History of the Medical Library Association’s credentialing program

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Since the Medical Library Association (MLA) adopted the Code for the Training and Certification of Medical Librarians in 1949, MLA members have reviewed and revised the program regularly. This paper traces the history of MLA’s professional recognition program to illustrate how the program has changed over time and to identify the issues that have surrounded it. These issues include the value of the program to individual members, cost to MLA, appropriate entry requirements, certification examinations, and recertification requirements. The development and operation of MLA’s current credentialing program, the Academy of Health Information Professionals, is described in detail.

INTRODUCTION

Although several papers have documented one aspect or another of the Medical Library Association (MLA) professional recognition program, there has not been a comprehensive discussion of the program since Louise Darling’s article in 1973 [1]. That article provided an excellent overview of certification issues and referenced articles by Mildred Jordan [2], Mary Louise Marshall [3], and Miriam Libby [4] that described the early history of the program. This paper traces the history of the MLA professional recognition program to illustrate how the program has changed over time and to identify the issues that have surrounded it.

SUMMARY OF MLA’S CREDENTIALING PROGRAMS

The original Code for the Training and Certification of Medical Librarians was adopted by MLA after considerable debate, on April 13, 1949, with a vote of seventy-one in favor and twenty-two against [5]. Major revisions to the 1949 code were made in 1964 and 1976, and an entirely new code was approved in 1974 to be effective in 1978. That code was revised in 1981. In 1989, the Academy of Health Information Professionals was created by membership approval of a new code. Table 1 presents summary information on each of the major code revisions [6–12]. An examination of the data in Table 1 reveals that educational preparation always has been integral to entry requirements for certification. However, views on two issues, entry by examination and recertification requirements, have varied considerably over the history of the program. These two issues and the various revisions of the earlier programs will be discussed before moving on to a description of MLA’s current credentialing program, the Academy of Health Information Professionals.

THE CERTIFICATION EXAMINATION

Although the 1949 code permitted certification by examination, it was clearly not the primary route to certification. In the 1964 revision of the code, however, examination became a standard alternate route for achieving Grade I certification. Responsibility for administering the examination, which could be taken in lieu of completing an MLA-approved course or an internship, was assigned to the Subcommittee on Curriculum [13]. The subcommittee’s report for 1964/65 indicated that the subcommittee had prepared an examination concerning the content of typical MLA-approved courses, and that the examination had been given to five applicants. However, no other details were provided about the preparation of the examination [14]. In 1966/67 the subcommittee reported that the qualifying examination had been revised but included no details concerning the changes [15]. The first indication of the source of the questions was given in the 1970/71 report, in which the subcommittee expressed its appreciation of the Medical Examination Publishing Company for allowing the use of questions from the Medical Examination Review Book,
This who taught nate route to certification; it was now required of all the ord numbers under the old code
the In not served as chair of the April and the entire for applicants services, mittees to
As the in noted Schmidt 1974, 1976). The Ad Hoc Steering Committee for Development of Certification Examination, created in 1975/76, was charged with guiding and developing two examinations for each of the three parts, so that the same exam would not be given two years in succession. As an initial step in development of the examination, that committee used three regional committees to analyze tasks in health sciences libraries [17]. By 1976/77, the committee had developed a consolidated list of functions and subfunctions, revised that list based on input from library school instructors who taught medical librarianship, identified competencies to be tested in the three sections of the examination, and scheduled item writing. It was projected that the first examination would be given in April 1978 [18].

While the steering committee was struggling to develop the new examination for the 1974/78 code, health science librarians were being certified in record numbers under the old code (1949, rev. 1964, 1974, 1976). Dean Schmidt analyzed the certification records for the period from 1949 to August 1977 and found that 3,216 persons had been certified during the entire period; 1,749 of these were certified during the period from July 1974 to August 1977. Therefore, 54.4% of the total persons ever certified were certified in the final three years of the 1949 code as revised. Schmidt noted that, although it was not his purpose to determine why the majority of people certified in the program’s twenty-nine-year history were certified during its final three years, it appeared that many wished to avoid the new examination, and he wondered if the number of persons seeking certification would continue to be so high [19].

The first competency-based examination was given in April 1978, followed by examinations in November 1978 and November 1979. The Certification Examination Review Committee received an analysis of the results, discussed methods for setting a minimum passing level, established operating procedures, developed an examination schedule, and wrote new examination items [20]. Committee reports continued to indicate that the examination was reviewed and revised and that the committee’s work required large commitments of time by its members. In addition, data were provided on the number of persons taking the examination and on the number passing. In 1979, approximately 66% passed the exam [21]; in 1980, approximately 41% passed [22]; in 1981, 42% passed [23]; in 1982, 67% passed the exam [24].

A new examination proposed but not implemented
A Task Force for Certification and Registration was formed in 1984/85 to develop a new, comprehensive professional recognition program. The program developed by the task force and presented to the MLA Board of Directors included an examination, and the board appointed an editorial panel to develop that examination [25]. The program prospectus required an individual applying for certification and registration to pass two qualifying examinations—a general examination and a specialized examination in hospital librarianship, public services, or technical services [26].

Reports of the certification committee and the Editorial Panel for the Certification and Registration Examination described a number of measures undertaken to develop a valid examination. These measures included working with the Continuing Education (CE) Committee to tie examination questions more closely to MLA’s CE courses, providing guidelines for development of questions, soliciting questions from the general membership [27], developing models for creating test items, and publicizing and holding workshops in item-writing techniques [28–30]. In spite of the efforts to publicize the opportunity to write questions for the certification examination and the item-writing workshops, the number of items generated as a result of the workshops was not as great as expected [31].

The editorial panel and the certification committee jointly issued Quality in Context in 1987. Written by Eileen Fitzsimmons and Kent Mayfield of MLA headquarters, this publication was designed to help those planning to take the test understand both the knowledge areas covered and the testing techniques used [32]. After reviewing the impact of MLA’s strategic plan at the annual meeting in Portland, Oregon, the certification committee and the editorial panel had recommended, and the board had approved, a one-year delay in the implementation of the new program [33]. The delay would provide time needed to assess the entire credentialing program better in relation to the strategic plan [34]. Ultimately, the examination was removed from the new program, proposed as the Academy of Health Information Professionals.
RECERTIFICATION

Under the 1949 and the 1964 codes, certification was permanent. By recommending that the new code require recertification, the Ad Hoc Committee to Develop a New Code (1973/74) proposed a radical departure from these earlier codes. The ad hoc committee’s report noted that if certification was meant to indicate something about the holder’s capabilities, then it should not be permanent because of the need to keep current. Recertification every five years was recommended. In each five-year period, an individual would submit evidence of having completed a “minimum of two quarters or one semester of academic work, equivalent class time spent in continuing education courses, special seminars or institutes, publications, letter from supervisor or hospital administrator attesting to professional growth.” Other activities listed as appropriate for recertification credit included staff manual development, participation in building programs, teaching, holding an office, or being a committee chair [35]. Although the ad hoc committee’s report did not provide details about the credit earned for various activities, another committee document apparently contained the points to be given for the various activities.

Recertification under the 1978 code

The 1977/78 report of the Recertification Committee defined the recertification requirements as 3.5 CE units (thirty-five contact hours) of class attendance during a five-year period. The first period for recertification would be from January 1, 1978 through December 31, 1982, and would apply to all persons certified as of January 1, 1978. An individual could apply for recertification at any time after January 1, 1980, and early applications would not shorten the period for which the applicant was certified or recertified. The report also noted that applicants were responsible for maintaining their own documentation for recertification.

Two types of courses would enable an individual to be granted automatic approval for recertification: any course taken for credit at the university or college level in a subject area relevant to health sciences librarianship, and any MLA CE course. Also recommended for automatic approval were community college courses; extension courses offered by colleges, universities, and community colleges; CE courses offered by MLA regional or subject groups; NLM training courses for MEDLINE; NMAC courses; and courses offered by national professional library and information science and related associations. Courses offered by state, regional, and local associations would have to be approved by the Recertification Committee before they could be used for recertification credit.

The Recertification Committee had not yet determined the amount of credit, if any, to be awarded for courses given by vendors or Regional Medical Libraries, telelectures, correspondence courses, or publication of books, syllabi, or articles. It was noted that credit would be allowed for teaching MLA CE courses; however, professional teachers could not receive credit for such activity. No recertification credit was to be given for auditing courses or short lectures. Persons who did not obtain recertification before the end of the certification period would have to take the examination to regain their certification [36].

The 1974/78 code, revised in 1981, expanded the definition of CE activities to include not only the traditional types of CE but also “individual accomplishments in areas contributing to the effectiveness of the health sciences librarian” [37].

During the period from 1979 to 1981, the Recertification Committee developed procedures for recertification and published a brochure that described the recertification requirements, including courses and types of activities approved for recertification [38]. The committee also approved applications for recertification credit for courses offered by individual institutions, worked to develop guidelines for approval of courses not automatically approved, and attempted to explain the timing and method of applying for recertification, even developing a checklist of questions and answers on recertification [39].

In 1981/82, the committee added the following categories of activities to the automatically approved list: courses offered by subsets of other national associations, except those offered by geographic subsets; academic courses audited at accredited institutions of higher education; and workshops or extension courses for which CE units were granted at any postsecondary institution. The committee also considered, and denied, a request that persons who accumulated CE units beyond the required thirty-five be allowed to apply them toward satisfaction of the requirement in the next recertification period [40].

Recertification in the Academy of Health Information Professionals

The March 1988 “Final Report of the Credentialing Committee in Response to the Strategic Plan” stated the following renewal requirement: “Candidates may renew their membership at this level or at the level of choice (except at the Associate level), every five (5) years by fulfilling the requirements for the appropriate category” [41]. The 1989 booklet stated that “membership may be maintained at the highest level ever achieved in the Academy without a break in membership by completing the requirements for the member-level (50 hours/points)” [42]. This modifi-
cation made it much easier for one to maintain membership at one of the higher levels and remains the same, except for minor changes in wording, in the 1994 booklet [43].

THE CODE IN REVISION

Although the 1949 code remained in force without major revisions for fifteen years, MLA, after 1964, began to review and revise it, with barely enough time for the ink to dry on one version before another revision was begun. In 1966/67, the Committee on Certification began a revision of the code at the request of the board [44]. The work done by the committee was then handed over to an ad hoc committee, which was charged by the board with developing a new certification code [45]. While a new code was being developed, the existing (1964) code was being revised. A copy of the code in the 1976/77 MLA directory shows the date of issue as 1949, with revisions in 1964, 1973, 1975, and 1976 [46].

A new code: the 1974 code

Meanwhile, an ad hoc committee appointed by the board in 1969 to develop a new code was at work [47]. The Committee on Certification presented a list of recommendations to the MLA president in 1969/70, but its annual report does not contain these recommendations. There is no further mention of them or of any activities of the 1969 ad hoc committee until 1973. In that year, the proceedings of the annual meeting contained a report indicating that a draft of a new certification code had been submitted to the board at its midwinter meeting, and that, after considerable discussion, the board tabled it [48]. Louise Darling reported that the recommendations of that ad hoc committee were tabled because implementation would have been too costly [49].

However, work to develop a new code continued under a “new” Ad Hoc Committee to Develop a New Certification Code, appointed by the MLA Board in 1972. It reported that the recommendations of the previous ad hoc committee had been reviewed, and that hearings would be held at the MLA annual meeting to provide the membership with an opportunity for input. The committee also planned to mail a survey with the August issue of the MLA News. Louise Darling expected that the final report would be ready for the 1974 annual meeting. The 1973 report of the ad hoc committee proposed four levels of certification: Level 1, health sciences library technician; Level 2, health sciences library associate; Level 3, health sciences librarian; Level 4, senior health sciences librarian. Darling’s report indicated that those currently seeking certification would use the existing (1974/76) code [50].

The survey mailed with the MLA News was accompanied by a letter indicating the committee’s desire to know the membership’s wishes with regard to certification. Excerpts from the existing code, including the sections “Purpose of Certification” and “Benefits of Certification,” were included along with the survey [51]. The survey was divided into five parts: value of certification, kinds and levels of certification, criteria for certification at the professional level, criteria for certification at the technician level, and examinations [52].

The report of the Committee on Curriculum, which appeared in the same issue of the Bulletin as the Ad Hoc Committee’s report, records concern that the code needed revision and that the revised code should set a “standard for attainment,” as well as being acceptable to the board and to the MLA membership [53]. The new Code for the Certification of Health Sciences Librarians was adopted by the membership in September 1974, to be effective on January 1, 1978 [54].

Revision of the 1974/78 code

In 1981, the code approved in 1974 (for implementation in 1978) was revised. The proposed revision was published in the MLA News in March 1981, so that members could be prepared for a full discussion at the annual meeting. Other than minor changes in wording, the 1981 revision removed all sections dealing with the certification of health sciences library technicians. Once again, the code was strictly for librarians [55]. A degree from an American Library Association (ALA) accredited program was still required; however, the new code reflected a November 1979 board decision to approve a sixth-year certificate from an ALA-approved school as an acceptable substitute for making an applicant eligible to take the certification examination [56]. A statement was added to the effect that those certified prior to January 1, 1978 were certified automatically under the 1974/1981 code and were subject to its recertification requirements [57].

During the period from 1978 to 1981, the Certification Eligibility Committee expressed its concerns about certain aspects of the code. That committee’s 1982/83 report indicated that its members believed the code still had “some weak areas which needed clarification” and recommended that MLA establish another committee to review and revise the code. The report listed the major concerns: (1) the effect of the requirement for two years’ experience as a health sciences librarian on those who did not work in a health sciences library but worked with health sciences practitioners or students, (2) the difficulty of
interpreting unusual backgrounds because the examples in the code were too general, and (3) the need for an alternative route to certification for those with degrees from non-ALA programs [58].

**Ad Hoc Committee on Professional Development**

Although the code was modified many times between 1949 and the 1980s, the process that began in November 1982, when the board formed the *Ad Hoc Committee on Professional Development*, probably had more impact on MLA’s credentialing program than all the others combined. The charge to the *ad hoc* committee was to develop “a conceptual integrated framework for the MLA’s professional development program to include the continuing education, certification, recertification activities of the association.” The work of this committee touched many areas of the MLA but its recommendations concerning professional development are particularly germane to the development of the current Academy of Health Information Professionals program. Its report to the board in March 1984, which is contained in the annual report for 1983/84, gives a full description of its activities [59]. The board responded formally to the ad hoc committee’s report by adopting a statement on May 24, 1984 that synthesized the concepts found in the committee’s report [60].

The work of the *ad hoc* committee, its report, and the board’s response were discussed at Business Session II at the Eighty-Fourth Annual Meeting of the Medical Library Association in Denver. The speakers noted that the committee’s work began with the existing certification program and built on it, with the goal of providing a professional recognition program that would meet the needs of MLA’s diverse membership. They reported the committee’s belief that the certification and recertification programs should “recognize achievement at a variety of levels through several different methods” [61].

**THE ACADEMY OF HEALTH INFORMATION PROFESSIONALS**

The Academy of Health Information Professionals is MLA’s current certification code. While the academy is often viewed as a significant departure from the earlier programs, and although it has some features that are quite different from those of the earlier certification programs, the influence of these programs is evident. Because the development of the current program has not been documented in a single publication, this paper provides a detailed description of its development and evolution.

In response to the *Report of the Ad Hoc Committee on Professional Development*, a Task Force on Certification and Registration was formed in 1984/85. Working papers supplied to the task force in January 1985 by Kent Mayfield, MLA director of education, contain documents that had been used by the *ad hoc* committee. A program prospectus, based on an earlier prospectus developed by the *ad hoc* committee in 1983, described a possible approach to certification and registration, implementation procedures, fiscal projections, and a timetable for implementation [62].

The Task Force on Certification and Registration’s program for certification was presented to, and endorsed by, the board at the preconference board meeting in 1985. The summary of the board’s actions describes the program as a “significantly improved certification and registration program, forming the cornerstone of an expanded system of career recognition for all segments of the membership” [63]. A brief outline of the new program was distributed at the meeting [64], and a summary of the program was published in the November/December, 1985 MLA News [65].

Although the program as described in the prospectus was not fully implemented, it significantly influenced the current academy program. In two areas, the program prospectus differed materially from the current program. The prospectus would have required individuals applying for certification and registration to submit statements from three professional references, and to pass two qualifying examinations—a general examination and a specialized examination in hospital librarianship, public services, or technical services [66].

As noted earlier in this paper, problems were encountered in developing an examination, and as a result, the board accepted a recommendation made in August 1987 that the credentialing program be modified. The Credentialing Committee developed and submitted to the board a revised program prospectus at the board’s midwinter meeting. The revised program was accepted in principle by the board, and the committee expanded on the plan and submitted, in March, 1988, a final report to the board for its approval. A full copy of the committee’s proposal is included in the 1987/88 annual report [67]. An article in the April 1988 issue of the MLA News [68] provided an overview, but, based on comments at the annual meeting, one could conclude that it failed to make adequately clear that the education requirement for credentialing had been changed significantly.

The Credentialing Committee’s report was presented and debated at the annual meeting in 1988. The description of the discussion as “spirited” in the proceedings might be considered an understatement by many of those present. Speakers were especially concerned with the provision that allowed those with non-ALA degrees to be certified. Other concerns in-
cluded the limitation of membership to individual, not institutional, members of MLA; the types of activities eligible for academy credit; and the lack of opportunity for member input before the board approved the program for implementation in June 1988. The discussion led to a motion at the business meeting that the "new credentialing program, as presented by the Credentialing Committee, be delayed to allow adequate input from the membership, . . . and that the amended plan be submitted to the membership for vote by ballot." The motion passed 267 to 201 [69].

Subsequently, the Credentialing Committee requested comments from the membership and indicated that the program would be re-examined, taking into account members' comments [70]. In addition, the Board of Directors sent a letter to MLA members in June 1988, asking for input and enclosing a full copy of the March 1988 report [71]. The Credentialing Committee developed and submitted, in August 1988, a revised program based on member input [72]. The revised program was mailed with the September MLA News, and a vote was scheduled for October 1988 [73]. The revised program, which addressed many of the concerns expressed at the annual meeting, was approved by the membership. Both individual and institutional members of MLA could apply for academy membership. Academy members would be allowed to renew at their current level of membership by satisfying the requirements for the Member level instead of the higher requirements. Persons without degrees from ALA-accredited programs were excluded, although a special enrollment period for persons with degrees from programs not accredited by ALA was established. The list of activities eligible for academy credit had been revised as well [74].

Implementation of the program in 1989
To prepare for implementation of the new credentialing program, the Credentialing Committee held two information sessions at the annual meeting in Boston, and, during the summer of 1989, mailed the information booklet and application packet to all MLA members who were already certified. A letter was also sent to MLA members who were not certified, inviting them to consider the academy [75]. In addition, Wenda Webster Fisher presented the first academy certificate to Eloise Foster, president of MLA, at the annual meeting. Foster responded, "This recognition has very special meaning to me since I have maintained my certification with pride since entering the profession" [76].

The Professional Recognition Review Panel (PRRP) report for 1989/90 stated that not only were "grandfathered" members applying for upgrades, but inquiries were also being received from persons who had not been credentialled under other programs, persons with degrees from programs not accredited by ALA, and new graduates. The panel chair noted that the new program appeared to be "appealing to a much wider range of the MLA membership" [77].

During June 1990, the president and the executive director of MLA sent a letter to members of the academy informing them that the window of opportunity for upgrading their membership had been extended from June 30, 1990 to September 30, 1990 [78]. The extension was granted as a result of conversations during consultation sessions at MLA, where it became obvious that many "grandfathered" members either thought their window of opportunity for upgrading was September 30, 1990, or did not realize that only by upgrading during the window of opportunity could they count activities completed prior to July 1, 1989 [79].

The portfolio
A central feature of membership in the academy is the submission of a portfolio. The initial portion of the portfolio documents the applicant's education and experience and provides personal information. The remainder of the portfolio, for persons applying at the Member or higher level, is documentation of professional accomplishments. In this section of the portfolio the applicant lists, by category, the various activities approved for academy credits and attaches documents substantiating the credit claimed. The process of portfolio review, while regularly modified in one way or another, is essentially that described in a 1991 article in the MLA News [80]. Headquarters staff review the portfolio to ensure that it has been signed and that payment has been enclosed. They also check for obviously missing items such as required documentation of education and experience. After the review at headquarters, a copy of the portfolio is mailed to a primary reviewer, who reviews the entire portfolio to ensure that the applicant meets the qualifications for the level sought, and that the necessary documentation is attached. If documentation is missing or if the reviewer has other questions, then he or she contacts the applicant and requests the needed items or explanation. To ensure accuracy, a second reviewer also reviews the portfolio. It then goes to the PRRP chair, who is responsible for the final review. Finally, the names of those approved for academy membership and the level for which they qualify are sent to the board for approval [81]. Two changes were made to expedite the processing of portfolios. In their post-conference meeting in May 1992, the Board of Directors decided to eliminate motions to the board requesting approval of candidates for academy membership. Instead, the chair of the PRRP would send periodic updates of academy membership to the board [82]. In 1995, the
PRRP and the Credentialing Committee changed the review cycle from quarterly to monthly [83].

Comparison of the proposed (1988) program, final (1989) program, and revised (1994) program

The Final Report of the Credentialing Committee in Response to the Strategic Plan: A Credentialing Program of Career Recognition to the Medical Library Association Board of Directors was influenced significantly by the program prospectus, which had been used by the Task Force on Certification and Registration and is the basis for the current Academy of Health Information Professionals. The following comparison describes the program as it was proposed in the March 1988 Final Report; the program as it was finally approved in October 1988 for implementation in July 1989; and, where applicable, the current (July 1, 1994 revision) program.

1. Purpose

The stated purpose of the proposed program was to “offer a career-long professional recognition program.” It was designed to reward “persons for exemplary professional performance and contributions to the advancement of the Association and the profession from entry level through way-points along a professional career path” [84]. The purpose of the program has remained essentially the same, although the wording has been modified.

2. MLA membership requirement

The March 1988 report specified that membership in the academy was open only to regular members of MLA [85]. This limitation was removed in the August, 1988 proposal, and the 1989 Information for Applicants booklet indicates that membership is open to both regular and institutional members of MLA [86]. As a result of a board decision in September 1993, MLA membership is no longer a requirement for academy membership. Individuals may join MLA or they may pay a differential membership fee set for non-MLA members [87].

3. Levels of academy membership

The program, as originally proposed, provided for five levels of membership: Associate, Member, Senior Member, Distinguished Member, Fellow. It also provided that an emeritus member of MLA could apply for Emeritus status in the academy and would be granted that status at the current level of recognition [88].

The Fellow level was never established as a level in the academy. In May 1990, however, the board decided that anyone granted status as an MLA Fellow would automatically would become a Distinguished Member of the academy [89]. The Emeritus level of membership was not established. Currently, persons who want to maintain their academy membership after retirement must continue to meet renewal requirements [90].

4. Educational requirements

The educational requirements proposed in the March 1988 report were radically different from those of the past. “A post-baccalaureate degree in a relevant discipline (e.g., M.L.S., non-ALA M.L.S., M.A. in computer science) is required.” This change would have allowed certification for those holding non-ALA degrees as well as membership for those holding degrees in other disciplines but working in health sciences libraries [91].

As noted earlier, the membership voiced considerable opposition to this change, and as a result, the provision was modified in the proposal placed before the membership in October 1988. The revision, while establishing a degree from an accredited program as an eligibility requirement, provided for a limited enrollment period for persons holding degrees from non-ALA-accredited programs [92]. A calendar established by the Credentialing Committee specified that persons with non-ALA accredited master’s degrees could apply for academy membership from July 1, 1989 through September 30, 1990 [93].

The 1989 revision and the 1994 revision both specify that the educational requirement may be met by a master’s degree from a program accredited by ALA or a master’s degree from any program accredited by the Council on Post-Secondary Accreditation [94–95]. However, a change in the 1994 version indicated that persons with an accredited degree other than a master’s in library science must show evidence of knowledge in all seven essential areas of knowledge described in the information booklet. This requirement holds regardless of the number of years of experience an applicant has [96].

5. Membership levels

Requirements for the various membership levels are outlined in Table 1. They illustrate the concept underpinning the entire academy program: the desirability of providing diverse pathways to credentialing. The applicant, depending on the stage of his or her career, is able to design a pathway that complements personal career goals. Although there are some restrictions and requirements concerning the types of activities that may be claimed and the maximum amount of credit that may be earned for certain types of activities, applicants still have considerable latitude in designing their own programs to fit their own personal and professional goals.

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The Associate and Provisional Associate membership levels, as originally provided for in the 1989 booklet, were problematic. Many potential Associate and Provisional Associate members found it extremely difficult to complete the course work required to attain the essential areas of knowledge. Courses in these areas were not widely available and, as time passed, some of MLA’s relevant courses were withdrawn or discontinued. As a result of the continuing problems with this level of membership, the Credentialing Committee began, as early as 1991, discussing a revision of the academy program with respect to the Provisional level of membership [97, 98]. During 1991/92, the Credentialing Committee refined specifications for a new Provisional level membership that would replace the old Associate and Provisional Associate levels effective July 1, 1994 [99, 100]. This change was approved by the MLA Board at its post-conference meeting in 1992 [101].

6. Types of activities eligible for academy credit

The March 1988 report did not list the types of activities that could be claimed for academy credit, but a memorandum from Kent Mayfield to the Board of Directors in March 1989 provides descriptions of the activities eligible for credit. This memorandum, ignoring minor wording changes, appears to be Appendix B of the 1989 Information for Applicants booklet. The memo also notes that no action by the board is expected, a pattern that has continued as the Credentialing Committee, in consultation with the PRRP, has interpreted and modified the types of activities eligible for credit and the amount of credit that may be earned [102].

The PRRP, in consultation with the Credentialing Committee, has considered any activity submitted by an applicant. The amount of credit (if any) to be awarded has been determined in recent years by consultation among the chairs and chairs-designate of credentialing and PRRP, MLA’s director of professional development, and the board liaisons to these committees. Detailed policy summaries are maintained and distributed for use by the various groups and committees working with the academy so that decisions can be made in a consistent manner [103].

All three academy documents require applicants to document the activities claimed for credit. The type of documentation required for each type of activity was described in the 1989 booklet and again in the 1994 booklet [104-106].

7. Administration

The March 1988 report indicated that the Credentialing Committee would be responsible for reviewing and recommending guidelines governing MLA’s program of professional development and charged the PRRP with administering the program. Close working relationships were required among headquarters staff, the Credentialing Committee, and the PRRP, with the chair-designate of the panel serving ex-officio on the Credentialing Committee [107]. These groups continue to have these responsibilities and work together closely.

The March 1988 report, as well as the 1989 and 1994 Information for Applicants booklets, contain descriptions of the application process as well as forms and supporting documents that must be submitted [108–110]. The details of these documents will not be discussed here, but the Credentialing Committee has revised forms and developed checklists throughout the academy’s history to assist in the application process.

8. Admission to the academy

The March 1988 report, as well as the program as implemented, provided that all persons already certified would enter the academy automatically at the Member level [111]. Persons who had been “grandfathered” into the academy had the option of upgrading their membership to a higher level for a reduced fee if they applied before July 1, 1990. Persons who upgraded during this special period could count activities completed from July 1, 1984 through June 30, 1989. Persons who did not upgrade their membership during the initial window of opportunity could do so later, but they would be allowed to submit only those activities completed on or after July 1, 1989 [112].

9. The first six years

The Credentialing Committee and PRRP, in cooperation with MLA’s Professional Development Department, are responsible for reviewing and revising the policies and procedures necessary for operation of the academy. As noted above, these three groups work together closely, although each has its own areas of responsibility.

In addition to the changes and modifications already discussed, during the period from 1989/90 to 1994/95 the Credentialing Committee considered a number of issues: marketing the academy through the use of a logo; developing ongoing liaisons with MLA chapters; promoting the use of the academy on business cards, correspondence, and other documents; contacting employers to make them aware of the academy; and developing and implementing a mentor program. The committee also made presentations at chapter meetings, published articles about the academy and the credentialing process in the MLA News, reviewed and modified the point structure, revised the Information for Applicants booklet, and re-
Table 1
Summary of MLA credentialing program requirements

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<tr>
<th>Code</th>
<th>Minimum requirement for entry</th>
<th>Levels</th>
<th>Recertification</th>
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<tbody>
<tr>
<td>1949</td>
<td>a. provision for automatic certification for those who already had five years' experience on date code adopted or for those with less than five years on date of adoption automatic certification when they gained five years' experience</td>
<td>Three levels</td>
<td>certification permanent; no recertification requirement</td>
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<td></td>
<td>b. completion of college and library school training with approved course of instruction in medical librarianship</td>
<td>Grade 1 college and library school with course work in medical librarianship</td>
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<td></td>
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<td>Grade 2 in addition to above, supervised internship of at least six months in approved medical library</td>
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<td>Grade 3 graduate work in library science and in medical and related subject fields leading to advanced degree; or completion of a two-year course in library science, medical librarianship, and medical subject work leading to an advanced degree</td>
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<td>1964 revision</td>
<td>B.S. and graduation from an ALA-accredited fifth-year library school plus completion of MLA-approved course in medical librarianship or passing grade on examination covering content of such a course, or completion of MLA-approved medical library internship</td>
<td>Three levels</td>
<td>certification permanent; no recertification requirement</td>
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<td>Grade I see minimum requirement description</td>
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<td>Grade II see minimum requirements plus successful completion of MLA-approved internship or earned master's degree in discipline applicable to life sciences librarianship, librarianship, or documentation</td>
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<td>Grade III B.S., graduation from ALA-accredited program plus earned doctoral degree in a discipline applicable to librarianship, health sciences librarianship, or to documentation and five years' experience in a medical library of recognized standing</td>
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<td>1973, 1975, 1976 revision</td>
<td>B.S. and graduation from an ALA-accredited fifth-year library school plus completion of MLA-approved course in medical librarianship or passing grade on examination covering content of such a course, or completion of MLA-approved medical library internship</td>
<td>one level</td>
<td>certification permanent; no recertification requirement</td>
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<td>1974 effective 1978</td>
<td>a. Health Sciences Librarian: degree from ALA-accredited program, and a passing grade on certification examination, and two years of post-degree experience in a health sciences library within the past ten years or the equivalent</td>
<td>Two levels: Health Sciences Librarian and Health Sciences Technician — see minimum requirements</td>
<td>a. required every five years</td>
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<td>b. Health Sciences Library Technician: A.A. degree or equivalent of two full years of college level work, and passing grade on examination for technicians, and two years of experience in a health sciences library within the past ten years</td>
<td>Note: Health Science Library Technician Level never implemented.</td>
<td>b. achieved by completion of continuing education courses or by passing the examination again</td>
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<td>1981 revision of 1974/78 code</td>
<td>a. degree from ALA-accredited program, and a passing grade on certification examination, and two years of post-degree experience in a health sciences library within the past ten years or the equivalent</td>
<td>a. Health Sciences Librarian</td>
<td>required every five years</td>
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<td>b. Provisional</td>
<td>b. Provisional</td>
<td>achieved by completion of continuing education courses or by passing the examination again</td>
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<td>Academy of Health Information Professionals (July, 1989)</td>
<td>provision that all persons already certified &quot;grandfathered&quot; into Academy at the Member level degree from ALA-accredited program or an accredited post-baccalaureate degree in a relevant profession or academic discipline, plus MLA membership (membership requirement dropped in 1993) special &quot;window of opportunity&quot; for those</td>
<td>Five levels</td>
<td>no recertification at Provisional Associate and Associate levels</td>
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<td>Provisional Associate: accredited degree (see minimum requirements) plus evidence of knowledge in seven of ten &quot;core areas,&quot; plus at least two years', but not more than five years, experience in health information science</td>
<td>recertification required every five years; to maintain current level, must document fifty hours of professional activity completed since the beginning of the current certification period</td>
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<td>Associate: accredited degree (see minimum requirements) plus evidence of knowledge</td>
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sponded to Platform for Change. A chapter credentialing liaison program was piloted in 1992/93 and implemented in 1993/94. Chapter credentialing liaisons receive all Credentialing Committee mailings and are invited to the committee meeting held at the MLA annual meeting. [113-116] In 1991, upon authorization by the board, the case-by-case formation of an Appeals Panel was begun [117].

During the period from 1990/91 through 1991/94, the PRRP reported on the difficulties presented by the Associate/Provisional Associate applications, held consultation sessions to assist members with portfolio construction, processed portfolios, trained new members of the panel, and requested the appointment of additional members in 1994/95 to assist in the review of the large number of portfolios from members grandfathered into the academy whose renewals were due before June 30, 1995 [118-121].

**Review and revisions continue**

In one respect, the academy is no different from the various certification programs that preceded it. The program has been under review and revision to one degree or another since its implementation. The major change from the Associate/Provisional Associate membership to a Provisional membership has already been described, as have the revisions of the approved activities and point structure, and the removal of the MLA membership requirement.

Changes have also been made in the educational requirements for academy membership. At its meeting in San Francisco in 1991, the MLA Board of Directors charged the Credentialing Committee with reviewing the academic requirements for membership [122]. After a review, the committee sent a motion to the board requesting a modification of the
educational requirement to define more clearly the acceptable degrees, and to include all post-baccalaureate degree programs accredited by the Council on Post-Secondary Accreditation. In addition, the committee recommended that candidates from accredited degree programs other than that of the master's in library science (MLS) be required to show evidence of achievement of essential knowledge in the core areas, regardless of years of experience. This change became effective July 1, 1992 [123]. At its meeting in May 1994, the Credentialing Committee ruled that anyone holding a non-ALA accredited MLS who also holds a sixth-year certificate or doctoral degree from a school that offers an ALA-accredited MLS is eligible for academy membership [124]. In addition to the substantive changes, minor changes have been made in the forms required for renewal, with the goal of simplifying the renewal process.

Although review and revision have been ongoing during the period from 1989 through 1995 period, the board appointed a Task Force to Review the Academy of Health Information Professionals in April 1995. The task force was charged with conducting a review of the stature of the academy with MLA members and the profession, the purpose of the academy, and its financial basis. The task force was also charged with establishing a comprehensive review process and presenting recommendations emerging from its review to the MLA Board by the time of the preconference board meeting in 1996 [125].

CONCLUSION

A few issues have been debated throughout the period between 1947 and 1995. These issues include the correlation between certification or credentialing and increased status, prestige, and economic benefit; the existence of certification or credentialing standards that seem to favor those in one type of practice setting over those in another; the cost of the program to MLA; the definition of full-time work in calculating experience to satisfy credentialing or certification requirements; the appropriate number of credentialing levels; the requirements for each level; and the minimum educational requirements for certification or credentialing.

In addressing the function of the academy, Fenske has listed a number of other questions relevant to MLA's certification program. "Is it an honor? Is it to exert quality control over the entrants to our profession? If so, are we aiming to communicate potential competency to employers or to actually certify competency? Does the academy have a professional growth function? Does it serve to demonstrate a person's commitment to health sciences-librarianship?" [126].

Thus, it appears that the continuing debate over MLA's credentialing program is related to the diverse objectives it might accomplish as well as the variety of attitudes members have about certification in general. Some members are very committed to the whole idea, because they see credentialing or certification as a way to raise the status of the whole profession, perhaps leading to economic benefits for its practitioners. Others endorse the idea because they see it as a way to encourage the personal and professional growth of individuals, regardless of other benefits that may accrue as a result of certification.

On the other hand, there are those who seriously question the value of any such program. They note that no code can reflect all the diverse kinds of knowledge and expertise required for the effective practice of health sciences librarianship in the many types of settings in which librarians work. Critics doubt that the requirements used in MLA's credentialing program are recognized universally and, therefore, believe that these standards are unlikely to result in any economic or status-related benefit for members. There are also those who question specific aspects of the credentialing program, seeing one or another provision as so easy to accomplish as to be meaningless, or another provision as too difficult for most and thus elitist. As a result, the program, while retaining many of the same features throughout its history, has been under revision on an almost constant basis.

As MLA nears the fiftieth anniversary of its certification efforts, it appears unlikely that any credentialing program would be endorsed enthusiastically by all the association's members. Indeed, perhaps the strongest testimony to the value of the certification and credentialing program is not how many members have been credentialled nor even how many agree with the program's current provisions. Rather, the vitality of the program lies in the constant discussion and revision process that has led members to focus on and respond to changes in the environment, the profession, and the association. The academy and its predecessors have survived not because they have been perfect, not because there is any proof of a correlation between certification or credentialing and economic benefit, but because they have continued to provide an elusive and enticing, albeit sometimes controversial, vision of what is expected of a true professional.

REFERENCES


Bull Med Libr Assoc 84(3) July 1996
44. Darling, op. cit., 382.
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49. DARLING, op. cit., 382.
51. MEDICAL LIBRARY ASSOCIATION. AD HOC COMMITTEE TO DEVELOP A NEW CERTIFICATION CODE. Letter. [No date.]
52. MEDICAL LIBRARY ASSOCIATION. AD HOC COMMITTEE TO DEVELOP A NEW CERTIFICATION CODE. Questionnaire on MLA Certification. August, 1973.
57. MEDICAL LIBRARY ASSOCIATION. AD HOC COMMITTEE TO EXAMINE THE CERTIFICATION AND RECERTIFICATION PROCESS, op. cit.
62. MAYFIELD, op. cit.
66. MAYFIELD, op. cit., 2.
71. MEDICAL LIBRARY ASSOCIATION. BOARD OF DIRECTORS. Letter to MLA members, June 14, 1988.
82. MEDICAL LIBRARY ASSOCIATION BOARD OF DIRECTORS. Minutes. May 22, 1992. [Photocopy.]
83. MEDICAL LIBRARY ASSOCIATION. CREDENTIALING COMMITTEE. Minutes. May 6, 1995:4. [Photocopy.]
84. MEDICAL LIBRARY ASSOCIATION. CREDENTIALING COMMITTEE. Final report, op. cit., 77.
85. Ibid.
88. MEDICAL LIBRARY ASSOCIATION. CREDENTIALING COMMITTEE. Final report op. cit., 79.
90. MEDICAL LIBRARY ASSOCIATION. PROFESSIONAL RECOGNITION REVIEW PANEL. Summary of policy decisions, op. cit., 1.
92. MEDICAL LIBRARY ASSOCIATION. CREDENTIALING COMMITTEE. Revision of a credentialing program of career recognition, op. cit., 8.
93. MEDICAL LIBRARY ASSOCIATION. CREDENTIALING COMMITTEE. Calendar statements from the minutes of the February meeting, February 24, 1989. [Photocopy.]
96. Ibid.
97. WALKER, ME. Associate member category revision. July 31, 1991. [Photocopy.]
100. MEDICAL LIBRARY ASSOCIATION. CREDENTIALING COMMITTEE. Minutes. May, 1992. [Photocopy.]
102. MAYFIELD MK. Memorandum to the Board on professional accomplishments and continuing education activities accepted by the Academy of Health Information Professionals. March 15, 1989. [Photocopy.]
103. MEDICAL LIBRARY ASSOCIATION. PROFESSIONAL RECOGNITION REVIEW PANEL. Procedures. [Photocopy.]
104. MEDICAL LIBRARY ASSOCIATION. CREDENTIALING COMMITTEE. Final report, op. cit., 87.
107. MEDICAL LIBRARY ASSOCIATION. CREDENTIALING COMMITTEE. Final report, op. cit., 90.
111. MEDICAL LIBRARY ASSOCIATION. CREDENTIALING COMMITTEE. Final report, op. cit., 91.
126. FENSKE R. Memorandum to Marlene Englander, Chair, MLA Credentialing Committee. March 30, 1992.

Received October 1995; accepted January 1996