
Commentary (II)

Continuing Education and VOICE

Continuing education and VOICE. VOICE and continuing education. By now, to members of the Section, these words must sound interchangeable. In fact, they are not alike in either meaning or significance. To explain the difference and probable cause of confusion between the two, let me digress briefly.

Since World War II noncredit continuing education has been the fastest growing segment of education in the United States. Two reasons account for this growth: (1) the rapid expansion of knowledge and (2) the swift pace of advancement in technology. Today, adults in professional and technical occupations find it increasingly necessary to update, improve, and reinforce their knowledge and skills, thus the corresponding rise in continuing education programs. Continuing education is used by private and public educational institutions, professional associations, government, industry and health service agencies. In short, continuing education is designed to supplement one's formal education and subsequently raise the level of awareness and proficiency.

In 1970, in an effort to account for the human and financial resources pouring into continuing education programs, the Council on Continuing Education (a nonprofit federation of educational and training organizations and persons devoted to life-long learning) designed a system of measurement whereby the time an individual devoted to continuing education could be readily defined. The continuing education unit (CEU) was born. That was eleven years ago.

Today, people in every branch of medicine participate in some form of continuing education; estimates place the total number of participants since 1970 at nearly nine million. The obvious question of concern becomes, what does a CEU mean?

There is no intended relationship between formal credit and CEU. Credit applies specifically to diplomas and degree requirements. CEUs are not awarded for that purpose. However, individuals may use CEUs to meet requirements for:

1. Maintenance or improvement of professional competence.
2. Documentation of continuing qualifications for (and this may prove important) licensure, certification, or registration.
3. Evidence of personal and professional growth to meet changing career demands.
4. Preparation for a new career.
5. Demonstration of a conscious and persistent effort toward personal development.

There are, of course, guidelines and criteria that must be met in order to apply for CEUs and any organization that awards CEUs must adhere to specific standards before their programs can qualify; such standards include administrative responsibility for a CEU program and the maintenance of a permanent recordkeeping system. Which brings us to VOICE

VOICE stands for Verification of Involvement in Continuing Education. It is a centralized recordkeeping system maintained at the Society's National Office. Herein lies the distinction. VOICE should be thought of as the instrument that records participation in continuing education: VOICE is a recording system; continuing education constitutes the programs. This distinction is necessary to draw since so much of one's experience with continuing education may be unfavorably colored by a recordkeeping system in the throes of conversion.

It is not news to some that VOICE has had its problems. Still, it is important to judge this system in the proper perspective. VOICE has been in existence since 1976, only six years. The CEU itself is only six years older than VOICE. Between 1976 and 1981 the Technologist Section and the Society office developed and refined a system that required innumerable hours of planning and research. In one respect the Section should be commended for anticipating and implementing an innovative system. This system provides members with a transcript documenting their involvement in continuing education and also contains the mechanism by which continuing education sponsors may seek course approval. In this sense, although VOICE has performed imperfectly on occasion, it does contain the elements necessary to function properly.

VOICE was initially designed to provide evidence of participation in continuing education and was established in response to what was perceived to be a future that included licensure for nuclear medicine technologists. That is, it was thought that the federal government would require licensing of nuclear medicine technologists and that participation in continuing education activities might be required to maintain a license to practice. The feeling was that a recordkeeping system sponsored by a professional organization had a certain validity and, therefore, was more likely to be recognized and accepted by licensing agencies. Consequently, the VOICE system was developed with an eye towards possible future licensure requirements. Beyond this, VOICE has no advantages over any other centralized recordkeeping system.

Some of the confusion surrounding VOICE can be traced directly to its paperwork, and more specifically, to the Program Approval Request Form. This is the general information packet given to sponsors of continuing education programs. Sponsors must complete this form in order to attain approval of their programs; participants must register their name and VOICE number upon completing a program in order to receive CEUs and be credited on the VOICE system. It is here that the administrative responsibility and the permanent recordkeeping system collide.

As a member, I, too, have attempted to use the VOICE system and not always successfully. I can empathize with your feelings of frustration and discouragement. However, three events within the past year indicate that the VOICE system deserves a chance to become all that it was intended to be—an easily accessed, relatively error-free, centralized recordkeeping system.

First, a full-time staff person has been hired to coordinate the educational activities of the Technologist Section. Richard Chamberlain is now serving in this capacity and is overseeing VOICE in the National Office. Both Richard and the Continuing Education Committee are committed to streamlining the mechanics of the VOICE system, especially the forms associated with VOICE approval and the participant registration processes. Secondly, the transition from Standard Data Corp. (our previous computer company) to an in-house computer in the National Office is nearing completion. All additions, deletions, and corrections of VOICE entries, as well as generation of VOICE transcripts, will soon be accomplished in the National Office with staff members in full control.

Thirdly, the Randolph bill was passed by both Houses of Congress and signed into law by the President in August. This bill directs the Department of Health and Human Services to develop minimum standards for the certification of nuclear medicine technologists. From these minimum standards, individual states might establish their own licensing criteria. Licensure or mandatory certification now appears to be a reality; whether evidence of participation in continuing education will be a requirement for licensure is not known at this time. Should it become a reality, the Section is prepared to supply that evidence.

The value of continuing education is an individual perception and cannot be undetermined by those who choose to devalue the meaning for themselves. The value of continuing education is priceless; it is not equal to the number of credits one accumulates. Continuing education is the framework within which professionals may assess their educational strengths and weaknesses. Without such a tool we would be lost.

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