Becoming a professional: When good is not good enough

Elwin R. Tilson, R.T.(R)(M)(QM)(CT), FAEIRS
elwin.tilson@gmail.com

RIS as Professionals

- Practitioners in the radiologic and imaging sciences have always seen themselves as professionals and have acted accordingly.
- However, according to the legal and societal definitions, the field of radiologic and imaging sciences is only in the process of meeting the legal definition of a profession.

We are growing as a profession

- The number and quality of people running for AEIRS office impressive.
  - Hard to decide who to vote for in last election.
- The number of technologists in the profession who have a baccalaureate is nearing a critical mass.
- Number of educators with doctoral degree encouraging.
History and Landscape of Radiologic and Imaging Sciences

History

• In October 1920, Jerman and 13 technician acquaintances met in Chicago to establish the first national technician society, the American Association of Radiological Technicians.
• The American Registry of Radiologic Technologists founded in 1922.
  – No formal education required to sit for test.
• RSNA recommended one year of education in 1933.

More History

• In 1940s and early 1950s, only requirement were two years of experience and a radiologist’s reference to be Registry eligible.
• In 1952, the ASXT made its first foray into establishing formal educational standards for the profession with one year of ‘training’ required and two years preferred.
• Also, in 1952, a model standardized curriculum with minimum instructional times developed.
• Educational standards lengthened to two years education in 1960.
Yet More History

- Puerto Rico began licensing radiologic technologists in 1963.
- In 1966, the Registry restricted eligibility to graduates of accredited programs.
- In 1968, ASRT asked the federal government to establish standards regulating the licensure of radiologic technologists.
- The JRCERT was created in 1969.
- In 1969, accredited programs were required to be 24 months in length.
- In 1975, the ASRT designed a voluntary continuing education program.

Bring us up to today

- In 1979, the NLRB ruled that technologists were not professionals.
  - RTs did not meet all requirement to practice independently, have specialized knowledge and standards of practice, and restricted entrance into their profession through education, certification and licensure.
- In 1995, the American Registry of Radiologic Technologists (ARRT) made continuing education mandatory as a condition for the annual renewal of technologists’ certifications.
- An associate degree required for eligibility in 2015.

So, Are We Professionals?

Legally: NO!
Societally: Maybe but mostly no.
Legal Definitions of “Professional”

According to US Code of Federal Regulations
• “…professional means occupations requiring either college graduation or experience of such kind and amount as to provide a background comparable to college education.” 41 CFR 61-250.2

US Bureau of Labor Statistics (BLS) Profession Definition
• “This Major Occupation Group (MOG) includes occupations concerned with the study, application, and/or administration … laws, principles, practices or theories. … Most MOG occupations require educational preparation.”
Comparative Educational Requirements

BSc Degree Minimum to Practice In Most Developed Countries
- Most European countries including Great Britain
- South Africa
- New Zealand
- Australia
- Japan
- Singapore
- Several provinces in Eastern China
- Saudi Arabia
- Kuwait
- Plus many more

US BLS List of Health Professions
- All require a minimum of BS degree:
  - Registered Nurses
  - Pharmacists
  - Dietitians
  - Respiratory Therapists
  - Occupational Therapists
  - Physical Therapists
  - Speech Therapists
  - Physicians’ Assistants
US BLS Health Technicians

- 2 year or less entry requirements in US
  - Clinical Laboratory Technicians
  - Dental Hygienists
  - Health Record Technicians
  - Radiologic Technicians
  - Licensed Practical Nurses

So, we don’t meet the educational criteria and are seen as ‘Technicians’

US BLS Technical Occupation definition

- These occupations are involved in carrying out technical and technological functions in health, engineering, science, and other disciplines.
- May perform research, development, testing and related activities.
- May operate technical equipment and systems.
US BLS Radiologic Technicians

• Operate radiological equipment to produce radiographs (X-rays) of body for diagnostic purposes as directed by radiologist.
• Also provide radiological therapy and prepare and administer radiopharmaceuticals in diagnostic and therapeutic studies.
• Include CAT scanner operator, ultrasound technologist, isotope technician, radiation therapy technician, etc.

Societal Expectations of a Profession

Major Milestones of a Profession

• Establishment of a university school
• Establishment of a local association
• Establishment of a national code of professional ethics
• Establishment of state licensing laws

Some Common Expectations

• Society expects that the profession will ensure the competence of each [practitioner] by setting and maintaining standards for education, training, and practice—and by disciplining incompetent, unethical, or unprofessional conduct.
• [Practitioners] are expected to demonstrate morality and integrity in their practice, and in their day-to-day lives.
• Promotion of the public good.
• Transparency.
• Accountability.

More Expectations

• [Practitioners] expect to be granted sufficient autonomy to act in the best interests of their patients.
• Because society appears to accept that licensure leads to higher standards, and because of the long education and training required, [medical professions] expects that the monopoly will be maintained.
• Society has decided that it is in its own best interests to allow the profession to set and maintain standards and carry out disciplinary procedures.

Licensure

• 42 states license radiographers
• 38 states license radiation therapists
• 27 states license nuclear medicine technologists
• 31 states license radiologists assistants
• But many of these laws are under attack!

So, we meet only some of society’s expectation of what a profession is.

So, We Really Have a Problem
What to do?

As Individual Professionals
• Modeling behavior for students.
  – Memberships, involvement, public scholarly activities. Involve students when possible.
• Encourage students to think long term to get BS and Master’s degree routinely.
  – It’s necessary to overcome ‘it’s a waste of time to have a degree to be a …’ forces in clinical sites
• Encourage new faculty to have scholarly activity roadmap and theme and to earn doctoral degrees.
• Encourage students to see they can become the professionals that society expects.
What the Profession Might Do

- Think nationally but act locally.
- Communities of Practice through AEIRS, ASRT, SNM, SDMS, ASTRO, etc.
  - Collaboration is the key.
- Encourage more incubators like Midwestern State in TX, Northwestern State in LA, Armstrong State in GA, and Thomas Jefferson in PA.
- Develop mechanism for the majority of students to earn a bachelor's degree.
- Expand the number of master's degrees in the profession.
- Implement doctoral degrees in the profession.
- Implement more mechanism to develop and disseminate our own body of knowledge.

Its Not All Bad

- I have seen major changes in the profession over time.
- We are so much better off now than previously.
- I am optimistic about where we are going
  - We just need to agree to work together to make it happen.