The President’s Perspective
By David Wiljer, PhD, University of Toronto
President, Society for Academic Continuing Medical Education

Dear Colleagues,

I hope you all had a fantastic holiday break and are now well into the swing of the New Year. The anxiety of Groundhog Day has passed, although now in Canada we have Lucy the LobSTAR predicting the coming of Spring in Eastern Canada. The groundhogs all said that Spring was coming soon, but Lucy, a six-pound, 25-year-old lobster from Nova Scotia says, “not so fast” (yes, apparently lobsters can see their shadows—such is the state of predictive analytics among humans). I guess things can change, even if at unpredictable speeds.

Speaking of change, this is my last Intercom as President of SACME. Two years go by very fast. The question is, what is different now than two years ago? In my family, we are avid campers. We like to go camping a few times every year and even though my kids are adults now, we still have the family summer camping trip where we take the kids and their friends to a beautiful Northern Canadian campground, most often Killbear Provincial Park (there could be some bears there). There is nothing better than being with family, seeing the sunset over the rocks and water in beautiful northern Ontario, Canada. There are few rules on the trip, but one is sacred: Leave the camp site better than you found it. We are temporary visitors who get to experience an amazing, beautiful place and so, it is the least we can do. Don’t just clean up the fire pit and remove your garbage, but do something to contribute to the beauty of the site or get the site ready for the next person, so that they can leave it better. This has become a mantra of my role as a leader. We are all visitors at the places where we work – our time is important, but nonetheless temporary – it may be a long time, but that time will come to an end. So what can you do? Work every day to leave the place a bit better, a bit tidier for the next people. I hope that is what we have done as leaders of SACME, left it a bit better than we found it.

There are so many things to celebrate that we have accomplished over the last few years. We have strengthened our committees, including a refresh of the Scholarship Committee and the addition of the Technology-Enhanced CPD Committee. Our Communications Committee is strong with many great publications and the refresh of CE News and Intercom. The Strategic Affairs Committee is guiding us into the future, we are refreshing the Finance Committee, we are attracting new members in creative ways, etc. We are

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delivering strong programming through the annual meetings, virtual workshops, and Virtual Journal Club. We empowered the EDIA Task Force to ensure that we live up to our promise of being equitable and inclusive. We developed the CE Educator’s Toolkit with ACCME. We have seen the SACME Academy of Fellows grow and contribute to the organization through several initiatives including mentorship and faculty development. We have strong leadership on our Board of Directors and, most importantly, our membership continues to be strong, active and engaged, as we can see through our active list-serv. And so much more to be hopeful about. The camp site is looking pretty darn good!

There is so much to look forward to in the coming months. We are very excited about hosting the Annual Meeting in San Diego, March 10-13, 2024. We hope you have registered and, if not, it is not too late. And, if you cannot get away, that is okay, please join us virtually. Dr. Sophie Soklaridis is our Barbara Barnes Keynote Speaker. Dr. Graham McMahon is going to show us how to change our world, one CME activity at a time. Dr. Muhammad Mamdani will share his incredible knowledge about AI and implementing it to improve clinical care and education. Dr. Ann Kurth will lead discussions around the climate crisis and what we can all do to improve planetary health. Drs. Linda Hill and Janine Young and Mr. Chag Lowry will lead discussions on how we can build trust and remove borders that prevent creating a healthier world. The amazing workshops are filling up very fast. The committee has many activities planned for networking, friendship, and fun; I hear rumors of special canine visitors as well! Finally, we are looking forward to all of your contributions through presentations, posters, and discussions that make this meeting so very special. Whether in person or virtual, start planning to make the most of this amazing learning opportunity.

We are also looking forward to SACME PRiME, which will be held from June 18 to 21, 2024. This is a revival of a long-standing tradition in SACME and is being held for the first time in almost 10 years. It was one of my goals as President to support scholarship and this program does just that. Across four days in Toronto, we will bring together experts and budding scholars in continuing professional development (CPD) and continuing medical education (CME). Designed for both experienced and novice individuals who are looking to advance their research, evaluation, and scholarly skills, you’ll learn how to incorporate the latest research and scholarship into your CPD/CME practice. Toronto has the good fortune of being an amazing centre for medical education scholarship with institutions like the world renowned Wilson Centre, https://thewilsoncentre.ca/. The CPD Office at the University of Toronto, under the capable leadership of Suzan Schneeweiss, our incoming Vice President, will be our wonderful hosts. You can learn more and register at https://sacme-prime.org/. Act quickly as June is a very vibrant time in Toronto with activities such as Pride Toronto with a vision to create a world in which all people feel safer, valued, celebrated, and included, regardless of how they identify or who they love, https://www.pridetoronto.com. So, things fill up fast. And, we have only 20 exclusive spots for SACME PRiME, so book yours today.

Lastly, I need to thank my amazing Executive and Board of Directors who have been with me every step of the way through my role as President. They are an amazing group of people, full of wisdom, compassion, courage, and creativity. I want to give a special thanks to two people, Betsy Williams and Joyce Fried. As Past-President, Betsy has been an amazing support, full of guidance and compassion. Betsy is always just a text away and reminds us that, when in doubt, get more data! Thank you, Betsy. And Joyce Fried. Joyce is the Chair of our Strategic Affairs Committee and truly embodies the spirit of SACME. Joyce has dedicated her “retirement” to tirelessly committing her waking hours to SACME. She is present at every meeting of every committee she can attend (sometimes she brings along her lovely grandchildren). And she contributes just so, so much. In 2020, Joyce won the SACME Distinguished Service Award and I can honestly say that she has redefined what service to this organization truly means. Words cannot express the gratitude we have to Joyce for her contributions to the organization – it honestly would not be the same without her. Personally, I must thank Joyce for always being there for me as a colleague and true friend. This is what SACME is all about – the support we give each other when times are good and times are tough, and the lifelong friends that we make through learning to leave the place better than we found it.

With everyone’s help, I hope we truly have left SACME just a wee bit better than we found it. Thank you to all of you for the opportunity to serve SACME. I have no doubt that under Dr. Kim Northrip’s leadership it will be even better when she hands over the gavel.

From Cloudy Toronto, Ontario, Canada (where I cannot see my shadow),

David Wiljer, President, SACME 2022-2024
Our annual meeting is just a few of weeks away, and we will once again implement our multi-channel vision, taking the lessons of last year’s event on board and incorporating the feedback that we received from you to hone our approach.

A primary goal in having a multi-channel meeting is to ensure that there are ways to distribute content over time and that participants on both sides of the live stream are able to interact and have access to the same content. With very few exceptions, those participating virtually should be able to engage with the same parts of the live meeting as the participants on-site, even if the modality is different. This includes integrating both audiences into our plenaries, concurrent sessions, breakouts and small group work, social activities, casual learning sessions, and the use of a singular conference app/virtual platform for learners to engage “as if they were there.”

Our programming starts on March 10th with a series of workshops that address some of the most salient topics to the world of continuing professional development for healthcare professionals. If you’re keen on learning more about how generative AI can enrich your CPD program, you’ll have to wait for the rerun because those sessions are maxed out. But there are several other fascinating workshops available, including how to incorporate inclusivity into your curricula and learning environments, a hands-on session teaching the nuts and bolts of journal manuscript review; and another expounding techniques for using small-group learning in CPD environments. Additional workshops on the impact of technology on health equity, leveraging quality improvement efforts to bolster the impact of CPD efforts, and building on your CPD efforts to identify opportunities to create a research program round out a truly phenomenal lineup. Workshop descriptions can be found here.

During the event proper we’ll be focusing our time on exploring and expanding the evolving CPD ecosystem – taking some deep dives into the potential impact of AI on CPD, the evolving landscape of care in under-resourced environments, the role of equity and inclusion in fine-tuning education environments, and even large-scale issues such as sustainable healthcare practice in the face of climate change.

Our plenary speakers touch on each of these issues. Sophie Soklaridis, senior scientist at the Center for Addiction and Mental Health and a fellow SACME member, will deliver the Barbara Barnes Keynote address, exploring practical approaches to achieving equity, diversity, and inclusion in CPD education and practice. Graham McMahon, President and CEO of ACCME, will delve into methods for aligning evaluation practice with evolving learner needs. Muhammad Mamdani, Director of AI research at the University of Toronto, will trace linkages between data literacy, AI, and health practice and outcomes. And moving to systems-level issues, Ann Kurth, president of the New York Academy of Medicine, will tackle the intricately interwoven landscape of climate change, social determinants of health, and implications for healthcare education and practice.

So, alongside numerous engaging presentations from members and everything sunny San Diego has to offer, SACME 2024 will likely fly by but will be a tremendously informative event. We need some moderators and behind-the-scenes help for both onsite and online interactions, so please contact Tym Peters if you can help. We look forward to seeing and hearing from you, in person or via the wonders of modern technology!
Both sex and gender play roles in all health conditions experienced by both women and men. Sex refers to biologic differences related to the influence of chromosomes and sex hormones and impacts anatomic development, physiology, and immune responses. Sex has historically been considered to be binary (female, male). However, there is emerging research that indicates influences on the presence and/or expression of sex chromosomes and may result in more than 2 sexes (e.g., intersex). There are sex-based differences in disease risk, incidence, and prevalence; response to treatment; and pharmacokinetics and pharmacodynamics. For example, risk of osteoporosis is greater among females, but risk of death after osteoporosis-related hip fractures is higher among males. Females are more likely to have small vessel coronary disease, while males are more likely to have large vessel disease, resulting in the latter being more likely to present with substernal chest pain when experiencing a myocardial infarction. Females are more likely to have chronic pain than are men, due to the greater prevalence of conditions that can lead to pain (e.g., osteoarthritis), as well as sex-based differences in spinal cord and brain processing of nociceptive signals.

Gender refers to psychosocial influences and is determined by how the individual sees themselves in relationship to others and the world. Gender has traditionally been described as woman or man, but there are increasing numbers of genders with which patient identify. Gender impacts health due to types of risk exposure, ability and willingness to access the healthcare system, and responses of the healthcare system and how care is provided. For example, while men are more likely to die in the first year after an osteoporosis-related hip fracture, they are significantly less likely than women to be evaluated or treated for osteoporosis, as both the public (and patients) and their healthcare providers often think of osteoporosis as a “woman’s disease”. Women who present with emerging myocardial infarctions have poorer outcomes and greater risk of death, as they usually present with symptoms such as fatigue, anxiety, nausea, rather than substernal chest pain. These symptoms are often missed, unless the healthcare professional treating them is a woman, because most clinical research has been done in men, so symptoms in women are thought of as “atypical”, rather than clarifying that they are “atypical” for men but not for women. Women are more likely to be prescribed opioids at all ages than are men. While this may reflect differences in nociception, it may also reflect gendered issues, as it is more socially appropriate for women to complain of and seek care for pain, and women typically demonstrate lower levels of self-efficacy (a primary driver of complaints of pain).

Research is needed to inform healthcare professional education and patient care. Unfortunately, assessing literature in various fields notes that only about 30% of studies of conditions that occur in women and men disaggregate and report results based on sex or gender. In response to this, the National Institutes of Health (NIH) released their Sex as a Biologic Variable (SABV) policy in 2016. This requires that all applications for funding need to include assessments for sex and/or gender or indicate why this is not relevant to the study. The policy has led to increased participation of females/women in clinical studies. Additional research is needed, however, as a great deal of what is known assesses only differences in incidence or prevalence, without looking for explanations of these differences. We need to know and understand these issues in more depth, including assessing for the impact of intersection with other sociocultural impacts on health, if we are to better understand the influences of and interplay between sex and gender, develop effective prevention strategies, and improve treatment, especially through a personalized medicine approach.

While additional research is needed, current healthcare professional curricula do not consistently include existing data on sex or gender differences, despite indication from medical students that they understand the need to learn this information. Lack of inclusion of sex and gender data has been assessed in most depth for undergraduate medical education, with emerging data looking at graduate education and no current data assessing what is included in continuing education. Lack of inclusion of considerations of sex and gender not only impact what,
and how, patient care is provided but also limits the
development of young researchers in viewing their work
through a sex and gender lens. The lack of education
in this area is not only a problem for the United States
but has been identified around the globe. A recent global
strategic plan on women’s health, a joint effort of the
Bill and Melinda Gates Foundation and NIH, identified
50 areas that could be addressed to improve the health
of women. One of the areas identified is the need to
improve education and develop curricular materials for
the continuum of learners across healthcare professions.
We need to raise awareness among healthcare profession-
als, especially those who teach, about the importance of
and existing literature on sex and gender differences, and
then work across the continuum of learners to develop
cohesive curricular materials that can be easily adopted
and can improve the quality of care that learners provide,
as well as informing the development of the next genera-
tions of researchers.

SACME Membership Committee Report
By Natalie Sanfratello, Boston University Chobanian & Avedisian School of Medicine

The Membership Committee makes strides to improve
the applicant and member experiences. We continued our
recruitment efforts and have also prepared some propos-
als for board review and consideration.

The Committee has presented a few proposals to the
board which are moving through the deliberation process
now. These proposals are around an institutional mem-
bership plan which would incentivize institutions to have
more of their employees as members in SACME through
a volume-based discount. The other proposal is around
an affiliate member category which would open up mem-
bership to those in our field who are currently not eligible
for membership but do contribute to the scholarship of
the CPD field. Regarding the outreach opportunities, we
are continuing to consider what other professions may
benefit from a membership in SACME (and we in turn
benefit from their expertise in our community). We out-
reached to graduate schools with programs in continuing
education for healthcare professionals, and we are work-
ing to identify avenues to market both membership and
our annual meeting to those not yet aware of SACME.
Let me know if you have any other ideas! We have also
done a drive to collect some testimonials from SACME
members telling us why they enjoy their membership and
would recommend it to others. We hope to use these tes-
rimonials in future membership recruitment efforts.

And now to the superstars, our Regional Reps! All our
regional reps (except Canadian/International) host reg-
ularly recurring coffee chats offering an opportunity to
talk through the day-to-day obstacles of working in this
field with colleagues. I have often heard them referred
to as a safe space and even a support group for us CE/
CPD professionals. Since new members may be hesitant
about joining the regional groups, we want to give them a
taste of the topics covered in the coffee chats with a quar-
terly series of national coffee chats. We have had three
national coffee chats so far (June 2023, September 2023,
and January 2024). Our latest one in January was on the
topic of Overall Program Evaluation. These have all been
well attended, and I hope you will come to the next one
if you have not checked it out yet! We hope the success
of the national coffee chats will drive more engagement
towards the regional coffee chats as well as other oppor-
tunities offered. The regional coffee chats themselves,
posts to the listserv, and ideas from committee members
will serve as the basis for topic selection, and if you have
suggestions for future quarterly coffee chats or any feed-
back, please reach out to me!

As a membership committee, we are always looking
for opportunities to better engage the existing member-
ship as well as recruit new members. I encourage you all
to reach out to me with any other ideas about how we
can improve your experience as a member in SACME
or recruit new members. We have open positions on the
membership committee (and many other committees) if
you would like to get more involved. (I am looking for
a Vice Chair!). I have found that volunteering on a com-
mittee has only enhanced my SACME experience and
connected me to more colleagues. I am always happy to
connect you with your regional rep who can speak about
the volunteer opportunities in SACME and which one
may be the best fit for you. Hope to hear from you soon!
As the leading organization for physician board certification, the American Board of Medical Specialties (ABMS) provides the expertise, insights, and support to elevate the discipline of specialty medicine. Given that much of our work intersects with continuing medical education and continuing professional development, we are providing the following relevant updates.

**ABMS Issues Policy Statement on Upholding Standards in Specialty Practice**

ABMS recently issued a policy statement on upholding standards in specialty care. The statement elaborates on the social contract, which “is fulfilled when the profession and government work in alignment, sharing accountability for protecting patient welfare and improving access to person-centered, high-quality health care.” However, when laws or rules conflict with standards set by the profession, they “destabilize the social contract, undermine the legitimacy of professional oversight, and put the patient and population’s health at risk.” ABMS maintains that the “profession must set, maintain, and enforce the highest standards for clinical competence and accountability, and physicians must be permitted to practice according to those standards.” When the legal and private systems that regulate the profession of medicine are misaligned, the entire system of self-regulation is jeopardized, the statement concludes. “When care is criminalized, as is the case in more than 15 states, trust in government to fulfill its duty to both physicians and patients is eroded. When laws and regulations do not align to a standard of practice developed by a specialty on a politically divisive topic, ABMS will support the specialty to develop its standards and will support physicians in that specialty to practice to the standards set by their specialty.” [Read the policy in its entirety.](#)

**Nearly One Million Physicians and Medical Specialists Certified by an ABMS Member Board**

A record number of physicians and medical specialists are certified by an ABMS Member Board, according to a newly released report. ABMS board certification provides an independent evaluation of a physician or medical specialist’s knowledge and skills to practice safely and effectively; serving as a trusted credential upon which patients can rely when selecting a provider for their health care needs. The newly-released [2022-2023 ABMS Board Certification Report](#) shows that a record 988,737 physicians and medical specialists (also known as diplomates) are actively certified by an ABMS Member Board. This represents an increase of more than 10,000 diplomates compared with the previous year. The data are current as of June 30, 2023.

**ABMS Updates Guide to Medical Specialties**

ABMS recently released an updated [2023 ABMS Guide to Medical Specialties](#), which provides detailed information on ABMS, including its 24 Member Boards, nine Associate Members, and 40 specialty and 89 subspecialty certification areas. The ABMS Guide to Medical Specialties is a valuable resource regarding the medical areas in which physicians and medical specialists can be certified, descriptions of each specialty and subspecialty, and the types of conditions commonly treated within each specialty.

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**Updates from the ABMS**

By Greg Ogrinc, MD, MS

Senior Vice President, Certification Standards and Programs

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[Read the policy in its entirety.](#)

[2022-2023 ABMS Board Certification Report](#)

[2023 ABMS Guide to Medical Specialties](#)
I hope everyone had a joyous holiday season! It is hard to believe that we are already so far into 2024 and our annual meeting is upon us. This past year has been a busy one with lots of activity and growth within our SACME community.

The SACME website has undergone some major changes. Many thanks to Joyce Fried and Jennifer Reino who have worked tirelessly on making our website more informative and attractive. Among the many changes is an update to the Academy page. The page provides a short history of the Academy and an overview of recent projects. Pictures of Academy fellows accompany their names. We anticipate this change will enhance opportunities for communication. Please visit https://sacme.org/SACME-Academy-of-Fellows. And if your photo is not there, please send your favorite headshot to Joyce Fried joycemfried@gmail.com.

As I mentioned in my last column, our Academy of Fellows Faculty Development Committee under the able guidance of Gary Smith, Joyce Fried, and Susan Lawler developed a four-part webinar series. The series kicked off in October with Nels L. Carlson, Assistant Dean, Continuing Professional Development, Oregon Health & Science University providing examples of faculty development activities that represent collaborations between CPD and other offices. The session was titled Raising the Bar on the Quality of Teaching: Focus on the Educator. In December, we moved into the topic of coaching. Coaching has long been utilized in the business world and more recently has been emerging as a framework to aid learners in medical education. Jane Tipping, MADEd, MCC, Educational Consultant at the University of Toronto, and Anne Matlow, Professor of Medicine and Pediatrics at Temerty Faculty of Medicine, University of Toronto conducted an interactive session called Demystifying Coaching. They discussed coaching, what it is, the role it can play, and its value within the health professions. Dr. Suzan Schneeweiss, Professor of Pediatrics, Associate Dean Continuing Professional Development at the University of Toronto and SACME Vice President-Elect discussed the topic of promoting competencies in CPD in February. Using interactive discussions and shared experiences, participants gained insights into core CPD provider competencies that promote effective programming. Please make note and plan to attend our final webinar on April 16 when Gary Smith, PhD, Associate Dean of Continuous Professional Learning at the University of New Mexico School of Medicine will be discussing how to use the Clinician Educator Milestones to Generate Lifelong Learning. If you were not able to attend any or all of the first three sessions and have an interest in viewing the content, please reach out to info@sacme.org for more information.

The Academy continues to work closely with the SACME Board. I anticipate increased collaboration as the planning for our 50th Anniversary celebration takes shape. We welcome input from all our members as to topics and activities that you would like to see.

I hope to see all of you at our 2024 annual meeting, March 10-13, in San Diego!
Physician performance is a multifactorial, ecologically-bound phenomenon (Mazmanian et al., 2021). Due to both the reorganizational efforts in medicine and growth of clinical information, it will be increasingly important that medical educators foster lifelong learning and professional identity status in physicians and other medical professionals across the career continuum. In understanding the functioning of historically high-achieving and highly competent professionals, moving beyond tradition CME activities with an emphasis didactic delivery is critical.

Medical professional identity formation is the process of enculturation into the actions, interactions, values, and norms of the medical profession (Cruess et al., 2014). It incorporates elements of self-awareness, self-directed learning, systems knowledge, and maintaining well-being. As these constructs are strongly implicated in functioning, ensuring professionalism is crucial.

Understanding professionalism in physicians (and other high-accountability professionals) requires consideration of the vast array of elements that give rise to their behavior. This includes personal and educational history, psychological and physical health, and various ecosystems in which they operate, to name a few. These factors are numerous and not easily assessed, yet in our clinical experience can profoundly impact physician behavior.

It would be helpful to subset the potential variables implicated in physician behavior to only the most salient ones, and to provide an organizing framework for them. This would entail a model of practitioner performance that includes medical knowledge, but also incorporates biopsychosocial factors, systems factors, professional identity, and metacognitive functioning. This model will provide a holistic framework that aids in the development of a brief instrument to assess the healthcare professional from a CME/CPD perspective. The goal of this instrument is to identify the participant’s social-cognitive state as a learner and provide information to guide the best approach for a CME activity.

This work is informed by the Environmentally Valid Learning Approach (EVLA) model, a conceptual framework for the assessment, treatment, and remediation of high-functioning professionals (Williams & Williams, 2020). It is organized into five broad elements: Capacity, Capability, Readiness, Action, and Continuity.

Capacity reflects biological factors (e.g., mood, metabolic, substance, and neurological disorders), psychological factors (e.g. personality characteristics, self-esteem, and self-efficacy), and social factors (socio-economic, socio-environmental, cultural influences, early life experiences, external stressors, and system issues). Capability includes knowledge and skills. In particular, this is knowledge surrounding emotional competency and/or interpersonal and communication skills. Readiness includes the underlying tactics and strategies needed to function in the healthcare environment. Action refers to the process of implementing Capacity, Capability, and Readiness. It includes the momentary ability to adjust to personal and system stressors. Continuity is the skill to accurately perceive the level of success of one’s behavior and adjust future behavior accordingly. Continuity is the summative effect on future behavior and depends on individual and system contributions.

Together, these elements consider the learner as an individual capable of making informed decisions, who nonetheless has both relevant biological and superordinate system concerns. This work speaks directly to this imperative propounded by Mazmanian, Cervero, and Drumming (2021), “The success of those physicians and of those who facilitate their learning depends on a careful understanding of the psychological, social, and biological factors that influence physician development and lifelong learning.” This project will deliver an instrument capable of measuring a learner’s functioning in the EVLA domains described above. This instrument will be practical in being short enough to be deployable in a learning setting, while also providing actionable inferences about the learner.
Join the ACCME for Learn to Thrive 2024

The Accreditation Council for Continuing Medical Education (ACCME) is excited to welcome our dynamic community of continuing education (CE) professionals back to Chicago for Learn to Thrive 2024 on May 14-16, 2024 at the Hyatt Regency Chicago Hotel. At Learn to Thrive, ACCME’s annual meeting, you’ll join stakeholders from across the healthcare education continuum to learn from the rich diversity of educational and collaborative approaches that improve healthcare each day.

ACCME constructed three days of education and networking with your professional development needs in mind – including new opportunities to discover actionable strategies that will optimize your role in helping clinicians deliver quality patient care.

NEW! Single-Day Ticket Options

Can’t attend all three days of the meeting but still want to engage with the accredited CE community? Beginning February 22, limited Single-Day Admission ticket options will be available for each meeting day.

Learn more and register!

New Education Course Available: CE Educator’s Toolkit Companion

ACCME is pleased to offer the new “CE Educator’s Toolkit Companion” course on ACCME Academy, which was created to bring the CE Educator’s Toolkit to life. This toolkit was designed to equip educators with best practices and guidelines to deliver effective CE and was developed by SACME through an ACCME research grant.

ACCME created this education course to help continuing professional development teams implement Toolkit strategies to improve their education’s effectiveness and create better learning outcomes. Learners will:

• Reflect on their preparedness for best-practice CE planning;
• Apply toolkit concepts to design, deliver, and evaluate CE activities that are effective and innovative;
• Strategically combine educational interventions within a CE session to maximize learning; and
• Use the Toolkit to support professional development for CE staff, planners, and faculty.

Check out the course and log in to ACCME Academy.

Learn to Thrive 2024
by ACCME

May 14-16, 2024
Hyatt Regency Chicago

Pre-Conference Sessions: May 13
Promoting Research in Medical Education,  
June 18-21, 2024

We are so excited that after almost 10 years, the SACME research and evaluation bootcamp is back, better than ever as SACME PRiME (Promoting Research and Evaluation in Medical Education). Registration for the program is now open. Whether you are a novice, growing, or have lots of experience in CPD research and evaluation, don’t miss out on this exciting opportunity to learn from and with your incredible colleagues how to generate new knowledge and new ideas for our amazing CPD community.

The four-day program runs from June 18 to June 21, 2024 in Toronto, and will include hands-on working sessions on question structure and design of experiments, conducting literature reviews, selecting appropriate quantitative and qualitative methods, and using and analyzing data sets. The program concludes with pointers on how to write up research results. The program will focus on interactive learning, breakout discussion, and knowledge generation to help prepare CPD/CME professionals to step forward in their careers and contribute to the scholarship of CPD/CME. You can find additional information and registration on the SACME website at https://sacme-prime.org/.

Not only is this an awesome opportunity to learn with some of the world’s experts in CPD research and evaluation, but it will all happen in Toronto, Canada. Toronto has an amazing community of researchers and evaluators in medical education, including the Wilson Centre, https://thewilsoncentre.ca/. And, Toronto is an amazing, vibrant city in June. In addition to all of the Toronto Pride activities, there is great food, theatre, and of course the Toronto Blue Jays, who will be playing the Boston Red Sox in Toronto that week.

The faculty for this session is going to be outstanding, starting with stream leads, Drs. Tanya Horsley, Sophie Soklaridis, and David Rojas.

Tanya is Associate Director at the Research Unit at the Royal College of Physicians and Surgeons of Canada and faculty in the School of Epidemiology and Public Health, University of Ottawa, where she leads a research program focused on the formalization of integrated knowledge translation for the co-creation, use, and influence of research and complex systems of care. Sophie is a Senior Scientist at the Centre for Addiction and Mental Health (CAMH); an Associate Professor at the Department of Psychiatry and Department of Family & Community Medicine at the Temerty Faculty of Medicine, University of Toronto; and a Scientist at Wilson Centre for Research in Education. David is a Scientist at the Wilson Centre, University Health Network; the Director of Program Evaluation in the MD Program; and an Assistant Professor in the Department of Obstetrics and Gynaecology, Temerty Faculty of Medicine, University of Toronto.

Stay tuned as we announce our Special Advisors who will provide guidance and consultation on our own personal goals, challenges, opportunities, and projects. Sign up now to reserve your spot.
Spring is in the air and as many people undertake during this season, we are entering of a phase of renewal. In the last couple of weeks, SACME announced a change in association management companies. This change came after a thoughtful process of reflection on needs, resources available and projected goals. In some ways the process of moving to a new management companies reflected the plan, study, do, act model that we advocate our institutions engage in when planning accredited continuing education. During the upcoming season, the Communications Committee will work closely with the transition team to the new management company.

Also, we recently started an Instagram account, sacme_cpd, please find us and follow us! We are hopeful with the upcoming SACME Annual Meeting; we will see pictures of the events and sessions from the meeting posted on Instagram. Also, if you have not already done so, please follow us on our various platforms and groups-X, LinkedIn and now Instagram!

Finally, I am excited to share all of the social programs that we will offer at this year’s annual meeting in San Diego! Ms. Laura Wertz is coordinating all of these events, and she has provided these lovely write-ups about each event, as she has confirmed them.

**S’mores on Sunday March 10, 2024**

As part of your resort free, the Sheraton San Diego Hotel & Marina provides all the ingredients for S’mores! Please join us at the fire pits by the Marina by the Marina on Sunday from 5pm – 6pm. Drop by, say “Hi”, and have a pre-dinner S’more! You can order your packet in advance through the Sheraton’s experience website: [Sheraton San Diego Hotel & Marina (247activities.com)](http://247activities.com). Each fire pit can accommodate about 10 people at a time but there will be beautiful views and S’more good conversation if you need to wait your turn!

**Comfort Dogs! Tuesday March 12th, 2024**

You’ll see a few special guests at the Annual Meeting on Tuesday, March 12th. Some of the pets and their owners from the San Diego chapter of Love on a Leash pet therapy will be joining us for our afternoon break. The second largest chapter in the United States, these pets provide comfort and joy at senior living facilities, hospitals, schools, veteran centers, and, now, the SACME Annual Meeting! You can learn more and get a sneak peek at [San Diego Central – Love On A Leash®](http://loveona leash.org).

**A Taste of San Diego with the Board-Tuesday evening March 12th, 2024**

Building on last year’s success, Tuesday night is an opportunity for you to experience “A Taste of San Diego with the Board”. We have made reservations for small groups at 10 local restaurants (pay on your own). Each group will include a member of SACME’s Board of Directors. It’s a great opportunity to experience local cuisine, learn more about SACME & your fellow attendees, and just have a good time! Reservation space is limited & will be open via the conference app approximately 2 weeks prior to the Annual Meeting. Restaurants will include:

- C Level
- Civico 1845
- Coasterra
- Island Prime
- Karina’s Cantina
- Mimmo’s Italian Village
- Saltwater
- The Heights
- Tom Ham’s Lighthouse
- Vinarius Wine Bar & Restaurant

A few more social programs are being planned for the SACME Annual Meeting: a morning yoga session, a walk around the marina and a SACME Committee meet and greet breakfast. Look for the details on these social programs in our upcoming pulse points editions.
Happy 2024! On behalf of the AAMC, I want to extend my gratitude to the SACME community, a member of the AAMC (Association of American Medical Colleges) a nonprofit association dedicated to improving the health of people everywhere through medical education, health care, medical research, and community collaborations. Its members are all 158 U.S. medical schools accredited by the Liaison Committee on Medical Education; 12 accredited Canadian medical schools; approximately 400 academic health systems and teaching hospitals, including Department of Veterans Affairs medical centers; and more than 70 academic societies (including SACME). Additional information about the AAMC is available at www.aamc.org

Below are several updates that are relevant to our colleagues in continuing medical education and continuing professional development. Feel free to reach out with questions or suggestions to cme@aamc.org or lhowley@aamc.org.

Select AAMC Offerings and Initiatives

AAMC establishes International Advisory Committee for Artificial Intelligence

Because artificial intelligence (AI) is a global issue that spans the academic medicine community, having a coordinated, consensus-oriented approach to responding to the many opportunities that it offers is critical. The AAMC has convened an International Advisory Committee for AI, in collaboration with several international medical education organizations and institutions (International Association of Medical Science Educators, the Association for Medical Education in Europe, and the National University of Singapore). The advisory council is intended to provide insights and recommendations on AI and is part of a broader effort by the AAMC to support the medical education community in establishing connections and sharing AI innovations in the field.

Read More

Addressing Misinformation in Health Professions Education

The AAMC, with the Centers for Disease Control and Prevention, is engaged in a multi-year strategic initiative to address medical misinformation and mistrust through health professions education. The goal is to improve health professionals’ ability to communicate about health information and dispel misinformation, myths, and disinformation. Four teams representing diverse health care settings are currently developing a collaborative toolkit of shareable resources. We recently became a member of the AAAS Coalition for Trust in Health and Science and will be co-sponsoring a national summit with Duke University SOM and RTI International in November to review the current and needs for future strategic efforts.

More information can be found here and here.

Foundational Competencies for Undergraduate Medical Education

Coming this spring, the AAMC, AACOM, and ACGME will be inviting feedback on draft 2 of the foundational competencies for undergraduate medical education. This work is part of a multi-year initiative led by the three organizations to create a common set of foundational competencies for use in undergraduate medical education programs in the United States. This initiative aligns with recommendations outlined in the Undergraduate Medical Education-Graduate Medical Education Review Committee (UGRC) and is part of a comprehensive effort to improve the transition to residency. See this website for more information and the future opportunity to review and provide feedback about draft competencies. We are seeking broad input from educators across the continuum including CME/CPD professionals!
Inclusion, Diversity, Equity, and Anti-racism (IDEAS) Learning Series. The IDEAS Learning Series channels experts and resources from within the AAMC and across academic medicine into webinars designed to help busy professionals cut through the noise and find ways to take action on relevant initiatives. Academic health professionals may be experiencing information overload or feeling unsure about where to get the comprehensive, reliable information they need to take action. This series is designed to help. Learn more and register here. Learn about additional AAMC resources, initiatives and publications supporting increased equity, diversity and inclusion.

Academic Medicine/MedEdPORTAL Scholarly Publishing Webinar Series

This free monthly webinar series, co-sponsored by Academic Medicine and MedEdPORTAL, will cover the importance of publishing your education scholarship and practical suggestions for how to do so successfully, including how to improve your writing and navigate the peer-review and publication processes. Sessions will include interactive exercises to practice what you have learned and time for Q&A with the featured panelists. Learn more and register here.

Save-the-Date: Annual AAMC Group on Educational Affairs (GEA) Regional Meetings. As a reminder, each regional GEA includes a section of constituents dedicated to CME/CPD.

- **CGEA**: April 4 - 5, 2024, in Milwaukee, WI
- **SGEA**: April 11-13, 2024, in Houston, TX
- **WGEA**: May 5 -7, 2024, in Riverside, CA
- **NEGEA**: May 29-31, 2024, in New York, NY

Select AAMC Resources

Explore Current Trends in Artificial Intelligence

Join the AAMC Communities to engage with peers, learn about the latest work happening across academic medicine, and explore best practices and challenges with experts in generative AI, machine learning, natural language processing, and more. Find a curated collection of the latest resources and upcoming events addressing the use of AI in medical education.

Join the New Assessment and Evaluation Virtual Community

The AAMC has launched an online community for everyone interested in assessment and evaluation across health professions education. We invite you to join this community, engage with your colleagues through discussion threads around timely questions, and share useful resources. To get started, register for the AAMC Communities.

Recording of Seminar Exploring Legacy of Medicine During the Holocaust Now Available

On Holocaust Remembrance Day 2022, the AAMC hosted a virtual seminar, “Legacy of Medicine During the Holocaust and its Contemporary Relevance,” with Hedy S. Wald, PhD, and Sabine Hildebrandt, MD. Both Drs. Wald and Hildebrandt are commissioners of the Lancet Commission on Medicine and the Holocaust, and Dr. Hildebrandt serves as co-chair. To learn more about the AAMC’s work in this space, I encourage you to explore FRAHME’s many resources, register and watch the Lancet Commission’s webinar recording, and read its recent report about integrating the history of the Holocaust into medical education.

Recording of Looking Inward: Addressing the Stigma of Addiction Webinar Now Available

As part of the AAMC’s ongoing efforts to support its members in advancing addiction education, the association has partnered with the National Institute on Drug Abuse (NIDA) to commission a systematic literature review of health care professionals’ bias and stigma related to substance use disorders. This webinar presented the results of this review and updates on several national educational efforts to improve health care. Register and watch the webinar recording here.
Research on the status of artificial intelligence among SACME members – how we use it, how we perceive it, and where we are going from here

By Vjekoslav Hlede, American Society of Anesthesiologists of Medicine

The SACME AI Group, part of the Technology-Enhanced CPD Committee, aims to research the status of artificial intelligence utilization among SACME members. We invite all SACME members interested in this topic to join us as we work on improving the research plan, gaining IRB approval, and implementing the research idea outlined below.

Context

Artificial Intelligence (AI) may be a significant game-changer. It may help us revolutionize the landscape of continuing professional development (CPD) for healthcare professionals and transform traditional paradigms into more dynamic, personalized, and impactful learning experiences. “Help us” is an essential part of that sentence. AI makes sense only in complex socio-technical systems of healthcare – where clinicians, patients, caregivers, communities, and various technologies dynamically interact and evolve. Humans’ relationship with AI and acceptance are important parts of that evolution. We, the people, are the key drivers, while technologies are tools that may help us drive the change. That is why we are interested in the human, social, and emotional aspects of AI.

Goal

This study seeks to illuminate the attitudes, expectations, and reservations of SACME members regarding the integration of AI technologies in CPD.

Research questions we may be able to address:

- how CPD professionals perceive AI
- how AI is currently used
- how AI can be leveraged to improve CPD program development, delivery and empower learners

We plan a mixed methods phased approach to capture a broad spectrum of insights and perspectives on the role of AI in advancing educational practices, addressing challenges, and shaping the future direction of CPD.

Join us!

If you are interested in this research or in joining the SACME AI Group, please contact Vjeko Hlede at v.hlede@asahq.org (or info@sacme.org)

To find more about the TECPD committee, please visit: https://sacme.org/Technology-Enhanced-CPD-Committee/
INTERCOM

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