

ACCREDITATION CRITERIA AS A ROAD MAP:
DESIGNING EDUCATION THAT MATTERS

ECF#11 – THE KING’S FUND
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Disclosure

I am a salaried, full-time employee of the ACCME.
I have no relevant financial relationships with an ACCME-
defined commercial interest.



What words come to mind when
you think of CME?



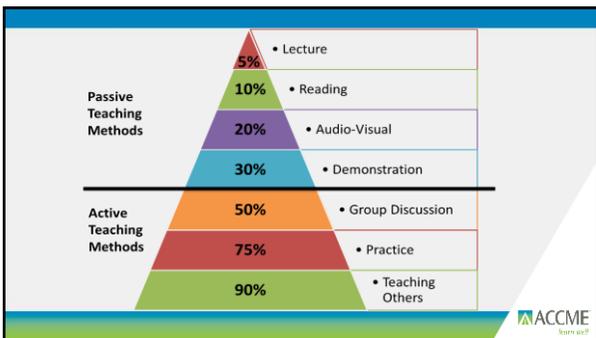
Evolving Continuing Education Environment

1. Continuing education is a professional responsibility
2. Learning can be fulfilling, can bring people together, and can effectively improve and change performance
3. Practice environments and burdens on clinicians have changed dramatically; learning environments have not
4. Most clinicians can and need to improve, but many clinicians have poor self-awareness
5. To be effective, learning needs to be increasingly individualized, include periodic comparative performance, facilitate team- and group-learning, and allow data to be aggregated and flow; technology can help.



Characteristics of Effective Education





Pedagogical innovation

- Learning plans
- Transforming teaching
 - Evolving didactics
 - Effective participations
- Collaborative support strategies
 - Online groups
 - Team-based education
 - Quality improvement CPD



Learning Plans

- Make them part of annual (self-) appraisal
 - “what skill do I plan to develop this year?”
 - “How do I plan to build that skill?”
- Support for
 - Leadership
 - Physicians
 - Teams



Evolving didactics

Organization

- Work with a curriculum
- Make it social
- Use it for updates/data sharing
- Invite attendees to bring case vignettes
- Replace post-tests with reflection exercises
- f/u with learning objectives

Speaker

- Change title to be about a problem
- Introduce evolving case as basis for the presentation
- Limit speaking time (more time for Q&A)

Learners

- decide on best next steps periodically
- share what they plan to do differently



Making Clinicians' Participation Effective

Actively Participating

- Apply what they're learning to active or past cases
- Play 'what if's?' in their minds or together
- Ask questions
- Complete evaluations

Ask them to reflect

- How am I doing?
- What key principles did I learn?
- What changes will I make?
- How will I ensure I retain what I learned?



Small Cooperative Groups Online

- Learning is active, and skills developed through interaction with the environment and others (social learning)
- Expected skillsets
- Team player
- Good communication
- Ability to work virtually

- Synchronous or asynchronous
- Parallel vs. associative vs. cooperative
- When effective
 - Creates comparison and reflection
 - Shared achievement
 - Relationship development



Team-based Education

- Interdisciplinary
- Interprofessional
- Engaging public and patients
- Engaging students

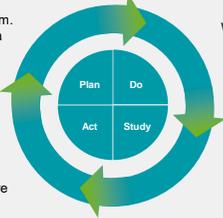


Quality improvement CPD

- Locally designed and delivered = local impact
- Collaborative with C-suite
- Incorporates health and practice data
- External collaborations



Improvement Science



We're aware of a problem. We have come up with a possible solution...

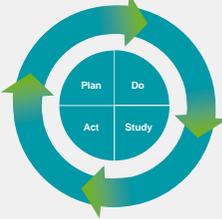
We've put our plan into action...

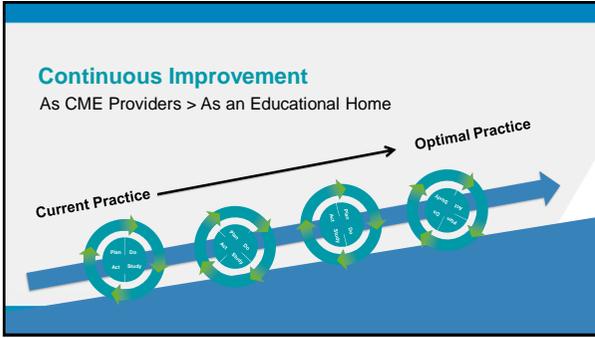
Did our plan work in addressing the problem?

We're applying what we've learned, and we're starting again...



Continuous improvement of your **learners** and their **patients**...





Accreditation Criteria as a Road Map

C1	Mission
C2-C6	Educational Planning
C7-C10	Ensuring Independence
C11-C13	Organizational Reflection & Improvement
C16-C22	Option A: Engagement with the Environment
C23-C38	Option B: Menu of Criteria for Accreditation with Commendation

ACCME logo

Criterion 1
CME Mission

What do you want to achieve—in terms of learner's improvement **and/or** improving care—as a result of your CME program?

How will you know if you've achieved your goals?

ACCME logo

The block includes a circular PDCA cycle diagram with 'Plan', 'Do', 'Act', and 'Study' stages.

Criteria 2, 3, 5, 6
Educational Planning

How do you plan educational activities that **address practice-based problems** by facilitating **change/improvement**?



WHAT IS THE PRACTICE-BASED PROBLEM THAT WE WANT TO ADDRESS (AND HOW ARE OUR LEARNERS INVOLVED?)

- **Criterion 2**
The provider incorporates into CME activities the educational needs (knowledge, competence, or performance) that underlie the professional practice gaps of their own learners.



WHY DOES THE PROBLEM EXIST? WHAT DO WE WANT TO CHANGE?

- **Criterion 2**
The provider incorporates into CME activities the educational needs (knowledge, competence, or performance) that underlie the professional practice gaps of their own learners.
- **Criterion 3**
The provider generates activities/educational interventions that are designed to change competence, performance, or patient outcomes as described in its mission statement.



HOW WILL WE FACILITATE THAT CHANGE?

- **Criterion 5**
 The provider chooses educational formats for activities/interventions that are appropriate for the setting, objectives, and desired results of the activity.
- **Criterion 6**
 The provider develops activities/educational interventions in the context of desirable physician attributes (e.g., IOM competencies, ACGME Competencies).



Criteria 7-10
Independence from Commercial Interests

ACCMCE's Standards for Commercial Support:
 Standards to Ensure Independence in CME ActivitiesSM
 (SCS)



- No commercial influence
- Financial relationships and Conflict of Interest (COI)
- Management of commercial support
- Separating education and promotion
- Content validity and bias
- Transparency and disclosure



ENSURING INDEPENDENCE

The Undesirable Outcome

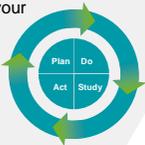
Commercial influence will result in:

- overuse
- misuse
- underuse
- use not appropriate to evidence

...of commercial products or services used on/for patients.

Criteria 11-13: Organizational Self-Assessment & Improvement

- Do your CME activities produce change in your learners and/or have an impact on patient care?
- Are you meeting your mission?
- What can you do to improve your CME program to better meet your mission?



WERE WE EFFECTIVE IN PRODUCING CHANGE?

- **Criterion 11**
The provider analyzes changes in learners (competence, performance, or patient outcomes) achieved as a result of the overall program's activities/educational interventions.



Accreditation Criteria as a Road Map

1. What is the practice-based problem we want to address? (and how are my learners involved?)
2. Why does the problem exist?
3. What do we want to change?
4. How will we facilitate that change?
5. Were we effective in producing change?
6. Is the problem solved? If not, start again.



CASE STUDY

You are the CME Planning Committee

At your table...

1. What is the practice-based problem we want to address? (and how are my learners involved?)
2. Why does the problem exist?
3. What do we want to change?
4. How will we facilitate that change?
5. How will we know if we were effective in producing change?
6. How will we know if the problem is solved?



Report out from your tables...

1. What is the practice-based problem we want to address? (and how are my learners involved?)
2. Why does the problem exist?
3. What do we want to change?
4. How will we facilitate that change?
5. How will we know if we were effective in producing change?
6. How will we know if the problem is solved?



IN OUR REPORT OUT TOMORROW...

- How do we approach planning CME activities?
- What questions have we identified?
- What new strategies could we implement?

THANK YOU!