



SACME 2014 SPRING MEETING

Aligning Education and Improving Patient Care Across the Health Professions and the Continuum

April 30 – May 4, 2014

Embassy Suites RiverCenter Hotel, Covington, Kentucky/Cincinnati, Ohio

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SACME 2014 SPRING MEETING

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NC-CME, The National Commission for Certification of CME Professionals, Inc., is a nonprofit organization founded in 2006 by an independent group of peers within the CME community for the purpose of establishing a definitive certification program for CME Professionals. In July 2008, NC-CME began designating qualified individuals as Certified CME Professionals (CCMEPs™); within six months, more than 150 CCMEPs™ were listed in the National Registry at www.NC-CME.org. To date there are over 400 CCMEPs™.



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SCHEDULE OF EVENTS

Wednesday, April 30

- | | |
|-------------------|---|
| 6:30 am – 8:00 am | Breakfast — Embassy Suites Atrium |
| 1:00 pm – 6:00 pm | Registration open — Lobby Atrium |
| 8:00 am – 3:00 pm | SACME Board Meeting (closed) — Captain’s View (Working Lunch) |
| 3:15 pm – 4:15 pm | Finance Committee Meeting (closed) — Captain’s View |
| 4:30 pm – 5:30 pm | Research Committee Meeting (open) — City View 1 |
| 6:00 pm – 8:00 pm | Tri-Group Meeting and Dinner (closed) — Captain Mary Green Boardroom |

Thursday, May 1

- 6:30 am – 8:30 am **Breakfast — Embassy Suites Atrium**
- 7:30 am – 5:00 pm Registration — **Lobby Atrium**
- 7:00 am – 8:15 am Set up Posters — **Roebling Ballroom**
- 7:30 am – 8:30 am Communication Committee Meeting (open) — **City View 2**
- 8:15 am – 5:00 pm Exhibits and Posters — **Roebling Foyer and Ballroom**
- 8:30 am – 8:45 am **Welcoming Remarks by SACME President — Roebling Ballroom**
Deborah Samuel, MBA, FACEHP, Director, Division of CME at the American Academy of Pediatrics
- 8:45 am – 9:00 am **Program Overview by SACME Program Chair — Roebling Ballroom**
Mila Kostic, FACEHP, Director, Continuing Medical Education, Perelman School of Medicine at the University of Pennsylvania
- 9:00 am – 10:30 am **BARBARA BARNES Plenary — Roebling Ballroom**
Evolution and Adaptation in Education: Surviving the Impact of the Comet Headed Our Way
George C. Mejicano, MD, MS, FACP, Senior Associate Dean for Education, School of Medicine, Oregon Health & Science University

Imagine a world where universities don't exist. Education is self-directed and recognized not with degrees, but badges on your online profile. Imagine a world where all education is free but that people pay for only assessments to prove they have mastered competencies. It sounds radical, but the world of education is changing. The speaker will provide an overview of how the world of higher education is rapidly changing and what the implications are for continuing education of health professionals. Will your organization survive the changes? How will you adapt and evolve to "survive the comet that's headed our way."
- 10:30 am – 10:45 am **Break — Roebling Foyer**
- 10:45 am – 11:15 am **Invited Presentation of MANNING AWARD Research Project — Roebling Ballroom**
Practice Based Learning to Achieve System Based Practice: An Interprofessional CE Model and Toolbox for Planned Practice Change
Moshe Feldman, PhD, Assistant Professor, Office of Assessment and Evaluation Studies, Assistant Director of Research and Evaluation, Center for Human Simulation and Patient Safety, VCU School of Medicine

Interprofessional teams of healthcare providers must be enabled with the knowledge, skills, and attitudes to support Practice Based Learning and Improvement and Systems Based Practice. This session will report current results of the 2013 SACME Manning Award, a two-year project to develop, disseminate, and evaluate an interprofessional CME-QI program that integrates experiential learning and simulation.

11:15 am – 12:30 pm **RICME – Research presentations from accepted abstracts — Roebing Ballroom**

Facilitator: **David W. Price, MD, FAAFP, FACEHP**, Director of Medical Education, Colorado Permanente Medical Group and The Permanente Federation, Co-Director, Center for Health Education, Dissemination and Implementation Research, Professor of Family Medicine, University of Colorado Denver School of Medicine

Continuing Medical Education: The Tower of Babel?

Tanya Horsley, PhD, Associate Director, Research Unit, Royal College of Physicians and Surgeons of Canada

Determining Effect Size Benchmarks for CME Effectiveness

Jason Olivieri, MPH, Director, Educational Strategy & Outcomes Services for Imedex, LLC

Distinguishing Between Outcomes Research and Evaluation in the CME/CPD Field (Issues and Challenges in CME/CPD Research)

Marianna Shershneva, MD, PhD, Director, Educational Development and Research, CME Enterprise

The Impact on Motivation of Web-based Modules to Fulfill Part IV of Maintenance of Certification: An Individual Effort to Improve the Performance of Physicians

Lara Zisblatt, ABD, MA, PMME, Assistant Director, Boston University School of Medicine Continuing Medical Education

Panel Q & A

12:30 pm – 1:30 pm **Lunch — City View Ballroom**

12:30 pm – 1:30 pm **Joint Working Group working lunch meeting (closed)**

1:30 pm – 2:15 pm **IN FOCUS – Invited Presentation — Roebing Ballroom**

Getting Patients, Clinicians and Others in the Healthcare System Involved in Medical Research

Susan Hildebrandt, MA, Director of Stakeholder Engagement for the Patient-Centered Outcomes Research Institute (PCORI)

This presentation will give SACME conference attendees an opportunity to learn about the Patient-Centered Outcomes Research Institute (PCORI), and discover

ways to get involved in their work. PCORI has funded over 270 research projects to date, and continues to expand its funding opportunities to include patients, clinicians and other non-traditional researchers in all aspects of the research process. Susan Hildebrandt, Director of Stakeholder Engagement, will discuss PCORI's current research funding announcements and all of the ways in which clinicians can use PCORI research methods and results to improve their interactions with patients and their families.

2:15 pm – 3:45 pm

Breakout: **WORKSHOP 1 — Roebling Ballroom**

PCORI - Engaging with SACME: A Dissemination Workshop

Susan Hildebrandt, MA, Director of Stakeholder Engagement for the Patient-Centered Outcomes Research Institute (PCORI)

Robert Morrow, MD, Associate Clinical Professor-Department of Family and Social Medicine, Associate Director of Interventional CME-Center for CME, Albert Einstein College of Medicine

Please join us for a highly participant-dependent workshop on new ideas and methods. After a short introduction, we will break into small groups to discuss:

- What does dissemination of patient-centered curricula mean to you as veteran educators?
- How is such a strategy like what we do now?
- How would it be different?

We will reassemble to share our ideas for individual and group projects related to the idea of patient-centered Continuing Professional Development.

2:15 pm – 3:45 pm

Breakout: **WORKSHOP 2 — City View 1 & 2**

Expanding the Role of CME/CPE Professionals to the World of Social Media

Alexander M. Djurichich, MD, Associate Dean for CME, Indiana University School of Medicine

This workshop will explore the use of social media within an overall context of medicine, with an emphasis on medical education. Participants will review relevant recent literature on the benefits and caveats of using social media within medical education. In true “workshop format,” participants will be encouraged to actually create a Twitter account and individually tweet their own content. Finally, participants will complete a commitment to change form relevant to their personal, professional use of social media.

3:45 pm – 4:00 pm

Break — Roebling Foyer

4:00 pm – 5:00 pm

IN FOCUS – Invited Panel Presentation — Roebing Ballroom

The Changing Landscape of Funding Models for CME/CPD

Facilitator: **Todd Dorman, MD, FCCM**, Senior Associate Dean for Education Coordination, Associate Dean for CME, Professor and Vice Chair for Critical Care, Department of Anesthesiology and Critical Care Medicine, Joint Appointments in Internal Medicine, Surgery, and the School of Nursing, Johns Hopkins University School of Medicine

The funding of academic CME has been undergoing an evolution. In the last 7 years less money has been provided through commercial grants while more money has been provided through alternative mechanisms. In addition, previous funders are now only funding certain types of activities. This interactive session will utilize case-based and small group discussions to explore The Changing Landscape of Funding in CME.

5:00 pm – 5:30 pm

FACILITATED REVIEW OF POSTERS — Roebing Ballroom

Facilitating Reflection Through Peer-Assisted Debriefing

Stephanie Armstrong, MA, Lead Research Associate, Department of Medical Education, Faculty of Medicine, University of Manitoba

Asked, Listened, Changed – Findings from the 2012/2013 Royal College Maintenance of Certification Program Evaluation

Tanya Horsley, PhD, Associate Director, Research Unit, Royal College of Physicians and Surgeons of Canada

Use of Libguide to Facilitate Viewing of CME Enduring Materials for Volunteer Clinical Faculty

JoAnn Babish, MSLS, Associate Director, CME and Faculty Development, The Commonwealth Medical College

Pre-Assessment of Weight Management Program Readiness in Providers and Patients

Sarah K. Meadows, MS, CCMEP, Manager, Accreditation and Programs, Office of Professional Education, National Jewish Health

Creation and Use of Online Modules to Address Tobacco Dependence in Specialty Settings

James Norton, PhD, Associate Dean for Educational Engagement/Director University of Kentucky Healthcare CECentral, University of Kentucky College of Medicine

The Effect of Message Day and Time on Commitment-to-Change Response Rates

Seth Anderson, MS, Associate Director, University of Kentucky Healthcare CECentral

Designing Learning from Teaching Documentation: Crowdsourcing and Client Feedback

Jack Dolcourt, MD, MEd, Associate Dean for CME, Medical Graphics and Photography at University of Utah School of Medicine

Opioid Prescribing Patterns After a Statewide Mandated CME Course about Chronic Pain and Addiction

William F. Rayburn, MD, MBA, Associate Dean, Continuing Medical Education & Professional Development, Professor and Emeritus Chair, Department of Obstetrics & Gynecology, University of New Mexico School of Medicine

Instant Electronic Course Evaluation and Credit to Attendees for a Clinic

William F. Rayburn, MD, MBA, Associate Dean, Continuing Medical Education & Professional Development, Professor and Emeritus Chair, Department of Obstetrics & Gynecology, University of New Mexico School of Medicine

QI and CME: A Collaborative Approach to Supporting Interprofessional Quality Improvement

Moshe Feldman, PhD, Assistant Professor, Office of Assessment and Evaluation Studies, Assistant Director of Research and Evaluation, Center for Human Simulation and Patient Safety, VCU School of Medicine

Jessica Evans, Research Assistant, Office of Assessment and Evaluation Studies VCU School of Medicine

5:30 pm – 6:00 pm

SACME 101 for New and Prospective Members — City View Ballroom 1 & 2

6:00 pm – 7:00 pm

Reception (members and non-members) — City View Ballroom 1 & 2, Captain's View

Friday, May 2

- 6:30 am – 8:30 am **Breakfast — Embassy Suites Atrium**
- 7:30 am – 12:30 pm Registration — **Lobby Atrium**
- 7:15 am – 8:15 am **Membership Committee Meeting (open) — City View 1**
- 8:15 am – 5:00 pm Exhibits and Posters — **Roebling Foyer and Ballroom**
- 8:30 am – **IN FOCUS – Invited Panel Presentation — Roebling Ballroom**
Engaging Academic CME Providers with Accreditors
Facilitator: **Mila Kostic, FACEHP**, Director, Continuing Medical Education, Perelman School of Medicine at the University of Pennsylvania
- 8:30 am – 9:00 am ***Are We Meeting the Needs with the Simplified Accreditation System? – A Discussion with Participants***
Steve Singer, PhD, Director, Education and Outreach, Accreditation Council for Continuing Medical Education (ACCME)
- 9:00 am – 9:30 am ***Ask the AMA: Updates and Discussion***
Alejandro Aparicio, MD, FACP, Director, Division of Continuing Physician Professional Development, American Medical Association
- 9:30 am – 10:30 am ***Supporting the Interprofessional Education and Competency Development with Joint Accreditation Systems – Interactive Panel***
Steve Singer, PhD, Director, Education and Outreach, Accreditation Council for Continuing Medical Education (ACCME)
Kathy Chappell, PhD, RN, Director of Accreditation, American Nurses Credentialing Center (ANCC)
- 10:30 am – 11:00 am **Break — Roebling Foyer**
- 11:00 am – 12:30 pm **Sharing Provider Experience – Interactive — Roebling Ballroom**
Lessons from the Joint Accreditation Providers
Facilitator: **Jann T. Balmer, RN, PhD**, Director, Office of CME, University of Virginia School of Medicine
Kathy Chappell, PhD, RN, Director of Accreditation, American Nurses Credentialing Center (ANCC)
Sally O’Neill, PhD, Associate Vice Provost, Health Sciences Continuing Education, Creighton University
Janet Cline, RPh, President Emeritus, Creative Educational Concepts, Inc

Supporting Faculty Development with New CME Activity Formats

Facilitator: **Barbara E. Barnes, MD**, Vice President of CME, Contracts and Grants and Intellectual Property, Continuing Medical Education, Center for Continuing Education in the Health Sciences, University of Pittsburgh Medical Center

Alejandro Aparicio, MD, FACP, Director, Division of Continuing Physician Professional Development, American Medical Association

Lunch — On Your Own

12:30 pm – 2:30 pm **VCU Protocol Training Breakout (closed) — Captain Mary Green Boardroom**

12:30 pm – 1:30 pm **SACME Strategic Affairs Group (closed) — Simon Kenton Boardroom**

12:45 pm – 1:45 pm **SACME Journal Club Editorial Board (closed) — James Bradley Boardroom**

Afternoon Free

Suggested Activities – Check the registration table for information

- **Cincinnati Reds Baseball** is in town May 1, 2, 3, 4. (vs. Milwaukee)
On Friday, the game is at 7:10 pm. *Those who purchased discounted group tickets when registering for the Meeting will find them in their registration packet. Additional tickets may be available at the Reds Box Office at Great American Ballpark.*
- **Aronoff Center for the Arts** – Broadway Across America presentation of “Phantom of the Opera” is in town. Showtime is 8:00pm. Tickets may be available at <http://cincinnati.broadway.com/shows/tickets>
- **Newport Aquarium** – Check out the new Turtle Canyon exhibit: 14 species of turtles, including the 3 largest species.
- **Newport on the Levee** – Shopping, dining, movies
- **Explore MainStrasse Village Covington** – Shopping, dining, nightlife
- **Cincinnati Zoo and Botanical Gardens** – It’s Zoo Babies time!
- **Horseshoe Casino, Cincinnati** – Look for signs in the hotel lobby with the schedule for the free shuttle to the casino.
- **Museums** – Freedom Center; Cincinnati Museum Center; Cincinnati Art Museum; Creation Museum; Taft Museum of Art
- **Shopping** – Crestview Hills; downtown Cincinnati; Florence Mall Ya’ll; Rookwood Commons & Pavilion; Kenwood Towne Center; O’Byronville Cincinnati

Saturday, May 3

- 7:00 am – 8:30 am **Breakfast — Embassy Suites Atrium**
- 7:30 am – 5:00 pm Registration — **Lobby Atrium**
- 7:15 am – 8:15 am Program Committee Meeting (open) — **Captain’s View**
- 8:15 am – 5:00 pm Exhibits and Posters — **Roebling Foyer and Ballroom**
- 8:30 am – 9:30 am **IN FOCUS – Invited Interactive Session – Improving Quality of Care with the ABMS New Standards for Physician Certification Program — Roebling Ballroom**

The Updated ABMS Standards: Core Competencies, Patient Safety, CME Activities, and Quality Strategies

Mellie Villahermosa Pouwels, MA, Vice President, Academic Programs and Services, American Board of Medical Specialties

The updated ABMS Standards provide a framework for Member Boards to use in developing their own Programs for MOC. The standards allow for innovation and further emphasize relevancy in their approach to continuing professional development activities. By adopting a patient-centric perspective with added emphasis on professionalism, patient safety, and performance improvement, the standards encourage physicians to participate in quality improvement efforts rooted within their own practice settings.

This session is intended to provide an overview of the updated ABMS Standards in order to encourage participants to integrate the institutionally-appropriate components of these standards into their CPD/CME programs.

Building the Case for Quality and Safety in CME with the MOC Multispecialty Portfolio Program

Kevin Graves, PMP, MBA, Program Manager, Multi-Specialty MOC Portfolio Approval Program

The Multi-Specialty MOC Portfolio Approval Program (Portfolio Program) offers a single process for healthcare organizations to support physician involvement in quality improvement and Maintenance of Certification (MOC) across multiple ABMS specialties. This pathway offers a streamlined approach for organizations that sponsor and support multiple well-designed quality improvement efforts involving physicians across multiple disciplines to work with ABMS Member Boards to grant MOC Part IV credit to physicians who are involved in those improvement efforts.

This session is intended to provide an overview of the Portfolio Program, including the standards and guidelines, and the process to become a Portfolio Sponsor.

9:30 am – 10:30 am **Sharing Provider Experience – Interactive Expert Panel — Roebbling Ballroom**
Lessons from the MOC and CME Providers

Facilitator: David W. Price, MD, FAAFP, FACEHP, Director of Medical Education, Colorado Permanente Medical Group and The Permanente Federation, Co-Director, Center for Health Education, Dissemination and Implementation Research, Professor of Family Medicine, University of Colorado Denver School of Medicine

Mayo Clinic

Allison K. Hartl, MA, Education Program Manager, Maintenance of Certification, Mayo School of Continuous Professional Development

Leanne M. Andreasen, MBA, FACEHP, Education Operations Manager, Maintenance of Certification, Mayo School of Continuous Professional Development, Mayo Clinic

University of Michigan

R. Van Harrison, PhD, Professor in, Department of Learning Health Sciences at the University of Michigan Medical School

University of Wisconsin

Teena M. Nelson, MHA, MOC Program Manager and Senior Outreach Specialist Performance Improvement, University of Wisconsin School of Medicine and Public Health, Office of Continuing Professional Development

Virginia Mason Medical Center

Bruce A. Nitsche, MD, Medical Director – CME, Attending Physician in Internal Medicine, Lewis and John Dare Center, Director ABMS Portfolio Program, Virginia Mason Medical Center

10:30 am – 10:45 am **Break — Roebbling Foyer**

10:45 am – 12:00 pm **Best Practice and Innovation presentations from accepted abstracts — Roebbling Ballroom**

Facilitator: Tanya Horsley, PhD, Associate Director, Research Unit, Royal College of Physicians and Surgeons of Canada

Whoops? Using Near-Miss Incidents to Learn and to Improve Practice

Gabrielle Kane, MD, EdD FRCPC, Medical Director UWMC Radiation Oncology, Residency Program Director UW Radiation Oncology, Alexander Rodney Muir Professorship in Radiation Oncology, Associate Professor Departments of Radiation Oncology & Medical Education and Biomedical Informatics, University of Washington

Collaboration Between Academic and Community Cancer Centers to Improve Molecular Testing in Lung Cancer

Melinda Somasekhar, PhD, Assistant Dean, Temple University School of Medicine, Office of CME

Creating the Framework to Link Scholarship to MOC and Quality Improvement Projects

Teena M. Nelson, MHA, MOC Program Manager and Senior Outreach Specialist Performance Improvement, University of Wisconsin School of Medicine and Public Health, Office of Continuing Professional Development

Evaluating a Complex Educational Intervention in a Complex Setting: A Developmental Approach to Assessing the Impact of a Morbidity, Mortality and Improvement Conference on Patient Care

Curtis Olson, PhD, Director of Research and Evaluation, Center for Continuing Education in the Health Sciences, Assistant Professor, Department of Medicine, Geisel School of Medicine, Dartmouth, and Editor-in-Chief, Journal of Continuing Education in the Health Professions

Four-Year CPD/CME Journey in Maintenance of Certification: How-to's in Professionalism, Self-Assessment, Practice Gaps, Education Needs and Quality Improvement Efforts

Leanne M. Andreasen, MBA, FACEHP, Education Operations Manager, Maintenance of Certification, Mayo School of Continuous Professional Development, Mayo Clinic

Allison K. Hartl, MA, Education Program Manager, Maintenance of Certification, Mayo School of Continuous Professional Development

12:00 pm – 12:30 pm **INFOCUS – Invited Presentation of SACME-Funded Research Projects — Roebbling Ballroom**

Peer Education with Intersecting Networks: The SACME Project in South Bronx Public Housing – Implementing the Diabetes Prevention Program (DPP) Among Those Most at Risk and their Healthcare Providers

Robert W. Morrow, MD, Principal Investigator, the NYS Academy of Family Physicians, and Health People: Community Health Institute

Through a generous grant from the Research Committee, our group has assembled a pilot study using peer education for different public sectors to bring the National Diabetes Prevention Program to those most vulnerable populations in Public Housing in the South Bronx, NY [*you were thinking maybe Montana?*] The pilot has allowed us to gain valuable experiences and coalition infrastructure for this Patient-Centered Outcomes Research project, and to complete an application for funding to PCORI to expand this project. Using mixed quantitative and qualitative methods, we will compare the use and effectiveness of local peer Coaches in Public Housing versus the same coaches and training in a medical setting. We will support this work with Academic Detailing in local medical

practices, and will query public health officials as to ways to make this preventive work succeed, and what obstacles we can expect. This presentation will explore the results of this pilot trial, which occurs under the auspices of the NYS Academy of Family Physicians.

Innovation Adoption following Continuing Education: A Mixed Methods Pilot Study of Oncology-Related Meetings

William Keith, PhD, Associate Director, Scientific and Medical Communications Laboratory, Professor of Communication, University of Wisconsin-Milwaukee

The primary aim of this project was to conduct a pilot study to determine which oncology-related CME program formats and communication strategies are most likely to motivate attendees to adopt innovative interventions into their practice. Between October 1st and March 1st, the research team observed and document over 40 CME-granting programs in interdisciplinary oncology. These programs included the Medical College of Wisconsin's Department of Surgery Grand Rounds, Froedtert Cancer Center's Head and Neck, Breast, and General Tumor Boards, and at the Bone Marrow Transplant Tandem national meeting. The research team evaluated these CME events or format, presentation content, presentation style, and participant engagement. Surveys designed to assess the likelihood that individual presentations would contribute to innovation adoption were distributed to all attendees. Preliminary findings indicate that presentation content and formats that encourage participants to participate in translational discussion; basic science and clinical trial data explicitly connected to case study data and/or reflections on clinical experience are more likely to encourage innovation adoption than other CME formats or modes of presentation.

Standardizing the Use of Academic Detailing to Improve Quality through a Systematic Review of the Literature and an Expert Consensus Process

Thomas J. Van Hoof, MD, EdD, CMQ, CCMEP, Associate Professor, University of Connecticut Schools of Nursing & Medicine

This presentation will describe a systematic review and expert consensus process about the content of academic detailing visits, the clinicians receiving such information, the communication process underlying visits, and the change agents meeting with clinicians in their practice locations.

12:30 pm – 2:00 pm **Lunch and Business Meeting — City View Ballroom**

2:00 pm – 2:30 pm **IN FOCUS – Invited Presentation of SACME-Funded Research Projects —
Roebling Ballroom**

Education Terminology and Typology Project: Highlights of Cycle 1, Performance Measurement & Feedback

Thomas J. Van Hoof, MD, EdD, CMQ, CCMEP, Associate Professor, University of Connecticut Schools of Nursing & Medicine

Simon Kitto, PhD, Director of Research, CPD, Faculty of Medicine, University of Toronto Assistant Professor, Department of Surgery, University of Toronto Scientist, Wilson Centre, University Health Network

This presentation will describe the methods and preliminary findings of a literature review and expert consensus process to develop a guideline to inform research and leadership using performance measurement and feedback as a continuing education strategy to improve patient care.

2:30 pm – 4:00 pm Breakout: **WORKSHOP 2 — City View 1 & 2**

Expanding the Role of CME/CPE Professionals to the World of Social Media

Alexander M. Djuricich, MD, Associate Dean for CME, Indiana University School of Medicine

This workshop will explore the use of social media within an overall context of medicine, with an emphasis on medical education. Participants will review relevant recent literature on the benefits and caveats of using social media within medical education. In true “workshop format”, participants will be encouraged to actually create a Twitter account and individually tweet their own content. Finally, participants will complete a commitment to change form relevant to their personal, professional use of social media.

2:30 pm – 4:00 pm Breakout: **WORKSHOP 3 (part I) — Roebling Ballroom**

Developing Effective Interprofessional QI Teams and Proposals: Strategies, Skills, and Processes

Tiffany Diers, MD, Associate Professor Internal Medicine-Pediatrics, University of Cincinnati College of Medicine
Jack Kues, PhD, Associate Dean for Continuous Professional Development, University of Cincinnati

Amy Short, MHSA, Program Director, Ohio Valley Sickle Cell Network, Department of Internal Medicine, University of Cincinnati College of Medicine

This workshop will describe the process of developing highly functional interprofessional teams to create quality improvement and educational projects, with a focus on the following topics: merging the concepts of team science with developing a QI-based educational activity; understanding the relationship between QI and systems change; putting together an effective team (developing value propositions for team members); balancing research, practice improvement, and outcomes; defining roles and responsibilities; strategies for

effective team development; writing teams; and transitioning at the close of a project. Participants will learn to develop projects in the context of existing and needed assets: from individual team members to external resources. Guidance will be provided on identifying dysfunctional processes and team members, with coaching on how to manage these and create a healthy team environment. The session will feature a case study reflecting our experiences developing project proposals related to QI-based RFPs. The workshop also includes strategies for developing teams and creating projects around existing expertise and resources.

4:00 pm – 4:15 pm **Break — Roebbling Foyer**

4:15 pm – 5:15 pm Breakout: **WORKSHOP 3 (part 2) — Roebbling Ballroom**
See above

4:15 pm – 5:15 pm Breakout: **Research Methods Discussion with PIs — City View 1 & 2**
Terminology and Context in Continuing Education: Efforts to Improve Appropriate Use of Interventions in Support of Education and Research

Simon Kitto, PhD, Director of Research, CPD, Faculty of Medicine, University of Toronto Assistant Professor, Department of Surgery, University of Toronto Scientist, Wilson Centre, University Health Network

Rachel E. Grant, RN, BScN, MN, Research Associate and Project Manager, Continuing Professional Development Faculty of Medicine, University of Toronto

In this session, authors will describe how this project utilizes literature and an expert consensus process to create precision around the conceptualization and implementation of educational interventions. This presentation will offer a description of a two-step hybrid methodology: 1) the application of the Chaffee model blended with a modified Delphi Technique that constitutes a novel expert consensus process; and 2) the conduct of a parallel process of a realist synthesis methodology to identify and characterize the relevant aspects of context that affect educational interventions.

Sunday, May 4

7:00 am – 8:30 am **Breakfast — Embassy Suites Atrium**

8:30 am – 10:15 am **HOT TOPICS in CME/CPD: Interactive Session — Roebling Ballroom**

Facilitator: **Mary G. Turco, EdD, MA**, Director, Center for Continuing Education in the Health Sciences, Director, Continuing Medical Education, Director, Global Health Initiatives, Dartmouth-Hitchcock, Assistant Professor of Medicine, The Geisel School of Medicine at Dartmouth

SACME/AAMC Harrison Report from 2013

Dave Davis, MD, Sr. Director, Continuing Education and Performance Improvement, Association of American Medical Colleges (AAMC), and Adjunct Professor, Department of Health Policy, Management, & Evaluation, and Department of Family and Community Medicine, University of Toronto

Who is Minding the AMSA Score Card in Your Institution?

Barbara E. Barnes, MD, Vice President of CME, Contracts and Grants, and Intellectual Property, Continuing Medical Education, Center for Continuing Education in the Health Sciences, University of Pittsburg Medical Center

Updates on the REMS Opioid Prescribing Project

Mary G. Turco, EdD, MA, Director, Center for Continuing Education in the Health Sciences, Director, Continuing Medical Education, Director, Global Health Initiatives, Dartmouth-Hitchcock, Assistant Professor of Medicine, The Geisel School of Medicine at Dartmouth

10:15 am – 11:15 am **RICME – Research presentations from accepted abstracts
Best Practice and Innovation presentations from accepted abstracts — Roebling Ballroom**

Facilitator: **Tanya Horsley, PhD**, Associate Director, Research Unit, Royal College of Physicians and Surgeons of Canada

Information Resource Availability and Use by Unaffiliated Practitioners in Predominantly Rural New Mexico

William F. Rayburn, MD, MBA, Associate Dean, Continuing Medical Education & Professional Development, Professor and Emeritus Chair, Department of Obstetrics & Gynecology, University of New Mexico School of Medicine

Learning from Teaching: Fostering Collaboration between UGME/GME and CME

Barbara E. Barnes, MD, Vice President of CME, Contracts and Grants, and Intellectual Property, Continuing Medical Education, Center for Continuing Education in the Health Sciences, University of Pittsburg Medical Center

Faculty Development for Teaching Quality Improvement & Patient Safety

Nancy Davis, PhD, Director, Practice-Based Learning and Improvement,
Association of American Medical Colleges (AAMC)

11:15 am – 11:45 am **Closing Remarks from the SACME President — Roebing Ballroom**

Ginny Jacobs, MEd, MLS, CCMEP, Director, Continuing Medical Education,
University of Minnesota

11:45 am **Meeting Adjourned**

12:00 pm – 2:00 pm **SACME Board Meeting (closed) — Captain Mary Green Boardroom
(Working Lunch)**

PRESENTER BIOGRAPHIES

Seth Anderson, MS, holds a BS in Information Systems, an MS in Educational Technology and graduate certificates in Human-Computer Interaction and Distance Learning, all from the University of Kentucky (UK). He currently works at the university's office for CME/CPE, UK Healthcare CECentral, as IT Manager and Associate Director. Mr. Anderson serves on the steering committees for Health Literacy Kentucky, the Kentucky Regional Extension Center, and the Kentucky Engagement Conference. He is a member of the Human Factors and Ergonomics Society and the Kentucky Rural Health Association. He also serves as editor of SACME's INTERCOM newsletter and is a member of the communications committee.

Leanne M. Andreasen, MBA, holds an enterprise-wide role as Operations Manager–Maintenance of Certification for the Mayo School of Continuous Professional Development. She provides support for Part I-IV Maintenance of Certification activities. Prior to this she served as Director for both the Mayo School of CME as well as Mayo Graduate School (PhD, Masters students). Ms. Andreasen began at Mayo Clinic in Mayo Medical Laboratories, with a brief tenure at St. Joseph's Hospital, Iowa, before returning to Mayo Clinic in Public Affairs/News Bureau and International Education. Ms. Andreasen considers it an honor to have served with the Alliance for CME and the Society for Academic CME as well as volunteer positions with Community Food Response-MN and AZ Transplant House. Her current interests include coaching/mentoring, design of self-assessment methods, and web-based learning. Ms. Andreasen received a BS in Business Administration from Winona State University-MN, and a MBA in Marketing from the University of St. Thomas-MN.

Alejandro Aparicio, MD, FACP, is a Board Certified General Internist and a Fellow of the American College of Physicians. He is a past President of the Illinois Geriatrics Society, the Illinois Medical Directors Association and the Illinois Alliance for CME (IACME). For approximately 20 years he practiced medicine in the north side of Chicago and was affiliated with Ravenswood Hospital Medical Center and Advocate Illinois Masonic Medical Center (AIMMC), where he was the Director of Medical Education, Designated Institutional Official and Associate Medical Director. For 10 of those years he was also Vice President for Medical Affairs at Ballard Health Care in Des Plaines, Illinois. He continues to see patients at a free clinic in Chicago.

He has been the Director of the Division of Continuing Physician Professional Development at the American Medical Association since 2004. His previous involvement with CME included chairing the AIMMC CME committee and the Advocate Health Care system wide CME committee. He has also served on the Chicago Medical Society CME Committee, its Subcommittee on Accreditation, as chair of the Illinois State Medical Society (ISMS) Committee on CME Accreditation for five years, and still serves as a CME surveyor for the state. In addition, he serves on the University of Illinois at Chicago College of Medicine (UIC-COM) Chicago campus Committee on CME and the College-wide Committee on CME.

He is a fellow of the Alliance for Continuing Education in the Health Professions and of the Institute of Medicine of Chicago and was a Presidential appointee to the 2005 White House Conference on Aging Policy Committee (the only physician in the committee), and served as Co-chair of its Health Subcommittee. He has received the ISMS CME Accreditation Service Award, the IACME Distinguished Service Award and the Robert Raszowski, MD, PhD, ACCME Hero Award among other honors.

Stephanie Armstrong, MA, is the Research and Evaluation Lead with the Division of Continuing Professional Development and the Department of Medical Education at the University of Manitoba. Though her background is in microbiology and anthropology, with research in basic and social sciences, her current research profile focuses on practice change following performance evaluation, international medical graduate retention and integration, assessment of unperceived knowledge gaps, interprofessional education, and assessment in competency-based postgraduate medical education.

JoAnn Babish, MSLS, is Associate Director of CME and Faculty Development at the Commonwealth Medical College in Scranton, PA. Ms. Babish has a degree in Library Science and prior to her present position, was Electronic Resources Librarian at TCMC. She also served for many years as Director of Library and CME Services at a community hospital in Scranton.

Jann Torrance Balmer, RN, PhD, was appointed as the first full-time Director for Continuing Medical Education of the University of Virginia School of Medicine in December 1990. In her role as Director for CME, the Office of Continuing Medical Education has demonstrated significant growth in meeting the educational needs of physicians and other healthcare professionals. Over the past 20 years, the number of accredited CME activities has grown to a yearly average of 220 activities.

Dr. Balmer served as the Past President and Board Member of the Alliance for Continuing Education in the Health Professions. She served as the editor for the **Best Practices in CME Handbook** distributed by the Alliance for CME for 7 years, and on the Board of Directors for the Global Alliance for CME. She also serves as a speaker at the Annual Meeting of the Alliance for CME and other CME meetings such as the CME Industry Task Force Meeting, the CME Congress and other selected organizations. Dr. Balmer now serves as a member of the ANCC Commission on Accreditation.

Dr. Balmer was actively involved as a volunteer for the Accreditation Council for Continuing Medical Education from 1993-2005. She served on the Accreditation Review Committee from 1994-2000, serving as vice chair in 1998, and chair in 1999 and 2000. During the year 2000, the ACCME made its first accreditation decisions using the new accreditation system. Dr. Balmer was named the 2003 Willard M. Duff, PhD Award for exemplary and long-term service to the ACCME and also awarded the Robert Raszowski, MD, PhD ACCME Hero Award in 2007. She holds a Bachelor of Science degree in nursing from the University of Pittsburgh, Master of Science in child health nursing from the State University of New York at Buffalo, and a PhD in higher education administration from the University of Pittsburgh.

Barbara E. Barnes, MD, MS, graduated with a BS degree in Psychology from the University of Maryland, received her MD from the MS Hershey Medical Center of the Pennsylvania State University, and obtained an MS in Health Services Administration from Gannon University. She is board certified in internal medicine and a fellow of the American College of Physicians. In her current roles of Associate Vice Chancellor for Continuing Education and Industry Relationships and Associate Dean for CME at the University of Pittsburgh, Dr. Barnes coordinates continuing education programs for the six health sciences schools, and oversees the CME program for the School of Medicine. She is also Vice President of Sponsored Programs, Research Support, and Continuing Medical Education for the University of Pittsburgh Medical Center (UPMC). In this role, she oversees industry-developed clinical trials, extramural funding, and research billing compliance for the health system. She co-chairs of the task force responsible for implementation of the industry relationships policy at the university and health system.

Dr. Barnes is past president of the Society for Academic CME, former member of the board of directors of the Alliance for CME, past chair of the board of directors and surveyor for the Accreditation Council for Continuing Medical Education, vice chair and surveyor for the Pennsylvania CME Commission, and continuing education surveyor for the Accreditation Council for Pharmacy Education. For the Association of American Medical Colleges she served on the Task Force on Industry Funding of Medical Education, chaired the continuing education section of its Group on Educational Affairs, was a member of its Council of Academic Societies and is chair of the Forum on Conflict of Interest in Academe.

Kathy Chappell, PhD, RN, has over 25 years of nursing experience including clinical practice as a direct care nurse in critical care and emergency nursing; hospital administration as an assistant head nurse and hospital supervisor; project management for programs such as the Magnet Recognition Program, NDNQI, quality improvement and shared governance; and hospital-system strategic planning for support of professional nursing practice including nursing clinical education, nursing student recruitment and research. As the Director of the Accreditation Program, Dr. Chappell is responsible for the accreditation of organizations as providers and approvers of continuing nursing education (Primary Accreditation), joint accreditation of organizations providing interprofessional continuing education (Joint Accreditation), accreditation of courses validating nursing skills or skill sets (Nursing Skills Competency Program), and accreditation of residency and fellowship programs for registered nurses and advanced practice registered nurses (Practice Transition Accreditation Program). Dr. Chappell received her baccalaureate in nursing with distinction from the University of Virginia, her masters of science in advanced clinical nursing from George Mason University and her doctorate in nursing from George Mason University.

Dave Davis, MD, CCFP, FCFP, FRP(hon), is Senior Director, Continuing Education and Performance Improvement at the Association of American Medical Colleges, and Adjunct Professor, Department of Health Policy, Management & Evaluation and Department of Family and Community Medicine at the University of Toronto. Currently the AAMC's lead for continuing healthcare education and improvement, Dr. Davis was a family physician in Ontario, Canada for nearly forty years. For much of that time, he was active in CME as: chairman of an all-staff inter-professional CE program at a community hospital; director of Continuing Medical Education and subsequently chair of continuing education at McMaster University's Faculty of Health Sciences; associate dean, continuing education, and founding director of the Knowledge Translation Program in the Faculty of Medicine, University of Toronto; and chairman of Ontario's Guidelines Advisory Committee.

Dr. Davis has also developed a comprehensive competency assessment program for the provincial licensing body, and helped launch a center for faculty development and a Mini-Med School at the University of Toronto. Emphasizing a rigorous, outcomes-based focus on CME, he has acted as PI, Co-PI or investigator on grants totaling several million dollars. This emphasis has seen the publication of over 100 peer-reviewed papers, dozens of abstracts, book chapters, and two major books on CME practices, and presentations on four continents. His (and colleagues') 1995 *JAMA* systematic review of the effect of CME interventions is widely cited as a seminal study in this field. Finally, Dr. Davis has been chair or president of national or provincial Canadian organizations, two North American organizations (the Alliance for CME and the Society for Academic CME) and the Guidelines International Network, a global organization dedicated to the development and implementation of evidence-based clinical practice guidelines.

[Nancy L. Davis, PhD](#), joined the Association of American Medical Colleges (AAMC) as Director, Practice-Based Learning and Improvement in 2011. Her primary responsibilities include the Aligning and Educating for Quality (ae4Q) and Teaching for Quality (Te4Q) initiatives.

She was a founder and served as Executive Director of the National Institute for Quality Improvement and Education (NIQIE), dedicated to improving patient care through the integration of quality improvement and continuing professional education.

Previously, Dr. Davis served as Director of CME for the American Academy of Family Physicians, where she championed evidence-based and performance improvement CME. Her work with the AMA contributed to the current CME credit designation for point of care and performance improvement CME activities.

She has served as CME Committee Chair for the American College of Medical Quality, on the Board of Directors of the Alliance for CME, is a past president of the Society for Academic CME and has served as Chair of the Council of Medical Specialty Societies CME Directors' Group. She is a Fellow of the Alliance for Continuing Education in the Health Professions and is credentialed as a Certified CME Professional and a Certified Professional in Healthcare Quality. She has an appointment to the National Board of Medical Examiners and serves on their Public Stakeholders Committee.

Dr. Davis earned a PhD in Adult and Continuing Education at Kansas State University in 1998. She has a master's degree in healthcare administration and a bachelor's degree as a physician assistant. An experienced clinician, educator and researcher, she has taught graduate students, presented in numerous national forums and published in peer reviewed journals, including the Journal for Continuing Education in the Health Professions, Teaching and Learning in Medicine, Medical Teacher and the American Journal of Managed Care. She co-authored (with Dave Davis) a *Guide to CME for the Association of Medical Education in Europe*, which is being translated into several languages, and co-authored a book chapter on *Teaching Quality Improvement in Medical Education* for the American College of Medical Quality.

[Tiffany Diers, MD](#), is board-certified in Internal Medicine and Pediatrics and is an attending physician in the University of Cincinnati Internal Medicine-Pediatrics practice, a combined faculty-resident practice that has achieved designation as a Level 3 Patient Centered Medical Home from the National Center for Quality Assurance. She has received specialized training in healthcare improvement through Cincinnati Children's Hospital Medical Center's Intermediate Improvement Science Series and directs a HRSA-funded Sickle Cell Treatment Demonstration Project, the Ohio Valley Sickle Cell Network. Additionally, she is the Principle Investigator on two Quality Improvement research projects seeking to improve chronic pain care in primary practice.

[Alexander M. Djuricich, MD](#), grew up in Chicago, IL. After attending Northwestern University as an undergraduate, he matriculated at Loyola University Stritch School of Medicine, graduating in 1994. He then embarked on a residency in combined Medicine-Pediatrics at the Indiana University School of Medicine, completing this in 1998.

After spending a few years in primary care at a community hospital in the Detroit area, Dr. Djuricich completed a primary care faculty development fellowship program at Michigan State in 2001. He returned to Indiana University School of Medicine (IUSM) in 2001, embarking on a career as a clinician educator. He began as the associate program director of the Med-Peds residency in 2002, becoming program director in 2006, a position he continues to hold.

Dr. Djuricich has had an interest in the education of quality improvement, serving as the Medical Director of Quality Improvement for Riley Hospital for Children from 2007 through 2011. It was this

interest in quality improvement that led him to his current position as Associate Dean for CME at the IUSM, which he began in November of 2011. Dr. Djurichich's scholarly areas of interest include quality and performance improvement, social media within medical education, and using emerging technology within medical education.

Todd Dorman, MD, FCCM, is Board Certified in Internal Medicine, Anesthesiology and Critical Care Medicine. He is the Senior Associate Dean for Education Coordination and the Associate Dean for Continuing Medical Education for the Johns Hopkins School of Medicine. He is a Professor and Vice Chair for Critical Care in the Department of Anesthesiology and Critical Care Medicine and has joint appointments as a Professor in Internal Medicine, Surgery and The School of Nursing. Previously Dr. Dorman served as the Director of the Division of Adult Critical Care Medicine, Co-Director of the Surgical Intensive Care Units, Medical Director of the Adult Post-anesthesiology Care Units and Medical Director of Respiratory Care Services. Presently he serves on the institutional Steering Committees for Innovation and Safety and for the Simulation Center. He also co-chairs the committee on interactions with industry and serves on the conflict of commitment committee.

Dr. Dorman has served on the Anesthesiology and Respiratory Device Committee of the FDA and was a member of the Institutes of Medicine Committee on Conflict of Interest in Education, Research and Practice. He serves as the editor of several scientific journals and on numerous editorial boards including *CCM* and *JCEHP*. He has an extensive background in association leadership and has served as the President of the American Society for Critical Care Anesthesiologists (ASCCA) and President of the Society for Academic CME (SACME). He is also a member of the American Society for Association Executives (ASAE). He serves on the Board of Directors of the Accreditation Council for CME (ACCME) and started his service in March 2012.

Dr. Dorman has lectured extensively on the Value of CME. He has also delivered keynote and plenary lectures on leadership and helped establish the inaugural Summer Leadership Institute for SACME.

Dr. Dorman joined SCCM in 1988 and has served on and subsequently chaired numerous committees and task forces. He was recently elected as Treasurer of SCCM, a position which places him in a position to be president of SCCM starting in 2016. He also has participated in and helped lead guideline writing groups for the American College of Critical Care Medicine for which he was inducted as a member in 1997.

Moshe Feldman, PhD, is an Assistant Professor in the Office of Assessment and Evaluation Studies at the Virginia Commonwealth University School of Medicine. He received his doctorate in Industrial and Organizational Psychology from the University of Central Florida. Dr. Feldman has over 10 years of experience developing training, evaluations, and simulations to support and study organizational performance in the military, healthcare, and government sectors. Currently, his work focuses on the application of simulation, organizational change management, and human systems integration to improve organizational performance and patient safety in healthcare.

Rachel E. Grant, RN, BScN, MN, is a Research Associate and Project Manager (SACME Terminology Project) at Continuing Professional Development within the Faculty of Medicine at the University of Toronto. Rachel has experience in designing and facilitating workshops for groups such as the *Council of Ontario Faculties of Medicine* and the *American Nurses Credentialing Center*.

Ms. Grant's research interests primarily pertain to interprofessional education with a nursing focus. She has a particular interest in cultural, historical, and structural factors that shape interprofessional groups.

Kevin Graves, PMP, MBA, began working at IBM in 1999 as a Solution Project Manager. In 2009 he joined the American Board of Family Medicine, American Board of Internal Medicine, and the American Board of Pediatrics to start the Multi-Specialty MOC Portfolio Approval Program, where Kevin currently serves as the Program Manager.

Mr. Graves also manages special projects for the American Board of Family Medicine, American Board of Internal Medicine, and the American Board of Pediatrics.

R. Van Harrison, PhD, is a Professor in the Department of Learning Health Sciences at the University of Michigan Medical School. His training as a social psychologist emphasized individual behavior in organizational settings. A major interest is the evaluation and improvement of physician performance in the delivery of health care, including developing clinical guidelines, developing measures of clinical performance, and designing changes at the individual and organizational levels to improve care. His educational activities include teaching systems and quality improvement to physicians, residents, and medical students.

Allison K. Hartl, MA, is a Program Manager in the Mayo Clinic School of Continuous Professional Development. She provides support for Part IV Maintenance of Certification activities and manages Mayo Clinic's Quality Review Board. Prior to her time at Mayo Clinic, Ms. Hartl served as Program Coordinator for the National Rural Health Resource Center where she supported regional and national performance improvement and quality improvement programs and provided on-site and web-based consultations, training sessions, and technical assistance to rural hospitals and state/federal partners of rural health. Ms. Hartl earned BAs (Sociology and Cultural Studies/Comparative Literature) from University of Minnesota, and an MA (Management) from The College of St. Scholastica.

Susan Hildebrandt, MA, is the Director of Stakeholder Engagement for the Patient-Centered Outcomes Research Institute (PCORI). She is responsible for leading PCORI's engagement with clinicians, policy makers, professional audiences, and the broader healthcare community. Ms. Hildebrandt is an experienced government relations professional with longstanding knowledge of patient-centered research. She has more than 25 years of communications, public policy, and healthcare advocacy experience. Most recently, Ms. Hildebrandt was Assistant Director for Government Relations at the American Academy of Family Physicians (AAFP).

At the AAFP, Ms. Hildebrandt worked on policy issues including comparative effectiveness research, healthcare reform, delivery system reform, research, and health information technology. She also oversaw the AAFP's grassroots program to engage family physicians on health policy issues. Ms. Hildebrandt has also held policy positions at the American College of Obstetricians and Gynecologists and on Capitol Hill. She earned her bachelor's degree with distinction in political science and German from the University of Michigan, and master's degree at the University of Pennsylvania.

Tanya Horsley, PhD, is Associate Director, Research Unit, Royal College of Physicians and Surgeons of Canada. She joined the Royal College in 2008 and joined the CPD team with a focus on advancing and conducting research in continuing professional development. Her research program focuses broadly on the discourses, development, and evaluation of learning strategies within the context of one's practice (learning 'on the run') and, more specifically, components of skills required for lifelong learning that include how physicians articulate (e.g. structure, type, frequency) and address questions (e.g. point of care, evidence used, information access) both as individuals and as part of a complex healthcare system/team. She is also dedicated to improving methodological approaches to evaluation and reporting within medical education research, focused primarily on randomized trials and evidence syntheses.

Dr. Horsley is appointed to the Department of Epidemiology and Community Medicine, Faculty of Medicine, at the University of Ottawa, Chair, Research Committee for SACME and an Associate Editor for the Journal of Continuing Education in the Health Professions (JCEHP).

Ginny Jacobs, MEd, MLS, CCMEP, is the Director of the Office of Continuing Professional Development at the University of Minnesota, the home of the National Center for Interprofessional Practice and Education. She is proud to lead a talented team of professionals whose mission is to deliver accreditation and education consulting services ultimately focused on improving the quality of patient care and healthcare systems.

Prior to joining the Medical School, Ms. Jacobs served as Associate Director of the Executive Development Center (EDC) within the business school, in addition to working as a change agent in the financial services, publishing, and survey/assessment industries. She possesses a Master's in Education and an advanced degree focused on the effective use of technology in education. Ms. Jacobs has enjoyed various leadership roles within the CME/CPD community. She most recently served as Chair of the Medical School section of the Alliance for Continuing Education in the Health Professions (ACEHP). She is currently President-elect of the Society for Academic Continuing Medical Education (SACME), a membership organization whose mission it is to promote research, scholarship, evaluation and development within the CME/CPD community.

Gabrielle M. Kane, MB, EdD, FRCPC, is a Radiation Oncologist at the University of Washington, Seattle, specializing in Sarcoma and palliative radiation. Her major academic interest is in health professional learning and improvement, especially within the clinical environment.

William Keith, PhD, is Associate Director of the Scientific and Medical Communications Laboratory and a Professor of Communication at the University of Wisconsin-Milwaukee. His primary research areas include communication and argumentation in scientific and medical contexts, as well as the history of public deliberation in various contexts.

Simon Kitto, PhD, is a medical sociologist who has been working in medical education research, sociology of surgery, and health services since 2002. His main research interests are studying how structural, historical and socio-cultural variables shape interprofessional clinical practice, educational settings and activities. Often, this involves studying issues related to identity/role expectation and formation, competency acquisition/ performance and profession-based evidence/knowledge production. He is the Director of Research in Continuing Education and Professional Development, an

Assistant Professor at the Department of Surgery and a Scientist at The Wilson Centre, University Health Network, University of Toronto. Dr. Kitto is also a Visiting Scholar at the Medical Case Centre, Karolinska Institutet, Stockholm, Sweden, and has held a position as a Senior Lecturer in the Department of Surgery at Monash University since 2004.

Mila Kostic, FACEHP, is the Director of the Continuing Medical Education Program at the Perelman School of Medicine, University of Pennsylvania. Ms. Kostic is engaged in the profession nationally and internationally and serves on the committees of the Alliance for Continuing Education in the Health Professions (ACEHP), Mid-Atlantic Alliance for CME (MAACME), and the Association for Hospital Medical Education (AHME). She is a past Regional Representative and a member of the Board of Directors of the Society for Academic CME (SACME) and the current Program Chair for the Society. She also contributes as a reviewer to the Journal of Continuing Education in the Health Profession (JCEHP) and to the GEA group of the AAMC. She is a recipient of several professional awards and a Fellow of the Alliance for Continuing Education for the Health Professions and continues to contribute to the field with publications and invited presentations.

Since 2008, Ms. Kostic's work and interests have focused on advancing CME/CPD as a meaningful element of improvements and the delivery of safe and equitable team-based healthcare in a variety of practice settings and, in particular, in the context of regional academic medical centers, and the communities and the public they serve. To this end she has worked on developing a number of Performance Improvement CME projects in a variety of clinical contexts, using an array of delivery formats that range in scope from institutional to national. She is spearheading the development of the MOC Portfolio Program for the University of Pennsylvania Health System and is involved in studying the effects of the innovation lab project *Performance Improvement in Action*, in the context of patient-centered and system-wide improvements.

Jack Kues, PhD, is Associate Dean for Continuous Professional Development at the University of Cincinnati. The Center for Continuous Professional Development, in which the CME program is housed, works closely with faculty across the four colleges in the AHC (medicine, nursing, pharmacy, and allied health sciences) to develop interprofessional initiatives that train faculty and students in interprofessional teams using clinical environments in the university health system and the community. With over 30 years of experience as a program evaluator and social/behavioral researcher, he has extensive expertise and experience in applying quantitative and qualitative methodologies to assess the impact of educational programming, and continues to design and implement programs to improve the delivery of healthcare and patient outcomes through academic/community partnerships.

Tom McKeithen, MBA, BS, has 34 years of experience in healthcare, medical education, organizational development, quality improvement, and qualitative research. As a founding partner of Healthcare Performance Consulting (HPC), he works with various clients including pharmaceutical companies, managed care organizations, employer healthcare coalitions, and hospitals. HPC projects involve clinician assessments for educational needs and outcomes studies. He sits on boards or committees of various healthcare, professional, and charitable organizations including Nemours Clinic, Alliance for CME, American Cancer Society, Big Brothers, and Grace Anglican Church.

Sarah K. Meadows, MS, CCMEP, is Manager, Accreditation and Programs for the Office of Professional Education at National Jewish Health in Denver, Colorado. National Jewish Health has been accredited by the ACCME since its inception in 1984; in December 2011, National Jewish Health received Accreditation with Commendation from the ACCME. They are also an accredited continuing pharmacy education provider through the ACPE, and continuing nursing education provider through the CBRN.

Ms. Meadows has been in the CME industry for 11 years, and has been a Certified CME Professional (CCMEP) for five years. She received her Master of Science in Community Services from Michigan State University. Ms. Meadows is currently on the NC-CME Board of Directors and is Editor of the NC-CME weekly newsletter, the CCMEPress. She is President-Elect of the Colorado Alliance for Continuing Medical Education (CACME). Previously, Sarah was Director of Education for intellyst Medical Education.

George C. Mejicano, MD, MS, received his medical degree from the University of Illinois in 1990. After finishing his clinical training at the University of Wisconsin Hospital and Clinics, he became – and remains – board certified in both internal medicine and infectious diseases. He is currently a Professor of Medicine in the Division of Infectious Diseases at Oregon Health & Sciences University (OHSU). His clinical interests include travel medicine, antibiotic resistance, and emerging infectious diseases. From 2003-04, Dr. Mejicano served on the Board of Scientific Counselors at the Centers for Disease Control and Prevention (CDC). In addition, he was the Interim Head of the Section of Infectious Diseases at the University of Wisconsin School of Medicine and Public Health from 2007-08.

In 1996, Dr. Mejicano received a Master of Science degree in adult and continuing education from the University of Wisconsin. His educational interests include curricular design, needs assessment and educational outcomes, and he has done research on physician assessment and how education can lead to improvements in medical practice. In 2002, he was awarded the Felch Award for Research in Continuing Medical Education (CME) by the Alliance for CME. In addition, Dr. Mejicano has received numerous teaching awards from students, residents, and faculty peers during his career.

Dr. Mejicano currently serves as the Senior Associate Dean for Education at Oregon Health & Sciences University where he oversees the entire educational portfolio for the OHSU School of Medicine. He is the principal investigator for the OHSU proposal that was awarded \$1 million by the American Medical Association to transform the school's undergraduate medical education curriculum.

Prior to his appointment at OHSU, Dr. Mejicano served as the Associate Dean for Continuing Professional Development at the University of Wisconsin. He is a sought-after speaker who has given many national and international presentations related to medical education. He has served on the Board of Directors of the Accreditation Council for Continuing Medical Education (ACCME) and is the recipient of the Robert Razkowski "Hero Award" from the ACCME. In addition, he has served as a CME consultant for the American Board of Medical Specialties and has served on various task forces for the Association of American Medical Colleges in projects related to quality improvement and professional development. Lastly, he served as the President of the Alliance for Continuing Education in the Health Professions in 2011-12.

Robert (Bob) Morrow, MD, graduated with a BA in English Literature from Yale College (1970), received an MD from Mt. Sinai School of Medicine in NYC (1974), and did his residency training at the Residency in Family Practice and Social Medicine (1977). He is Board Certified in Family Medicine and has been in the independent practice of Family Medicine since 1980. He also works as an Associate Director for Interventional CME in the Center for CME at the Albert Einstein College of Medicine. He is the current Northeast Regional Representative of SACME. He has published with his group, and a broad coalition, a

research project on implementation of a diabetes registry in the Journal of Continuing Education in the Health Professions. He is active in the American Academy of Family Physicians on a State and Regional level, and has been on the NYSAFP's planning committees for conferences for more than ten years. He is an active reviewer and mentor for the Patient Centered Outcomes Research Institute as a stakeholder.

Dr. Morrow is interested in educational methods that incorporate practice improvement, patient outcomes, and the use of media and health IT, particularly patient-centered registries, electronic health records, and prevention strategies. He focuses on building networks of peer educators to disseminate education in ways that implement meaningful changes in how patients and communities do. He is currently engaged in a project in his community in the Bronx to implement the National Diabetes Prevention Program using local lay coaches and academic detailing; the design of this project is supported by a grant from SACME's Research Committee. He also kayaks whenever plausible.

Teena Nelson is the MOC Program Manager and PI-CME lead at the University of Wisconsin (UW) School of Medicine and Public Health (SMPH). She has been in this role since 2007 and prior to that, worked on primary care performance improvement at the University of Wisconsin Hospital and Clinics. Ms. Nelson earned her undergraduate degree in Education at the University of Wisconsin-Madison in 1999, and her Master's degree in Healthcare Administration from AT Still University of Osteopathic Medicine in 2009. Ms. Nelson also served nine years in the US Army as a combat medic and medical records specialist.

Bruce A. Nitsche, MD, is a board certified Internal Medicine specialist. Although he is "grandfathered," having been Board Certified in 1983, he is currently, "Meeting Maintenance of Certification Requirements: YES," and he is planning his own Performance Improvement project to meet MOC-IV requirements.

Dr. Nitsche has maintained a busy Primary Care Practice for 30 years, giving him a unique perspective as both a provider and a recipient of CME. He has spent his entire career at Virginia Mason in Seattle where he has been actively involved in adult education and quality improvement. He has been the Medical Director of CME for 15 years and also sits on the Quality Assurance Committee, directs Virginia Mason's ABMS associated Portfolio Program, and is an active member of the Washington State Medical Association's CME committee.

James Norton, PhD, is Associate Dean for Educational Engagement and Director of the University of Kentucky HealthCare CECentral. Dr. Norton is responsible for the management of the College of Medicine's educational activities beyond the Lexington campus, spanning the continuum of education from health career pipeline efforts to continuing medical education. In this role, Norton also oversees the Rural Physician Leadership Program's regional clinical education sites in Morehead and Murray, providing general supervision, strategic planning guidance and public advocacy. He also serves as director of UK HealthCare CECentral - the administrative unit responsible for managing continuing education for physicians and pharmacists within and outside of the university.

Jason Olivieri, MPH, is Director, Educational Strategy & Outcomes Services for Imedex LLC, which is an accredited CME provider. Mr. Olivieri has worked solely in educational outcome measurement (EOM) since 2004. He has published several articles related to EOM and has presented at the annual Alliance for Continuing Education in the Health Professions meeting. Mr. Olivieri also maintains an EOM blog, (www.assessCME.wordpress.com).

Curtis Olson, PhD, is the Director of Research and Evaluation in the Center for Continuing Education in the Health Sciences and Assistant Professor in the Department of Medicine at Geisel School of Medicine at Dartmouth. He earned his doctorate in adult and continuing education from the University of Wisconsin-Madison. He has more than 20 years of experience designing, implementing, and evaluating medical education. Dr. Olson is also Editor-in-Chief of the Journal of Continuing Education in the Health Professions. As Editor, he contributes to the development of the research agenda in continuing education and definition of standards for research and evaluation in the field.

Mellie Villahermosa Pouwels, MA, joined ABMS in 2009 as the program director of the Maintenance of Certification® (MOC) Support Program. In 2011, Ms. Pouwels was promoted to Vice President, MOC Educational and Support Services, and she assumed an increased level of responsibility for providing ongoing leadership and direction for the continued growth and development of ABMS' MOC services. Currently, she holds the title of Vice President, Academic Programs and Services, referring to her role in the development of ABMS' programs and services related to certification and continuing certification.

Ms. Pouwels has almost 20 years of experience in continuing medical education, as well as experience in medical student education and community-based training programs. Prior to her position with ABMS, she held senior positions with the Radiological Society of North America and the Northwest Missouri Area Health Education Center.

Ms. Pouwels is a member of the Alliance for Continuing Education in the Health Professions (ACEHP) and has presented at several ACEHP Annual Conferences on faculty development issues, Internet-based CME, and MOC. On a regional level, Ms. Pouwels has served as a President of the Illinois Alliance for Continuing Medical Education (IACME). She holds a master's degree in counseling from Loyola Marymount University and a bachelor's degree in Art History from the University of Notre Dame.

David W. Price, MD, FAAFP, FACEHP, is a board certified Family Physician who has been with the Colorado Permanente Medical Group (CPMG) since 1988. He currently is the CPMG Director of Medical Education and a physician investigator with the Kaiser Permanente Colorado Institute of Health Research, (where he also is co-director of the Center for Health Education, Dissemination and Implementation research). Dr. Price is also Director of Medical Education for The Permanente Federation and the Kaiser Permanente Care Management Institute in Oakland, CA. A Professor of Family Medicine at the University of Colorado Denver Health Sciences Center, Dr. Price has also been active in the Colorado (Past-President) and American Academies of Family Physicians (delegate, committee memberships). Dr. Price served on the American Board of Family Medicine (ABFM) Board of Directors from 2003-2008, where he chaired the R&D and Examination (Maintenance of Certification) committees, and was ABFM Board Chair from 2007-2008. He currently serves on the board of Directors of the Accreditation Council for Continuing Medical Education and is Chair-elect of the AAMC section on Continuing Education and Improvement. Dr. Price has authored or co-authored over 40 peer-reviewed publications, and has given numerous local, state, and national CME presentations on a variety of topics.

William Rayburn, MD, MBA, a distinguished professor at The University of New Mexico, is the Associate Dean of Continuing Medical Education and Professional Development and emeritus chair of obstetrics and gynecology. A nationally recognized maternal-fetal medicine specialist, he is clinically active with

patients having complicated pregnancies. Dr. Rayburn is the recipient of several teaching awards and has been continuously funded for his research, which includes more than 600 peer-reviewed journal articles and abstracts presented at national scientific meetings.

Deborah A. Samuel, MBA, FACEHP, is the Director, Division of CME at the American Academy of Pediatrics (AAP) in Elk Grove Village, IL. Having been with the AAP for 16 years, Ms. Samuel has served the organization in other roles, including as the Manager, Education & Accreditation Services and a CME Manager.

Ms. Samuel has been a member of the Alliance for Continuing Education in the Health Professions and Society for Academic CME (SACME) for many years and has presented on various topics, including implementation of commitment to change contracts in live CME, joint providership, test item writing activities, commercial support, funding of CME, association and industry interactions, and CME program best practices. She has served as Leader of the Alliance's Medical Specialty Societies (MSS) Member Section (2009-2011) and as a co-leader of the Alliance's MSS/Industry Alliance for Continuing Education Working Group (2009-2012), served on the planning committee and as a faculty member at the Alliance's MSS Member Section Meetings, co-facilitated MSS "communities of practice" breakouts at past Annual Conferences of the National Task Force on CME Provider/Industry Collaboration, and served as a faculty member at the Accreditation Council for CME's *CME as a Bridge to Quality™* Accreditation Workshops. In April 2013, Ms. Samuel became President of SACME and previously served the organization as a Central Region Representative and as chair of the Membership Committee.

Ms. Samuel earned a Bachelor of Arts degree from DePaul University (Chicago) and a Master of Business Administration from Northern Illinois University.

Marianna Shersheneva, MD, PhD, is the Director of Educational Development and Research at CME Enterprise. She is also the Evaluation and Assessment Specialist for the Office of Continuing Professional Development, University of Wisconsin School of Medicine and Public Health. In addition to her medical degree, Dr. Shersheneva received a doctorate in Continuing and Vocational Education. She has unique expertise in instructional design, development of innovative continuing medical education activities and resources, and qualitative research methods and has authored over 20 papers devoted to medical education, educational measurement, program evaluation, and improvement of clinical practice.

Amy Short, MHSA, is Program Director of the Ohio Valley Sickle Cell Network, within the Department of Internal Medicine at the University of Cincinnati College of Medicine. She is a Six Sigma Black Belt Quality Improvement expert with almost ten years of successful process redesign and improvement projects in a large urban academic medical center. With experiences on both sides of the quality equation – the identification, design, and testing of improvements balanced against the demands of running a safe, efficient, and cost effective operation in the ambulatory setting – she has a unique understanding of the dynamic tension involved. She has worked with multi-disciplinary teams to drive improvement in diverse areas such as patient throughput, radiology dictation turnaround time, improving chronic pain care and admitting department decision making. These experiences have taught her how to develop a highly engaged team to improve healthcare delivery in carefully selected arenas.

Steve Singer, PhD, is the Director of Education and Outreach at the Accreditation Council for Continuing Medical Education (ACCME), the nonprofit organization responsible for accrediting US institutions that offer continuing medical education (CME) to physicians and other health care professionals. Dr. Singer oversees development of programs and resources to support the national system of accredited CME providers, ACCME-recognized state accreditors, and accreditation volunteers. Prior to the ACCME, Dr. Singer held a senior management position at an ACCME-accredited provider where he directed the development of nationally-focused educational initiatives for health care teams.

Dr. Singer has served in leadership roles of a number of CME professional organizations and has been a frequent author and presenter for national publications and conferences, including the Alliance for Continuing Education in the Health Professions, the Association for Hospital Medical Education, and the National Association of Medical Staff Services. Dr. Singer has authored curricula in medicine, biotechnology, middle school science education, and has served as an advisor to Chicago's Museum of Science and Industry and the Illinois Department of Commerce and Community Affairs. Dr. Singer serves as a board member for the Center for Jewish Genetics and also for Continuum Theater, a Chicago-based arts organization. Dr. Singer received his doctorate in neuropharmacology from the Stritch School of Medicine.

Dr. Melinda Somasekhar, PhD, received her doctorate in Microbiology and Immunology from Cross Infection Reference Laboratory, Colindale, London and Delhi University. Her post-doctoral studies included study of tumor viruses and the role of steroid receptors in gene regulation and immunology at UW-Madison. In 1986, she moved to Iowa Medical School as an Assistant Professor where she taught Medical, Dental, Nursing and graduate students and ran a lab of two graduate students and a technician. Her research interest included studying the role of steroid receptors and growth hormones in breast cancer and gene regulation.

Dr. Somasekhar moved to Eli Lilly research labs in 1989 where she was heading a mammalian genetics program with special emphasis on cardiovascular disease. She also worked at Merck and Baxter research laboratories and was involved in cardiovascular and cancer research. In 1996, she moved to the sales and marketing division of Merck and was involved in the medical education of physicians in cardiovascular, pulmonary, pain management and vaccine areas. She moved to Wyeth in 2001 and was involved in the development of a road map and standard operating procedures for medical education. She also planned and managed medical education in rheumatology, orthopedic surgery, vaccines, and women's health. In 2005, she moved to Temple University School of Medicine as the Director of the CME department and was promoted to Assistant Dean of education in 2007.

Mary G. Turco, EdD, is Assistant Professor of Medicine at the Geisel School of Medicine at Dartmouth (Geisel) and Director of the Center for Continuing Education in the Health Sciences and the Continuing Medical Education (CME) Program in the Dartmouth-Hitchcock (D-H) health system (<http://med.dartmouth-hitchcock.org/ccehs.html>). Her responsibilities include not only overseeing Geisel's and D-H's CME Program, which has earned *accreditation with commendation* from the ACCME, but also supporting their Continuing Nursing Education, Graduate Medical Education, and Undergraduate Medical Education programs.

Dr. Turco teaches at the undergraduate, graduate and continuing medical education levels and conducts research to assess and improve medical, nursing and inter-professional continuing education. Current projects include an Association of American Medical Colleges (AAMC) *Aligning Education for Quality* (Dartmouth ae4Q) project with specific activities to *Improve Communication around End of Life Care*; creating a model *Morbidity, Mortality and Improvement Rounds*; and a project to *Improve*

Regional Cultural Awareness and Health Disparities. She has authored published articles and a chapter on CME. She co-directs D-H's Global Health Initiatives and supports continuing education projects with Partners in Health in Haiti and with the Indian Health Service in the US.

Outside Dartmouth Dr. Turco is a member of the AAMC Steering Committee on Integrating Quality and Education and, since 2008, has helped to organize the annual *AAMC Integrating Quality Meeting*. She is a member of the AAMC-SACME Joint Working Group. During 2014-15 she is president-elect of the Society for Academic Continuing Medical Education (SACME) and one of SACME's representatives to the Conjoint Committee on Continuing Education Steering Committee for the FDA's Risk Evaluation Mitigation Strategy (REMS) on Opioid Prescribing.

Dr. Turco holds a doctorate from the Harvard University Graduate School of Education, a Master's from Dartmouth College, and Bachelor's from Simmons College. She has held academic appointments at both Dartmouth College and Harvard University.

Thomas J. Van Hoof, MD, EdD, CMQ, CCMEP, is an Associate Professor in the University of Connecticut (UCONN) Schools of Nursing and Medicine, serving on faculty at UCONN since 1996. He received his medical and psychiatric training at the UCONN School of Medicine, and he completed a fellowship in medical ethics at Harvard Medical School. Additionally, Dr. Van Hoof earned a master's degree in Education from UCONN and a doctoral degree in Educational Administration from Columbia University. He holds national certifications in medical quality and in medical education.

Dr. Van Hoof previously served as the Associate Dean of Continuing and Community Education at the UCONN Health Center, and since 1997, he has worked as a Senior Scientist at Connecticut's Medicare-designated Quality Improvement Organization, focusing on the design, implementation, and evaluation of educational interventions to improve quality and to promote equity. His current research and teaching interests relate to the use of educational interventions to change clinician behavior in the context of primary care, with a particular interest in the care of vulnerable patient populations. Dr. Van Hoof is integrally involved in undergraduate and graduate education at UCONN, and he directs an interprofessional Certificate in Health Professions Education.

Lara Zisblatt, ABD, MA, PMME, is Assistant Director, Boston University School of Medicine Continuing Medical Education (BUSM CME). Ms. Zisblatt joined BUSM CME in 2003, where she heads BUSM CME's Performance Improvement (PI), quality initiatives, as well as Maintenance of Certification programs. She is experienced in designing and managing live conferences, satellite symposia, and enduring materials, including newsletters, monographs, CD-ROMs, and internet-based CME/CNE programs. Ms. Zisblatt has developed and managed PI programs that reach national audiences and has also worked with local institutions on PI initiatives, and has been invited to speak by the AMA, the AAMC, SACME, and NIQIE about her work in PI CME. She has completed a doctorate in Education. The degree will be awarded to her on May 17, 2014.

ABSTRACTS

ABSTRACT: RICME CONTINUING MEDICAL EDUCATION: THE TOWER OF BABEL?

Background

Standardized terminology within a given field is paramount to the success of knowledge users' ability to interpret and apply information from, among other things, scholarly, research, administrative and informational outputs. In 2012, SACME's leadership sought to establish a need for standardizing terminology within the field of CME.

Objective(s)

To explore commonly held beliefs, issues and challenges currently experience by professionals engaged in CPD with regard to disparate uses of terminology, theories and/or frameworks (TTF) and to establish and articulate specific examples and contexts where challenges are most common.

Methodology

Focus groups of eligible participants attending CME Congress 2012 were conducted using fundamental qualitative description which is an approach to qualitative inquiry that seeks to generate an accurate portrayal of a phenomenon in easily accessible language. Conventional content analysis, as described by Hsieh and Shannon was employed. Website searching for grey literature and an unstructured literature review was also completed.

Findings

Data suggest discordance of terms within the field of CME/CPD exists. These differences result in meaningful barriers to communication and interpretation administratively and within academic pursuits, albeit less concretely for the latter. Most institutions do not have a glossary or set of concrete definitions from which to draw upon to conduct work. Individuals seek to adopt and adapt their definitions and frameworks in accordance to who they are working with at any given time.

Conclusion

These data provide a meaningful impetus for developing an internationally accepted set of terminologies for the field.

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ABSTRACT: RICME
DETERMINING EFFECT SIZE BENCHMARKS FOR CME EFFECTIVENESS

Effect size is a useful statistic for summarizing the effectiveness of an individual CME activity into a single standardized metric, as well as for pooling educational outcomes data for program-level analyses. Moreover, consistent use of effect size measures allows for the establishment of benchmarks by which CME effectiveness can be gauged across CME providers.

Unfortunately, effect size is underutilized by CME providers and typically only reported in peer-reviewed literature, where publication bias may skew effectiveness benchmarks and heterogeneity of research methods limits the ability to pool effect size across studies.

This research proposes a simple method for calculating effect size by CME providers using data from routinely employed evaluation models. Approximately three years of effect size data using this method from a single, accredited CME provider will be presented. Critical feedback will be solicited from presentation attendees regarding the integrity of this method, as well as development of a web-based effect size reporting tool (by which CME providers can voluntarily submit effect size data with the intention of establishing industry-wide effectiveness benchmarks at the levels of both knowledge and competence).

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ABSTRACT: RICME
DISTINGUISHING BETWEEN OUTCOMES RESEARCH AND EVALUATION IN THE CME/CPD FIELD
(ISSUES AND CHALLENGES IN CME/CPD RESEARCH)

Context/Background

The need and expectations for assessing the outcomes of educational interventions continue to increase. A variety of approaches from traditional activity evaluations to robust research studies are used to answer questions about educational impact.

Issue

However, there is often confusion around what constitutes outcomes evaluation versus outcomes research. As a result, evaluation designs are sometimes judged according to research standards, evaluation findings are treated as research findings, and funders expect outcomes research on an outcomes evaluation budget and timeline.

To address this issue, we will review relevant literature and examples to distinguish between outcomes research and evaluation, highlight the problems that can arise when the distinction is not made, and discuss how improved understanding of this distinction can enhance evaluation and research practices in the CME/CPD field.

Implications (the 'So What' aspect)

Shared understanding among program planners, evaluators, researchers, and funders about which mode of inquiry should be used in any given case will help guide decisions such as which quality standards apply to a given outcomes assessment, what questions should guide the assessment, what data collection and analysis methods should be used, what level of rigor is required, and how to make appropriate use of the findings. In particular, we will discuss: Are evaluations less costly and rigorous than research studies? How to choose between an evaluation and a research approach to assessing outcome? Is measuring outcomes at multiple evaluation levels always needed? Is there value in doing a follow-up with a small sample of participants?

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ABSTRACT: RICME
**THE IMPACT ON MOTIVATION OF WEB-BASED MODULES TO FULFILL PART IV OF
MAINTENANCE OF CERTIFICATION: AN INDIVIDUAL EFFORT TO IMPROVE THE PERFORMANCE
OF PHYSICIANS (WORK IN PROGRESS)**

Purpose

The American Board of Medical Specialties and its member boards have adopted new requirements for physicians to maintain their certification. This new set of requirements includes Part IV: Practice Performance Assessment. The purpose of this requirement is to improve physician performance and patient outcomes. Some organizations have created web-based modules to help physicians meet these requirements. Though many physicians will have to participate in modules like these to maintain their board certification, the impact of these modules to motivate changes in practice is still unknown.

Methods

Participants of three web-based Part IV modules were interviewed. Interviews were transcribed and thematic analysis was used to analyze the data.

Results

32 participants from three web-based modules were interviewed. Different aspects of the modules affected the kind of motivation participants were experiencing. While some aspects of the modules enhanced participants' motivation to make improvements in practice, other aspects led physicians to focus on simply competing the module to meet the requirement.

Conclusions

By identifying the type of motivation participants are experiencing as well as the level of motivation, creators of the modules can work to enhance participants' perceptions that these modules can help them achieve the goal of improving their performance.

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ABSTRACT: Poster
FACILITATING REFLECTION THROUGH PEER-ASSISTED DEBRIEFING

Purpose

Several regulatory bodies and hospital systems have introduced multi-source feedback. Recognizing that physicians have a limited ability to assess their own performance, the availability of tools that provide physicians with credible feedback may be beneficial (Davis et al. 2006). There is some evidence to suggest that physicians use 360-degree feedback to guide changes in their performance (Kluger et al. 1996; Veloski et al. 2006). Various conditions contribute to the effectiveness of this feedback, including coaching (Atwater et al. 2007). Unfortunately, the use of individualized coaching can be costly and impractical in large applications.

Intervention

An alternative to coaching is “guided debriefing” with a trusted peer. The University of Manitoba, Division of Continuing Professional Development developed an educational intervention which includes peer-assisted debriefing, commitment to change and reflection on practice changes. Participants select a peer with whom to review and analyze their 360 feedback report. Using a structured set of questions, the participant and his peer review various aspects of the feedback report and identify areas for improvement. Responses to these questions have been qualitatively analyzed for predominant themes and keywords.

Results

Participants were able to effectively utilize peers to assist their analysis of the 360-degree feedback report and identify their practice areas of strength and those requiring improvement. They also felt more able to implement changes that would enhance their professional practice.

Conclusions

Peer-assisted debriefing is a low cost and effective strategy to facilitate the review of multi-source feedback data.

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ABSTRACT: Poster
**ASKED, LISTENED, CHANGED - FINDINGS FROM THE 2012/2013 ROYAL COLLEGE
MAINTENANCE OF CERTIFICATION PROGRAM EVALUATION**

Background / Purpose

In May 2011, based on feedback from Fellows in 2008-9 and a review of the CPD research literature, the Royal College of Physicians and Surgeons of Canada launched a revised, updated, and evidence-informed Maintenance of Certification (MOC) Program framework, credit system, and MAINPORT, the Royal College's e-Portfolio. To understand perceptions of users in response to these changes a formal Program Evaluation was sponsored.

Methods

Phase I included the development of a survey in collaboration with an evaluation steering committee. The survey included both 'old' and 'new' questions to allow for comparative purposes and with additional questions emerging themes. All MOC Program users (of >1year) were invited to respond to the survey. Frequency statistics were generated for each relevant item using SPSS version 16.0.

Results

A total of 7,955 entries were registered within the survey platform during the 8-week period. Following removal of duplicate and ineligible entries (those participants who had not yet used the system), a total of 5260 surveys were included in the analysis.

Discussion

The MOC Program re-design has resulted in a reduction in the perceived complexity of the Framework, however, confusion as to where and how to submit create remains. The program is perceived as an add-on to the work and learning that already occurs and in this sense, is viewed, by some respondents as obligatory. Respondents are seeking greater automation and further simplification of MAINPORT. Future design and development considerations should be focused on automation, educational supports and even further simplification.

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ABSTRACT: Poster

USE OF A LIBGUIDE TO FACILITATE VIEWING OF CME ENDURING MATERIALS FOR VOLUNTEER CLINICAL FACULTY (WORK IN PROGRESS)

The Commonwealth Medical College (TCMC) relies on almost 1,000 volunteer clinical faculty to precept medical students, especially in the third and fourth years. Volunteer faculty are expected to attend faculty development/CME sessions each year. Each CME live activity is videotaped and becomes an enduring material on the password protected TCMC portal.

Restriction of the password protected portal for enduring materials was based on a decision that physicians should easily be able to sign in to the portal. User stats have shown that the majority of the volunteer clinical faculty never access the TCMC portal - in fact, most clinical faculty passwords are expired.

The CME/Faculty Development Office began a project to create a CME LibGuide (Content Management System) that links physicians to enduring materials on our external website, requiring no password protection. We envision that the Libguide will allow a larger percentage of volunteer clinical faculty to complete the Enduring Materials, satisfying faculty development expectations and in the process become more informed and more effective preceptors.

Once the LibGuide is setup in February 2014, it will be promoted to volunteer faculty via email, volunteer faculty e-publications and faculty development meetings. A survey will be sent in April 2014 to evaluate volunteer faculty use and satisfaction.

The poster will describe the process of creating a CME LibGuide and available outcomes of how the LibGuide facilitates volunteer faculty's ability to view enduring materials. Hopefully other academic CME Offices will determine that LibGuides are of value in providing easier access to Enduring Materials.

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ABSTRACT: Poster
**PRE-ASSESSMENT OF WEIGHT MANAGEMENT PROGRAM READINESS IN
PROVIDERS AND PATIENTS**

Purpose

The three-year initiative focuses on building sustainable weight management programs in two community primary care clinic networks that can be replicated nationwide. Obesity is related to more than 20 major chronic diseases and is the second leading cause of preventable deaths in the US. Healthcare providers lack tools to effectively recognize, address, and communicate with their patients about obesity.

Methods/Intervention

The initiative phases include pre-assessment, enrollment of overweight/obese providers and patients into a pilot weight management program, educational training and resources, and implementation of tools for sustainable programs.

Pre-assessment of providers and patients included leadership interviews, focus groups, and web-based and phone surveys.

Results

The pre-assessment showed most providers know excess weight contributes to increased health risks, but only for some disease areas. Not all know BMI thresholds for being overweight and obese. Providers are reluctant to have this conversation with patients because of a lack of tools, resources, and time, and discomfort with the subject matter.

Less than half of overweight/obese patients have talked with providers about their weight status. When conversations happened and resources provided, 75% made an effort to improve eating/activity behaviors. 83% of patients were "Somewhat" or "Very Comfortable" with having that conversation - higher than providers' estimate of 65%.

Conclusions

The pre-assessment allowed us to segment patients into four categories indicative of their "readiness" for weight management education and intervention. Providers must make an effort to talk with their overweight patients about their weight, but need resources and a coordinated program within their organizations.

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ABSTRACT: Poster
**CREATION AND USE OF ONLINE MODULES TO ADDRESS TOBACCO
DEPENDENCE IN SPECIALTY SETTINGS**

Treating of tobacco dependence is a cornerstone of preventive health service traditionally provided in primary care practice settings. To maximize patient exposure to such treatment, faculty members at the University of Kentucky partnered with CECentral in the production and dissemination of a unique, structured curriculum addressing tobacco cessation treatment and the management of nicotine withdrawal symptoms in specialty practice environments of cardiology, neurology, oncology, general surgery and trauma surgery. This online activity includes a generic overview of tobacco cessation treatment, followed by modules created by expert providers within each of these specialties. Learners have the ability to customize their learning experience based on their area of interest. All providers shared current research findings and presented evidence-based approaches and rationales for promoting the treatment of nicotine withdrawal and tobacco dependence for the patients seen their practices in both inpatient and outpatient settings. The curriculum includes faculty facilitated e-learning communities for continued discussion of the content and sharing of clinical experiences, as well as a required survey concerning current practice completed by participants before beginning the activity. Outcomes are assessed in terms of knowledge acquisition and practice change. The program was launched in 06/15/13 and, as of 01/31/14, 78 providers have claimed credit. In this session we will describe the creation of the curriculum including how needs were assessed and faculty recruited and prepared. We will describe outcomes to date and discuss plans for the future. This activity was supported by an educational grant from Pfizer.

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ABSTRACT: Poster

THE EFFECT OF MESSAGE DAY AND TIME ON COMMITMENT TO CHANGE RESPONSE RATES

Purpose

A tool used by CE providers to measure outcomes, Commitment to Change (CTC), tracks learner progress by following up on learner commitments at the close of an activity. Similar to the response rate of Internet-based surveys in general, Internet-based CTC follow-ups have a low rate of return thus significantly limiting the tool's effectiveness as an outcomes measurement. This study examined the effect of time and day CTC queries were sent on response rate.

Methods/Intervention

Through a historical analysis of CTC data, 941 responses were examined between 2010 and 2013. A few factors, specifically related to time of day and day of week, were identified as having significant impact on response rates. This was consistent with findings from scholarly articles on the subject. A small, informal focus group was also convened to look at the design of the follow-up email.

Results

The study showed that response rates range from 2% to 7%. Return rates were higher on Monday (5%), and between 6am and 9am EST, where they are up to 7%. In addition, other factors have been identified that may increase CTC response rates, both through the scholarly review and the expert focus group.

Conclusions

This presentation will explore the study conducted on CTC data and discuss simple solutions for increasing CTC response rates.

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ABSTRACT: Poster
**DESIGNING LEARNING FROM TEACHING DOCUMENTATION:
CROWDSOURCING AND CLIENT FEEDBACK**

CME offices typically use internal staff to develop forms, often by adapting those forms already in use by other providers. The new learning format, Learning from Teaching Medical Students and Residents, challenged CME providers to design learner documentation tools where none previously existed. We describe our process that included (1) crowdsourcing to draw upon the expertise of a community of practice and (2) soliciting end-user feedback. The cohort of teaching institutions that participated in the AMA-AAMC Learning from Teaching Medical Students and Residents pilot project formed a natural community of practice. The AAMC e-mail list helped solidify an ad-hoc affinity group and it provided a natural communication pathway not only among participants but also functioned as a portal for AMA leadership to clarify specific requirements in response to questions. Through the spirit of collaboration and open sharing, we utilized this e-mail list to crowdsource the development of de novo documentation tools intended to capture the features necessary for compliance. Our goal was to take advantage of the knowledge and expertise of the group by circulating the most recent iterations of draft documents. After launching our Learning from Teaching Medical Students and Residents CME activity, we solicited feedback from faculty concerning their experience. Several faculty incorrectly thought that CME credit was to reward teaching rather than for their own professional development as a medical educator. The faculty did not experience difficulty understanding the questions, speaking to the effectiveness of crowdsourcing, but some suggestions were made for form simplification and greater clarity.

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ABSTRACT: Poster
**OPIOID PRESCRIBING PATTERNS AFTER A STATEWIDE MANDATED CME COURSE ABOUT
CHRONIC PAIN AND ADDICTION**

Purpose

New Mexico has the highest national rate of drug overdose deaths, and our state medical board now requires that all physicians and physician assistants complete five CME hours in pain and addiction between November 2012, and June 2014. Other boards (nursing, pharmacy, dentistry, podiatry) followed in mandating this coursework. This study reports controlled substance dispensing data from the state board of pharmacy before and during institution of this required coursework.

Methods/Intervention

Members of our Pain Center faculty, Project ECHO Pain faculty, and Veterans' Affairs Health Care System developed a half-day course. Lectures and workshops focused upon an overview of the crisis, safe prescribing, use of non-opioid medications, psychiatric co-morbidities, opioid misuse and addiction, and federal and state regulations.

Results

The 1,801 participants attending the eight courses included 1,283 (71.2%) physicians and 297 (16.5%) mid-level clinicians from New Mexico. Although there were slight increases in the number of opioid prescriptions filled since 2008, there was a shift in filling more low dose (\leq than 100 MME/day) prescriptions of opioid analgesics (from 85.7% to 87.9%). The total Morphine Milligram Equivalents (MME) of opioids dispensed continually decreased since the peak in July-December 2011, and Valium Milligram Equivalents (VME) of benzodiazepines dispensed declined since the peak in July-December 2011 to levels in 2008.

Conclusions

Required continuing medical education specific to management of chronic pain and addiction was associated with safer prescribing practices. Sustainability of this effort will be reported upon completion of this required coursework and will include reporting of drug overdose deaths.

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ABSTRACT: Poster

INSTANT ELECTRONIC COURSE EVALUATION AND CREDIT TO ATTENDEES FOR A CLINIC

Context/Background

Our Project ECHO (Extension in Community Healthcare Outcomes) issues more than 1,000 credits annually. As part of an ongoing weekly telehealth clinic, community clinicians from rural and underserved communities receive best practice education through specialist consultation, feedback and guidance, and additionally learn through iterative participation and deliberate practice.

Issue

The purpose of this investigation is to more timely address course evaluation community clinicians requests for receipt of CME credit. We developed an instant electronic CME certificate process awarding electronic CMEs to those community clinicians upon completion of their online evaluation. We asked 52 clinicians who completed the online post clinic evaluation and received instant electronic CME, about the acceptability of this new process. They preferred the new electronic process (87%) and stated that it saved them time (99%). It reduced the time for receipt of CME certificates (from 45 days to same day) and the human error component of the prior system.

Implications

Educational program administration includes the need to focus upon attendee's needs to evaluate and receive CME credit for their engagement and feedback. The new electronic process effort at instantaneous recording of course completion evaluation and credit for attendance was viewed very favorably by this weekly telehealth clinic. We plan to now implement the instant electronic CME approach with post clinic evaluation at other regularly scheduled Project ECHO clinics which relate to diabetes and obesity, hypertension, substance abuse, rheumatology, and preventing prematurity. A cost analysis of savings for the new program administration will be simultaneously undertaken.

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ABSTRACT: Poster
**QI AND CME: A COLLABORATIVE APPROACH TO SUPPORTING INTERPROFESSIONAL
QUALITY IMPROVEMENT**

Purpose

Sustaining a culture of quality requires enabling interprofessional teams of healthcare providers with skills to effectively identify and address opportunities for continuous practice improvement. Collaboration between continuing education (CE) planners, quality improvement (QI) experts, and care provider teams is essential, but often challenging to accomplish. This study describes development and evaluation of a guided experiential model for integrating CE with an applied QI project.

Methods/Intervention

Local clinical data and patient safety culture surveys were used to identify QI project topics. The CE-QI intervention was designed around four QI modules where each module includes a didactic session, interactive group learning, and follow up guided practice using QI tools. Core group participants completed activity worksheets for each module. An evaluation questionnaire was completed after each module to measure participant reactions.

Results

A CE-QI project to improve handoffs with an interprofessional team of physicians and nurses was initiated. Results show positive reactions to the curriculum. Barriers to implementing QI projects included limited control over technology and lack of dedicated time to participate in QI activities.

Conclusion

A modular CE-QI model using a guided experiential learning framework was developed and evaluated as an approach for sustaining a CE-QI culture. Current evidence includes positive reactions from learners but also of barriers to sustaining change. This poster will present the model and report data from ongoing data collection.

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ABSTRACT: Best Practices and Innovations
WHOOPS? USING NEAR-MISS INCIDENTS TO LEARN AND TO IMPROVE PRACTICE

Purpose

Systematic analysis of medical incidents can help health care institutions and individuals identify and reduce sources of error. Fortunately, in radiotherapy, errors that cause harm are rare. As part of a multifaceted safety program, we developed a departmental incident learning system based on near miss reporting and informed by Human Factors to identify risk factors and practice improvement (PI).

Context

All staff and faculty can submit observed incidents using a simple on-line process; a large multiprofessional team reviews these weekly, categorizing the incident and ranking for severity by potential for harm. Root Cause Analyses are conducted as needed. Bi-monthly rounds share findings and plans for PI projects, solicit ideas and reward “good catches”.

Results

Since starting in Feb 2012, a total of 1951 incidents have been reported. 11.5% would have no impact on safety, and 37.5% only mild. The majority of problems have been administrative (e.g., scheduling). Technical errors that were caught on routine QA checks belonged in higher risk categories, of moderate (26.3%), severe (15.6%) and critical (7.5%) potential. Knowledge gaps were rare. Analysis of the serious incidents identified high-risk situations, e.g., rushed or emergent work, highly complex or rare plans, or very ill patients. Several PI projects have been initiated, resulting in changes in communication strategies, development of check-lists and new policies, and optimization of the radiotherapy EMR and management system.

Conclusion

A large near-miss database is providing a useful source of learning, PI, and research, and is now a model for a national incident learning project.

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ABSTRACT: Best Practices and Innovations
COLLABORATION BETWEEN ACADEMIC AND COMMUNITY CANCER CENTERS TO IMPROVE
MOLECULAR TESTING IN LUNG CANCER

Background

In 2012, Temple University School of Medicine, Fox Chase Cancer Center, the Association of Community Cancer Centers (ACCC), and MCM Education worked collaboratively to launch a quality improvement (QI) initiative titled, “Getting Tissue for Molecular Testing: An NSCLC Strategic Initiative.” This initiative was supported by an educational grant from Pfizer.

Issue

Many lung cancer patients in the community are not receiving appropriate molecular testing because the biopsy sample may be inadequate for testing, the test is not ordered in a timely fashion, or the wrong test is ordered. Molecular test results can guide oncologists to tailor treatment regimens to optimize clinical outcomes. The goal of the QI initiative is to improve the quality and consistency of care delivered to lung cancer patients in the community by ensuring that appropriate testing is performed. By developing and applying a QI framework at each cancer center, clinicians had the opportunity to examine their current baseline performance and identify opportunities for improvements in how they obtain lung tissue samples, order appropriate molecular tests, and modify clinical workflow processes to reduce test result delays.

Implications

Many community-based cancer centers lack the time and resources to examine their internal baseline processes, identify opportunities for improvement, and implement meaningful changes. This QI initiative has shown how collaboration can draw resources together and provide a framework that clinicians can apply to embrace a culture of continuous QI. By sharing these findings with other cancer centers in the community, key opportunities for improvement may get identified and implemented.

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ABSTRACT: Best Practices and Innovations
CREATING THE FRAMEWORK TO LINK SCHOLARSHIP TO MOC AND QUALITY IMPROVEMENT PROJECTS

UW Health (Madison, WI), as an approved Maintenance of Certification (MOC) Portfolio Sponsor, awards MOC Part IV points for quality improvement (QI) work completed by our physicians. The program will support faculty in meeting internal and external requirements (MOC, P4P, OPPE, etc), and offer incentive to participate in organizational QI projects focused on improving patient experience, the health of our populations, and eliminating waste.

Leaders from both the UW Health MOC and Health Innovation Program (HIP), recognizing potential synergy in this work, and to provide additional support to physicians with interest in publishing results of their improvement projects, are collaborating to “connect the dots” between QI projects for MOC and scholarly contribution.

The UW Health MOC Portfolio Program recently received an AAMC Learning Health Systems Planning award to build a web-based tool to support the preparation of QI-related manuscripts for submission to peer-reviewed journals. Support with regard to the IRB and the alignment of SQUIRE guidelines to UW Health MOC Portfolio Program documentation will be central to this tool.

The collaborative between the UW Health MOC and HIP programs benefits many within our organization. Medical educators and QI staff benefit as we learn to build bridges, foster interdepartmental relationships, create synergy between QI and MOC, as well as facilitate publication from these projects. Physicians benefit from the resources and support provided to translate QI practice to MOC points to published literature. Finally, as these experiences are shared across the healthcare continuum, patient health is improved at individual and population levels.

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ABSTRACT: Best Practices and Innovations
**EVALUATING A COMPLEX EDUCATIONAL INTERVENTION IN A COMPLEX SETTING: A
DEVELOPMENTAL APPROACH TO ASSESSING THE IMPACT OF A MORBIDITY, MORTALITY, AND
IMPROVEMENT CONFERENCE ON PATIENT CARE (WORK IN PROGRESS)**

Purpose

Aligning education and quality improvement in the hospital setting poses formidable challenges when it comes to assessing the impact of the educational intervention on learning, practice, and ultimately, patient outcomes. We believe this challenge can be construed as a problem of how to assess the impact of a complex intervention in a complex environment (CICE). There are several characteristics of CICEs that make traditional evaluation approaches unsuitable for assessing their impact (eg, the uncertainty about the mechanisms by which the intervention can be expected to produce the desired outcomes). In this presentation, we will describe an innovative, emergent approach to evaluating a CICE—the Department of Medicine’s weekly Morbidity, Mortality, and Improvement Conference held at the Dartmouth-Hitchcock Medical Center—which seeks to identify and capitalize on opportunities to improve clinical practice and organizational systems.

Methods

We will describe how systems thinking and state-of-the art evaluation approaches have been used to 1) model hypothesized pathways through which the conference might impact clinical practice and patient care, 2) stimulate organizational changes that are expected to enhance the impact of the conference, and 3) design a three-phase mixed methods evaluation exploring whether and how the intervention is contributing to improvements in patient care. We will describe the methodology to be used in phase one to gain a clear understanding of the actual outcomes (as opposed to those that are desired or intended) in terms of learning and practice change at the individual participant level.

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ABSTRACT: Best Practices and Innovations
**FOUR-YEAR CPD/CME JOURNEY IN MAINTENANCE OF CERTIFICATION: HOW-TO'S IN
PROFESSIONALISM, SELF-ASSESSMENT, PRACTICE GAPS, EDUCATION NEEDS AND QUALITY
IMPROVEMENT EFFORTS**

Background

Our School is responsible for coordinating resources to support Maintenance of Certification (MOC) for our board certified staff. Our MOC efforts are at a place of growth and experience that offers an opportunity to share best practices and innovations.

MOC professionalism and self-assessment activities are incorporated in internal/external education. The Quality Review Board engages groups of physicians/allied health in practice improvement projects that cross departments, disciplines and involve multiple specialty boards.

Issue

As physicians increasingly need to participate in MOC Part I-IV, it will be key to identify internal and external resources. Our goal has been to offer opportunities to engage physicians and teams in professionalism, self-assessment, and quality improvement projects that are relevant to their practice; part of their daily clinical life; designed to improve the quality of care/outcomes of their patients; and earn qualified credit to satisfy MOC.

Implications

Your education team can help colleagues meet these requirements within their day-to-day practice. This becomes a win-win for the organization as well as individual physicians/team participants. Shared examples will include intra-disciplinary and interdisciplinary individuals, teams, and healthcare systems.

Best practice and innovative ideas provide a path to a future where CPD/CME is truly engaged in improvement of patient care as the desired and measured outcome, using MOC/CME as two tools to help reach these goals.

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ABSTRACT: RICME
**INFORMATION RESOURCE AVAILABILITY AND USE BY UNAFFILIATED PRACTITIONERS IN
PREDOMINANTLY RURAL NEW MEXICO**

Purpose

Our goal was to find out what information resources are available to and used by practitioners not affiliated with the University of New Mexico in order to identify unmet needs that might be addressed by outreach and continuing education programs.

Methods/Intervention

We recruited a purposive sample of 50 health care practitioners at sites across all quadrants of the state. These included 21 physicians and 29 midlevel practitioners. The same community outreach librarian conducted semi-structured interviews; most interviews were at practice sites in predominantly rural locations. An iterative process was used to identify emerging themes, which were coded using NVivo10 data analysis software.

Results

Access to and uses of electronic resources are prevalent. 90% (19/21) of physicians and 79% (23/29) midlevel practitioners mentioned using online resources to answer clinical questions, such as UpToDate, Epocrates, Mayo Clinic, the Centers for Disease Control and eMedicine. Practitioners reported that, most of the time, they were able to answer their clinical questions immediately and during the patient encounter. Several practitioners noted a lack of good resources to use for discussion with their patients, with information that patients can understand and that is appropriate for language, literacy level, and cultural context.

Conclusions

Practitioners at predominantly rural clinic settings routinely access facility-sponsored on-line and other web-based information resources. They would like access to additional resources, especially those more appropriate for patients. Based on this study, we intend to develop more CME programs that address these needs.

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ABSTRACT: Best Practices and Innovations
LEARNING FROM TEACHING: FOSTERING COLLABORATION BETWEEN UGME/GME AND CME

Learning From Teaching: A Win-Win for CME and GME

Precepting medical students and residents requires physicians to be effective teachers as well as up to date clinicians. This is a particular challenge for new medical schools and regional campuses which must rely heavily on community-based faculty who may have limited experience in academic settings and for residency programs which must assure that their preceptors are advancing the heightened requirements of the ACGME's Next Accreditation System. Recent decisions by the AMA to allow AMA Category 1 PRA Credit™ provides an opportunity for CPD providers to address these gaps. However, preliminary experience with the implementation process has demonstrated barriers to physician participation based on certification documentation requirements. In addition, program and clerkship directors may not be actively engaged in the CME process, given the perception that awarding credits has little impact on actually improving faculty competence. The University of Pittsburgh is developing innovative mechanisms to decrease the work associated with certification as well as initiatives to create demonstrable value for residency program directors from the learning from teaching process. The proposed session will describe the process by which the CME and GME offices have forged collaboration, the model that forms the basis for certification, and the methods by which learning from teaching provides feedback to help residency programs meet ACGME requirements and improve the educational experience for their trainees.

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ABSTRACT: Best Practices and Innovations
FACULTY DEVELOPMENT FOR TEACHING QUALITY IMPROVEMENT & PATIENT SAFETY

Background

AAMC's Teaching for Quality expert panel report, published in 2013, highlights the need for a critical mass of clinical faculty capable of modeling and teaching healthcare quality improvement and patient safety (QI/PS). In response, the AAMC has assessed the current need and created a faculty development initiative designed to enhance the QI/PS skills of clinical faculty across the continuum.

Issue

Most clinical faculty did not receive formal training in quality improvement and patient safety during medical school and residency. Today's practice environment requires them to have a working knowledge of these principles and to be able to role model, teach and assess current clinical learners. Additionally, new requirements such as curriculum reform and ACGME clinical learning environment requirements have created new demands on faculty and academic leadership.

Implications

Launched in January 2014, the AAMC's Certificate in Teaching Quality Improvement provides a comprehensive program including self-assessment, organizational readiness assessment, a didactic/hands-on workshop, a practice-based educational project in QI/PS and dissemination of project outcomes to inform the field. This faculty development initiative provides an opportunity for academic CME and faculty development offices to enhance their faculty's knowledge and skills in order to advance learners.

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