MESSAGE FROM THE PRESIDENT

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y the time you read this article, the Technologist Section will have just finished putting together a new strategic plan. The National Council, which must approve the final document, will have met with the Strategic Planning Committee and an outside facilitator to plan where the Technologist Section and the profession should be in the next three to five years. Selection of members of the Strategic Planning Committee was based on their leadership positions at the national and chapter levels of the section, and many choices resulted from the meeting with the chapter presidents at the annual meeting. Details of the new plan will be in future issues of JNMT and Uptake newsletter.

In the last strategic plan, developed in 1994, the Technologist Section wrote several vision statements and identified specific goals toward realizing the visions. Goals in the strategic plan must reflect activities that need be done at the national level to be effective. One of the vision statements for the profession was that "nuclear medicine technologists work in concert with other allied health professionals to present a unified voice." Two Technologist Section vision statements were that the section be a "catalyst in achieving cooperation among allied health professionals" and "be recognized as speaking for nuclear medicine technologists and a respected voice in medical and governmental arenas." A number of specific goals were identified that, if accomplished, would result in the visions becoming reality.

Why is it important that the Technologist Section work with other groups and be recognized as a player in the health care field? Because, as a small organization and profession, if we're not actively promoting our abilities and skills and if we're not sitting at the table when decisions are made about what goes and what stays in providing health care, somebody else will be happy to do it for us. The results will be in the best interests of those making the decisions. And that's not prudent when health care providers, government and educational systems all are making changes faster than they can be written about.

What have we accomplished in three short years? How have we made sure that nuclear medicine technology and the Technologist Section are important and integral in making decisions for allied health? First, we've been successful in receiving recognition by government agencies. In the early '90s, it is doubtful that anyone in the Bureau of Health Professions in Washington had much of an impression about nuclear medicine. But since then, we have been mentioned specifically in the report of the National Com-

mission on Allied Health, we have had several speakers from the Bureau of Health Professions attend our annual meetings and we are on a first-name basis with many of the bureau's directors.

The Health Professions Network (HPN) is an excellent example of the Technologist Section's work with other health professions, particularly in presenting a unified voice. When the health care reform movement was at its peak, government and private industry, including the PEW Commission, immediately identified that allied health practitioners were so diverse and independently organized that we were easy to divide and conquer. The Summit

on Manpower, renamed the Summit on Radiologic Technology and Sonography, was identified by the National Commission on Allied Health as an excellent model for cooperation. Building upon this concept, the Technologist Section worked with allied health associations to create a network of professional associations that allows us to work cooperatively on common goals.

Educational systems are rapidly changing in response to employers' demand for more versatile employees and to new educational technologies. The National Consortium on Health Sciences Technology Education, created about five years ago, and is running pilot projects around the country featuring tech/prep and school-to-work programs. The effort covers elementary through high school and college levels and is expected to significantly change how we educate students for health practice, including nuclear medicine technology. The Technologist Section decided to become a member of the consortium and serves on the board. As chair of the Summit on Radiologic Sciences and Sonography, Art Hall was elected treasurer of the consortium and provides a presence for the Technologist Section.

Distance education is a priority for many colleges and universities due to available technological advances. Technologists who want to further their education and increase their value in the workplace can take advantage of the Internet, e-mail, facsimile and the computer. But many questions about distance education remain unanswered, such as how to assure quality and evaluate competency. These discussions were an important part of the Health Professions Network meeting, in September, and were led by Elaine Cuklanz, executive director of the Joint Review Committee on Educational Programs in Nuclear Medicine Technology.

Several other projects, identified at the last HPN meeting, will provide national recognition to the Technologist

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Section. In addition to the education issues, the section will work with the Health Care Finance Administration on practice expenses. Obviously, in an era when the profession needs be perceived as cost effective, this project will be important to the section. We also hope to be part of an Emerging Leaders Conference, sponsored by the Bureau of Health Professions through a grant received by the HPN. This conference will educate junior leadership from various associations about how federal government works and how to effectively use government agencies to meet the needs of the profession.

How will all this time and effort in developing relation-

ships with allied health professions pay off? In the last technologist survey that you completed, you identified the widespread need to promote nuclear medicine as a provider of good, cost-effective medicine. We are paving the way by building relationships with other groups. In a short time we have successfully brought our name and what we do before those who make decisions about health care. This is a remarkable achievement for a health discipline as small as nuclear medicine technology. Our next efforts should be to pave similar roads on a local level and ensure that technologists have the skills, knowledge and connections it will take to be competitive in our own marketplace.