American Academy of Health Physics
American Board of Health Physics

CHP Corner

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President's Report

Kenneth R. Kase, CHP
President, AAHP

At the Winter meeting of the AAHP Executive Committee in Scottsdale, 8 January 1996, I was installed as the President of the Academy. It is a great honor for me to have been elected to serve as your President this year. It promises to be a defining year for the AAHP as we develop the first Strategic Plan for the Academy.

The members of the Executive Committee and committee chairs who were in Scottsdale spent five hours with John Billett as our facilitator to begin the planning process. We were successful in agreeing upon a mission statement, a set of goals, and a list of short-term objectives. The process will be completed at our meeting in Seattle with the development of the Strategic Plan. I am very pleased with the progress made in Scottsdale and am excited about producing a plan that will provide direction for the AAHP into the future.

The second major event for the Executive Committee in 1996 is the acceptance of the revised AAHP Bylaws, including Standards of Professional Responsibility for CHPs. This revision will be presented to the Academy membership for approval along with the ballot for Academy officers this spring. In response to the following letter, please note that the Guidelines for implementing the Standards require only approval of the AAHP Executive Committee. I believe that rejecting the Bylaws is not the appropriate way to effect change in process guidelines. There are many reasons why the AAHP needs these new Bylaws. Arguments for revising the Guidelines should be brought to the appropriate committee.

I will have a more detailed report about Academy activities in the June *CHP News*. In the meantime, I invite your advice, comments, concerns, and ideas about the AAHP and its activities. You can reach me on e-mail at krk@slac.stanford.edu or by FAX at 415-926-3030.

LETTERS

An Opposing View: New Ethics Standards Not Tough Enough

1996 Board of Directors
Health Physics Society–Power Reactor Section

AAHP members will soon be asked to approve the new "Standards of Professional Responsibility for Certified Health Physicists," as part of the Bylaws revision to be balloted by mail this spring. Although the Standards themselves are adequate, the implementing rules called "Guidelines for Accepting Complaint" are fundamentally flawed. [See October 1996 *CHP News*.]

The problem with these "Guidelines" is the special conditions required before a complaint against a CHP for misconduct during legal proceedings would be accepted. As an explanation the AAHP Professional Standards and Ethics Committee wrote: "Our Committee believed that in legal proceedings or professional meetings where the subject of a complaint could be cross-examined or challenged by competent expertise, no harm to a client or the public is likely."

In effect, the Guidelines condone CHP misconduct during legal proceedings. It is our opinion that harm can certainly be done in the context of a legal proceeding and the standards of conduct and implementing procedures should be universal.

We respectfully request the Committee to draft new Guidelines that do not provide special conditions such as "three or more" similar violations in the context of legal proceedings before a complaint of misconduct is accepted.

We urge Academy members to reject the proposed "Guidelines for Accepting Complaint." If you believe as we do that it is our professional responsibility to reject CHP misconduct during legal proceedings, vote NO on the mail-in ballot for the new Bylaws/Standards of Professional Responsibility for CHPs and comment that a YES vote on the Standards of Professional Responsibility for CHPs would require a change to the Guidelines.

Question: Inconsistencies in Part II Exam Grading?

Gary L. Lautenschlager, CHP

I can appreciate the difficulty and enormous effort it must take to grade the ABHP exams, and all of the Part I and Part II Panel CHPs are to be commended. I am concerned, however, about possible perceptions of inconsistency in the

ABHP exam grading process from year to year. A large number of candidates did not pass Part II of the 1995 ABHP Certification Exam, as reported in the January 1995 "CHP Corner." It was stated that the Part II Exam was thoroughly reviewed and no deficiencies in the exam process could be found.

As explained in the February 1994 "CHP Corner," a Historical Adjustment Factor (HAF) was applied to the 1993 Part II Exam results when those scores were found to be unusually low and the passing rate for the Part I Exam was consistent with previous years. At that time the ABHP elected to assume that the Part II candidates were as invariant as the Part I candidates in consistency of performance and quality of the candidates, and the adjustment factor was applied to raise Part II scores consistent with this assumption.

Why did the ABHP not elect to make the same assumption and a similar adjustment for the 1995 Part II results?

Response: Different Circumstances Required Different Approaches

E. Scott Medling, CHP
1995 Chair, ABHP
Thomas E. Buhl, CHP
1996 Chair, ABHP

We appreciate Gary Lautenschlager's letter regarding the low passing rate for Part II of the 1995 ABHP Certification Examination. We share his concern and hope that this passing rate does not discourage health physicists from pursuing ABHP Certification in the future.

Gary asked why the Board did not use a Historical Adjustment Factor (HAF) for the 1995 examination as it had for the 1993 exam. The Board's review of the 1995 examination found no deficiency in the examination, in contrast to 1993 where the Board found that the exam was too long. The identified deficiency (excessive exam length) was the basis for the Board's 1993 adjustment. The absence of a similar deficiency in the 1995 exam precluded use of an HAF.

The ABHP evaluated the results of the 1995 examination extensively before accepting the examination scores. Because the Part II passing rate was unusually low, a great effort was made to identify a deficiency in the examination itself. Issues considered by the Board included the following:

Time Needed to Complete the Examination

Usually there are several indicators that insufficient time was available for an exam, including 1) notes from candidates in their exam answers that they had run out of time, 2) an unusually large number of candidates still present when the examination ends, and 3) an unusual number of comments from the candidates after the examination. In contrast to the 1993 Part II exam, the 1995 exam process did not evidence these indicators.

Nevertheless, the Board re-reviewed the Panel and Board estimate of the "time-to-take" the exam and confirmed that it was an appropriate length.

Performance on Individual Questions

The Board compared the average scores of the six core questions in the 1995 examination with the average scores of the six core questions in the 1994 exam. Four of the lowest five average scores occurred for questions from the 1995 exam. This suggested that candidates had difficulty answering, not one, but several questions from the 1995 exam; i.e., if there had been a problem with the exam it would have been with the entire examination. However, questions on which a large number of candidates had done poorly were answered almost perfectly by several candidates. One part of a question had been found by the Panel Chair to contain an incorrect term, and the Board had approved awarding full credit to all candidates who attempted to answer that part. The Board again reviewed the entire set of questions and determined that the level of knowledge needed to correctly answer the questions was appropriate for the Certification Examination.

Performance on Part I of the Exam

The Board found the Part II passing rate for those candidates who successfully passed Part I the same day to be appreciably higher than the overall passing rate for Part II. This indicated that candidates demonstrating their preparation for the exam by having passed Part I performed better on Part II. This is again in contrast to the 1993 exam where the raw scores of successful Part I candidates showed only a slightly higher passing rate for Part II.

Increased Applicants for Certification

Many more people took the Part II exam in 1995 than in previous years. It is possible that the low percentage passing may reflect increased inducements to take the exam (e.g., expanded job opportunities for CHPs and new ABHP B.S. degree requirements for Certification) before some candidates were adequately prepared.

We hope that this response clarifies the extent of the ABHP review of the 1995 Part II Exam and the basis for its decision not to apply an HAF. While we believe the best preparation is actually working several years previous exams, we welcome suggestions as to how the ABHP and AAHP might better inform candidates of other types of preparation and information needed to successfully pass the ABHP Certification Exam. ■