NMT Program Directors Survey

Methodology
An eight-question telephone survey of directors of nuclear medicine technology baccalaureate programs was undertaken to determine the interest in developing education programs for advanced practice in nuclear medicine. Contact information was retrieved from the Joint Review Committee of Education Programs in Nuclear Medicine Technology (JRCNMT), the accrediting body for nuclear medicine technology programs. Thirty-three programs in the US currently offer a bachelor’s degree option, and all program directors were contacted over a two week period in January, 2008.

Results
Summary: thirty-two program directors responded to the telephone survey for a response rate of 97%. Among the respondents, 96.9% (n=31) were aware of efforts on the part of the SNMTS (formerly the Society of Nuclear medicine technologist Section) to establish a career track for advanced practice in nuclear medicine, and 96.8% (n=30) who were aware of these efforts also knew these programs were to be offered at the master’s degree level.

When asked whether they or their institution has expressed an interest in starting an advanced practice program at some point in the future, 71% (n=22) responded in the affirmative. Of the 22 who are considering development of such a program, 63.6% (n=14) thought they would be prepared to start in one to three years. Comments made by those who expected to wait four or more years to start a program indicated that their institutions were at a very preliminary discussion stage or wished to see other institutions establish programs first. Of those who expressed interest in developing a program, 59.1% (n=13) have given consideration to collaboration with other institutions in order to conserve limited resources.

The two most frequently cited reasons for starting an advanced practice master’s program were to fulfill a need in the community (90.9%) and the general advantages of offering graduate education (90.9%), particularly in regard to the potential for more scholarly activity and grant funding. Respondents also expressed the value of this type of career track in developing potential faculty members who need a master’s degree to teach at the undergraduate level (86.4%).

When asked about potential barriers or obstacles to developing an advanced practice master’s degree, the most commonly cited reason (68.2%) was the lack of qualified faculty. Other issues perceived as major obstacles were the fact the profession is not yet established (59.1%), the lack of funding by the institution (50%), and the possible difficulty in convincing physician stakeholders (54.5%). However, over half of those who were concerned about physician stakeholder buy-in also indicated that many physicians were undecided or did not know enough about the new profession to express an opinion or that they knew some physicians who were very supportive and others who were not.
Of those who indicated they were not planning to develop a program for advanced practice, nearly all of them cited reasons that were not among the options listed on the survey. Generally speaking, non-interest was due to reasons external to the career track and included such issues as unwillingness of the institution to sponsor small programs and no authority to offer graduate education.

The following represents detailed results for each item on the survey.

1. Are you aware of the SNMTS efforts to begin a new career track for advanced practice in nuclear medicine?
   - 96.9% Yes (n=31)
   - 3.1% No (n=1)

2. If yes, are you aware that education programs to prepare the advanced practitioner are to be offered at the master’s degree level?
   - 96.8% Yes (n=30)
   - 3.2% No (n=1)

3. Are you or your institution interested in starting an advanced practice program at some point in the future?
   - 71% Yes (n=22)
   - 29% No (skip to question #8 if the respondent answers no) (n=9)

4. If yes, how soon do you think you would be ready to start such a program?
   - 18.2% One year (n=4)
   - 45.4% Two to three years (n=10)
   - 27.3% Four to five years (n=6)
   - 9.1% More than five years (n=2)

5. If yes, have you considered collaborating with other institutions to offer this program?
   - 59.1% Yes (n=13)
   - 40.9% No (n=9)

6. What do you consider as the primary advantages to offering an advanced practice program? (check all that apply) (22 respondents)
   - 90.9% Fulfilling a need in the nuclear medicine community (n=20)
   - 90.9% Advantages of offering graduate education, e.g., potential for more scholarly activity or grant funding (n=20)
   - 86.4% Desire to take a leadership role in education in nuclear medicine (n=19)
   - 50.0% Prestige among peer institutions (n=11)
   - 13.6% Job security for the PD and/or the existing nuclear medicine technology program (n=3)
   - 86.4% Other: faculty development (n=19)
7. What do you consider as major obstacles to offering a master’s program for advanced practitioners? (check all that apply) (22 respondents)

- Lack of funding from my institution (n=11) (50.0%)
- Difficulty in obtaining approval by the institution’s board of directors (n=7) (31.8%)
- Difficulty in obtaining approval by the state’s board that regulates new programs in higher education (n=5) (22.7%)
- Difficulty in convincing physician stakeholders (n=5 who said yes and n=7 who said maybe or "half and half") (54.5%)
- Lack of qualified faculty (n=1) (68.2%)
- The profession is not yet established (n=13) (59.1%)

- Other: ________________________________

8. If not interested in offering an advanced practice program, why not? (check all that apply)

- Difficulty in obtaining approval by the institution’s board of directors (1)
- Difficulty in obtaining approval by the state’s board that regulates new programs in higher education (1)
- Difficulty in convincing physician stakeholders (1)
- Lack of qualified faculty (1)
- Employment opportunities too limited (1)
- The profession is not yet established (1)
- Not a need for this career track (1)
- Other: (1) two said “not on our agenda”; (2) three said college and/or program is too small and already has to fight for funding; couldn’t possibly develop another small program; (3) sponsoring institution is in financial trouble at present; (4) too much for an already overloaded faculty, which was a common complaint; (5) do not offer graduate degrees at this school; (6) planning to develop a different type of master’s program for nuclear medicine (a non-clinical track); (7) state regulations are so restrictive that technologists will not be able to train for the new tasks (1)

Institutions that indicated an interest in starting a program within three years:

- University of Cincinnati
- University of Massachusetts
- University of Alabama at Birmingham
- Harvard/Beth Israel Deaconess
- Massachusetts College of Pharmacy and Health Science
- University of Missouri at Columbia
- Salem State College (Massachusetts)
- Robert Morris University (Pittsburgh)
- Baptist College of Health Sciences (Memphis)
- Northwestern
- Wheeling Jesuit University (W. Virginia)
- University of Findlay (Ohio)
- St. Louis University
- Thomas Jefferson University