fact that should be advertised to the public. Industries may be willing to make concrete commitments knowing that educational institutions are

working with their futures in mind. Alumni may have further goals to attain.

Colleges and universities usually have a commitment to community service. Articulation programs promote community service by providing links between students, other colleges, **and** industries. People with differing educational goals and philosophies may be convinced to participate in programs if an overall benefit to the community may be visualized. Industry representatives serving as members of advisory committees seem helpful in eliminating artificial barriers.

There seems to be little to lose and much to gain in linking programs together. Recognition by the community and industry, and a source of motivated, experienced students are expected outcomes. Administration and faculty in institutions at higher levels need not worry about decreasing academic quality since students seeking further education are generally more mature and serious about their studies. Articulation between programs also provides possibilities for sharing equipment, computers, audio-visual materials, and even teaching staff.

#### The Process

From experience gained in Central Florida, the initial proposal for articulation should begin at the program director's level. In this case, all lecture, laboratory and clinical courses in each curriculum were compared. Once a thorough review had been completed, a proposal was drafted and presented to the next level of administration. Support from the administration is critical as is documented support from the advisory committees. Administrative leadership can provide needed guidance which should help establish details and solve problems. Administrator at each level should communicate with administrators on the same **level** at other institutions. The proposal may also

need to be presented to institutional curriculum committees. Support from administrators , faculty, and industries at this level of presentation is essential. When final approval is gained, the job of coordinating the system should be addressed. This is relatively simple but should involve the advisory committees ,

#### Summary

Students may be successfully articulated into advanced health related programs if leaders in the community's educational institutions will work together in a systematic fashion. Communication, understanding of perceptions and values, and a willingness to take the first step are crucial to success. The health care industry should be assertive in insisting on opportunities for qualified health care professionals.

Career mobility should be hampered only by obstacles or weaknesses within individuals, and not by conditions built into systems of higher education. The future will require society and its commerce to adjust to many changing conditions relating to recruitment, training, and retention of personnel and resources. Personnel from educational institutions and industries should work together to provide the resources necessary to power the health care systems of the future.

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