Accreditation of Educational Programs in Nuclear Medicine Technology

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The Joint Review Committee on Educational Programs in Nuclear Medicine Technology is the body which approves training programs in nuclear medicine technology. The Committee consists of two representatives from the SNM, SNMT, ACR, ASRT, ASCP, and ASMT. Dr. Warren Ball, who is the AMA Staff Liaison with the Committee, presented the following description of the activities and responsibilities of the Committee at the Plenary Session of the First Winter Meeting of the Technologist Section in New Orleans.

The Essentials of an Accredited Educational Program in Nuclear Medicine Technology were approved by the AMA House of Delegates in July 1969. There is a history of 10–15 years of preliminary deliberations of interested organizations and individuals which finally culminated in the adoption of this document. The following are a few of the milestones in this history of events leading to approval of the Essentials and establishment of the Joint Review Committee on Educational Programs in Nuclear Medicine Technology.

It was in 1963 that the American Registry of Radiologic Technologists proposed to the Board of Chancellors of the American College of Radiology that the AMA Council on Medical Education be requested to consider establishing minimal educational standards for a 1-year program for "radioisotope technicians". It was thought that this program would, in effect, be a specialized extension of the basic curriculum for radiologic technologists already approved by the AMA. ARRT had at that time established a certifying examination in this field. In the same year, 1963, ASMT established a Committee on Nuclear Medicine Technology to work with the ASCP on the development of Essentials and preparation of a registry examination. The Registry of Medical Technologists conducted its first examination in 1964.

At their annual meeting in October 1965, the Board of Directors of the American Society of Clinical Pathologists directed the Chairman of the Board of Schools of Medical Technology to transmit to the Council on Medical Education a proposed draft of the "Essentials for Acceptable Schools of Nuclear Medical Technology", as developed by a subcommittee of ASCP. This was probably the first draft of a document that has undergone innumerable revisions involving major modification before evolving as the document which is recognized today. I might mention that there are many who feel that there is still great need for revision and clarification of many aspects of the Essentials, and a major revision is currently under consideration.

Although the ASCP proposal was received in December 1965, it was not until April 1966 that a meeting was held with representatives of the Society of Nuclear Medicine, ASCP, and the American College of Radiology. Following this meeting, a report was made to the Council on Medical Education. The Council expressed interest and agreed to continue discussion with a view toward further development of the Essentials.

At the March 1967 meeting of the Council on Medical Education, action was taken to establish an ad hoc committee to draft Essentials. The three societies were asked to name a panel of potential members from which the Council would select the ad hoc committee. These nominations were received at the June 1967 meeting and the appointees of the ad hoc committee were named by the Chairman of the Council.

After a considerable amount of preliminary work by several individuals, the ad hoc committee had its first meeting, under the chairmanship of Dr. Earle M. Chapman of Boston, a member of the Council, on February 10, 1968 at the Palmer House in Chicago. The organizations represented at that meeting were the Society of Nuclear Medicine, the American College of Radiology, American Society of Clinical Pathologists, the American Registry of Radiologic Technologists, and the

AMA Department of Allied Medical Professions and Services.

A second meeting of the ad hoc committee was held at the Americana Hotel in New York City on May 10, 1968, and it was at this meeting that the Society of Nuclear Medical Technologists was represented for the first time. The SNMT was ultimately included as one of six participating organizations in the final draft of the Essentials, which was endorsed by the Council on Medical Education and subsequently approved by the AMA House of Delegates.

The Essentials recognize two types of educational programs in nuclear medicine technology, both at least 12 months in duration. The distinction between these two types is made in the admission requirements and the depth and scope of curriculum. The basic program, which may be offered as an integral part of a 2-year program leading to an associate degree, is designed to prepare the nuclear medicine *technician.* Applicants must have completed 4 years of high school or have passed a standard equivalency test for admission to college. Those who have successfully completed 1 year of college, including at least three credit hours in chemistry and mathematics, may qualify to enter with advanced class standing, completing only the 12-month program at the associate degree level.

The advanced program, intended to prepare the nuclear medicine *technologist,* may lead to a baccalaureate degree. This program is designed to build upon the foundation of basic knowledge and clinical skills acquired by previous qualification as a medical technologist, MT(ASCP); radiologic technologist, RT(ARRT); or registered nurse, RN. As an alternative, the individual who has earned at least 3 years (90 semester hours) of college credit from an accredited college, including credit acceptable toward a major in the biological or physical sciences, may be accepted without previous experience in the related health occupations.

Although the Essentials appear to place considerable emphasis on programs leading to either an associate or baccalaureate degree, this does not preclude the provision that those registered as MT, RT, or RN, by completing the 12-month program may qualify as a candidate for registration in nuclear medicine technology. Such programs may lead to a certificate, rather than a degree.

The Essentials, as they were adopted by the AMA House of Delegates in 1969, named the Society of Nuclear Medicine, as well as the Society of Nuclear Medical Technologists, the American College of Radiology, the American Society of Clinical Pathologists, and the American Society of Radiologic Technologists as collaborating organizations. The document specified that a Board of Schools consisting of two representatives from each organization would serve as the review body for all educational programs in nuclear medicine technology and make recommendations to the AMA Council on Medical Education concerning approval status. At an organizational meeting held late in 1969, the term "Board of Schools" was changed to Joint Review Committee on Educational Programs in Nuclear Medicine Technology. It was felt that this title was more descriptive of the functions of the newly organized review body. The organizational meeting was attended by one representative from each of the collaborating organizations. Preliminary discussion included the development of policies and procedures, preparation of application forms, and the mechanism for formal appointment of representatives of each organization.

The first official meeting of the Joint Review Committee was held in January of 1970, with subsequent meetings in September of that year and twice annually in each succeeding year. During the first 4 years of operation, the Joint Review Committee evaluated and recommended approval of 53 educational programs in nuclear medicine technology with a total student capacity of 408. Statistics for the year 1972 indicate enrollment of 219 students and 109 graduates. It is estimated that the total number of AMA accredited programs in nuclear medicine technology will be between 70 and 75 by the end of 1974, with a moderate annual increase anticipated beyond that point commensurate with manpower needs.

Current SNM representatives on the Joint Review Committee are David V. Becker and W. Newlon Tauxe. Elected officers include Oscar B. Hunter, Jr., Chairman, Nellie May Bering, Secretary-Treasurer, and W. Newlon Tauxe, Vice-Chairman.

The AMA Council on Medical Education currently collaborates with 28 professional organizations, including both SNM and SNMT in the evaluation and accreditation of 24 types of educational programs in allied health occupations varying in length from 6 months to 4 years. There are currently 14 separate and distinct review bodies, which are identified by specific roles in the evaluation of teaching programs for designated types of physician support personnel.

In order to explain further the functions and responsibilities of the Joint Review Committee on Educational Programs in Nuclear Medicine Technology and other review bodies, I have outlined below excerpts from the "Statement of Basic Principles for the Accreditation of Allied Health

Educational Programs", a document approved by the Council on Medical Education and endorsed by the Society of Nuclear Medicine and other organizations collaborating with AMA in the evaluation and accreditation of allied health educational programs.

Responsibility

Increasingly today the physician shares with other health professionals the responsibility for certain specific aspects of health care. The professional association representing these allied health specialists should assume a major share of responsibility for establishing and maintaining educational standards in their respective fields. The medical profession is aware of its great responsibility in relating to all the allied health fields which find their focus, indeed their reason for existence, in the care of the patient. Where the medical care of the patient is concerned, the physician has legal, moral, and ethical responsibility. As the major professional organization for physicians, the American Medical Association feels this responsibility keenly and believes that it must cooperate with the collaborating organizations in coordination of multiple and diverse components of the health care team through which the total care of the patient is provided. The collaborating process of promoting educational standards is an important contribution in assuring competence of the individual to serve the public good.

Objectives

A) To establish, maintain, and improve standards of quality for educational programs in the allied health professions and services.

B) To provide recognition for educational programs which meet the standards established by the appropriate accrediting agencies.

C) To encourage and assist in the development of new educational programs which meet demonstrated needs in allied health fields, and to establish, maintain, and improve standards of quality for such programs.

Role of the AMA and Collaborating Organizations

Each organization specifically concerned with accreditation for an allied health profession provides expertise in its specific area; each participates in drafting the basic requirements essential for the educational program (the "Essentials") and in preparing revisions when necessary; each provides experts to visit sponsoring institutions and to ascertain whether the educational programs meet, or preferably, exceed the "essentials"; each provides representatives to meet as a review committee to receive reports of program survey teams and to recommend action based on these reports. The American Medical Association, through its Council on Medical Education, may provide participants for survey teams; the House of Delegates of the AMA approves the original "Essentials" and proposed revisions; the Council on Medical Education provides accreditation for educational programs.

Mechanism for Review of Educational Programs

When more than one association is involved with an allied health occupation, there should be established a body which will review educational programs and make recommendations concerning them to the Council on Medical Education. This body is usually called a Joint Review Committee and its members represent the parent associations. There should be equal representation between the profession under consideration and the medical specialty groups. The basic rules governing such a body include the following:

A. Each Collaborating Organization:
   1) Designates its own representatives who meet the qualification standards established by their organization;
   2) Receives formal reports from its representatives, as well as reports of all formal actions by the chairman;
   3) Pays expenses for its representatives to attend meetings of the review committees; and
   4) Contributes financially to the budget of the review committee.

B. The Joint Review Committee:
   1) Elects its own chairman annually or biennially;
   2) Conducts its meetings under "Robert's Rules of Order" or some other similar guide to parliamentary procedure;
   3) Schedules, organizes, and directs survey teams which will visit programs;
   4) Receives and reviews formal reports signed by each team member, and indicates the action to be recommended concerning accreditation;
   5) Transmits the list of actions recommended concerning accreditation to the Advisory Committee on Education for the Allied Health Professions and Services of the AMA's Council on Medical Education; and
   6) Prepares proposals for revision of the "Essentials", when required, and submits them to the sponsoring organizations for approval. After giving its approval, the sponsoring organizations transmit the

recommendations to the AMA Council on Medical Education through its Advisory Committee on Education for the Allied Health Professions and Services. If one sponsoring organization does not approve proposed "Essentials" within one year, the proposal, together with a dissenting report, may be forwarded to the Advisory Committee on Education for the Allied Health Professions and Services for consensus.

C. The American Medical Association

1) The Panel of Consultants to the Advisory Committee on Education for the Allied Health Professions and Services consists of a representative of each collaborating organization and assists the Advisory Committee in its deliberations concerning matters of policy.
2) The Advisory Committee on Education for the Allied Health Professions and Services assists in providing systematic procedures for collaboration with other professional associations and develops recommendations for the consideration of the Council on Medical Education concerning actions taken by the review committees or boards of schools.

   Areas of specific interest to the Advisory Committee and Panel of Consultants are assigned to sub-committees dealing with Common Courses and Career Mobility, Continuing Education, Equivalency and Proficiency Examinations, Fees for Accreditation Services, Institutional Approach to Program Evaluation, Instructor Preparation, Legislation, Military Allied Medical Education, and Research.
3) The Council on Medical Education serves as the coordinating national approval agency in collaboration with other professional associations for the accreditation of educational programs.
4) The House of Delegates constitutes the mechanism for final review of the essential requirements for educational programs for the members of the health care team.