This issue of the Intercom marks my last President’s Perspective. Let me begin by saying that it has been a pleasure serving as your President-Elect and President for the past four years. It has been a tremendous learning experience with either growth or stability in all realms of our dynamic and essential medical education organization. During this same period, I remained clinically active, being associated with young colleagues as I witnessed transformation in inquiry and discovery that did not exist several years ago and certainly not when I began to practice. The power of prevention, the fruits of teamwork between physicians and other professionals, the growing diversity in the workplace, and the disruptions and empowerment of technology have brought steady change in health care delivery.

Throughout my time of service, I have observed dynamic forces or stressors of change compelling us to consider new roles for continuing education and professional development. We are moving toward a more accountable education process that influences change in medical practice and hopefully improvements in patient outcomes. Rapid information generation (some of which is not evidence-based) and exchange has been accompanied by team-based practice and patient empowerment to better achieve quality care. This repositioning of continuing education is necessary to enhance care at the bedside, in the clinic and hospital, and throughout the community. I anticipate that these forces of change will persist and likely intensify over the next decade.

Continuous professional learning as a strategic resource can transform delivery of care. Our Society must continue to advance meaningful scholarship and innovation in health care education that will aid in developing our health professionals. This transformation is multidirectional. We must provide models to reorganize and reposition education, to make more visible the many initiatives currently underway, and to underscore issues and challenges in defining contributions for improving patient care.

For too long, much of CME lacked a grounding in accepted educational theory and research-generated evidence as new science emerged. This is not unique to health profession education. We must learn from prior concerns about CME and establish continuous professional learning tenets. As your president, my energies have been directed toward encouraging this dialog to Society members and engaging in our course offerings. In advancing this era of reform, the power of proper theory and evidence is necessary to...continued on page 2
maximize the potential of professional development… not just to change provider behavior but to improve care and reduce serious illness.

As we look ahead, there will continue to be many themes and voices, ranging from current practice to future directions and from theoretical or philosophical to practical. Following any one approach is unrealistic. Instead, we should select and use learning formats which respond to realistic individual, institutional, and community needs to improve health outcomes that we consider to be the best from a variety of delivery systems. An important benefit to presenting learning opportunities that apply to all fields of medicine and health care is the development or continuation of leadership in education.

Practice performance improvement through use of measurable data is now the focus of continuing education. Electronic health records, institutional and national quality, safety, and value metrics will inform targeted audiences about trends and learning needs. Data from improved coding, electronic health record, and other databases will be readily available and better accepted by previously skeptical clinicians and educators.

I can attest that busy clinicians will want their education to be relevant, flexible, efficient, effective, and accessible with less need to travel. Time is precious and becoming less available to the busy practitioner. Efforts must continue for lectures or seminars to be replaced by or complemented with self-paced, practice-based learning in the workplace. Accomplishing this will require a hybrid of formats, primarily virtual (either asynchronous or real time) options paired with face-to-face learning. Learners will continue to adapt to innovative educational delivery systems such as multipoint videoconferencing, integrated web-based imaging tools, social networking, internet information sites, and text messaging. Rigor, scientific methodology, and appropriate tools will be essential in assessing effects from these contemporary education approaches on physician performance and health care delivery.

Volunteering in our Society has enriched my career, expanded my network, and provided much personal and professional satisfaction. I look forward in supporting our new President Dr. Betsy Williams and President-Elect Dr. David Wiljer, as I now assume the role as immediate past president and Chair of the SACME Academy. My new role to adopt with others in the Academy will evolve around addressing the development of leaders for the challenges of 21st century health systems through mentoring, specialized coursework, and projecting the future of continuing professional development to meet those challenges. At the center of this commitment will be building upon our vital role in scholarship and advancing knowledge as we continuously learn.
UPDATES FROM THE AAMC

By Lisa Howley, MEd, PhD, Sr Director of Strategic Initiatives and Partnerships lhowley@aamc.org

The AAMC advances key initiatives and provides opportunities to discuss and promote medical education. Below are updates that are relevant to our colleagues in continuing medical education and continuing professional development.

The AAMC’s Strategic Planning Process

President and CEO David Skorton is personally leading the AAMC’s strategic planning team, which includes five members of the Board of Directors, the current and incoming Board chairs, and the AAMC Leadership Team. The AAMC’s strategic planning process involves two phases:

• Phase 1 focuses on development of our mission, vision, strategies and goals, as informed by the results of our environmental scan—an analysis of the trends and forces shaping academic medicine and the AAMC. The scan identified five main themes of large-scale change that present challenges and opportunities—now and in the near future.

• Phase 2 focuses on development of the implementation plan to achieve those goals. We look forward to hearing from you as we take this journey together. Join the conversation on Twitter using #AAMCStrategicPlanning.

Major Initiatives and Events

2020 Group on Educational Affairs (GEA) Regional Conferences

The AAMC is looking forward to the GEA’s Regional Conferences this spring, hosted across the country:

• March 11-14, in Atlanta, Georgia: Southern GEA Conference

• March 29-31, in Pacific Grove, California: Western GEA Conference

• April 1-3, in Rapid City, South Dakota: Central GEA Conference

• April 30-May 2, in Burlington, Vermont: Northeast GEA Conference

The purpose of the GEA is to advance medical education and medical educators through faculty and curriculum development, educational research, and assessment in undergraduate, graduate, and continuing medical education. These regional conferences provide an opportunity for educators to meet and discuss a range of important topics in these areas.

MedBiquitous 2020 Annual Conference

MedBiquitous 2020 will be a symposium for health professions educators and technology innovators held in conjunction with the Information Technology in Academic Medicine conference, sponsored by the AAMC Group on Information Resources (GIR). MedBiquitous 2020 is an opportunity to network with colleagues from around the world and examine how digital technologies can promote continuous improvement and better outcomes across the continuum of health professions education. For more information about MedBiquitous, including details about its annual conference in New York City June 2020, visit: www.medbiq.org/.

Countering the U.S. Opioid Epidemic

AAMC is a member of the NAM Action Collaborative on Countering the U.S. Opioid Epidemic which has completed its first year of work. Alison Whelan, MD, is on the Health Professional Education and Training Working Group. In addition, the AAMC has an ongoing national strategic initiative designed to support the advancement of medical education across the continuum in pain management, prescribing, and addiction. As part of these AAMC efforts five institutions — Penn State College of Medicine, The Robert Larner, M.D., College of Medicine at the University of Vermont, The University of Florida College of Medicine, The University of Texas at Austin Dell Medical School, and Vanderbilt University Medical Center — were awarded up to $25,000 each, continued on page 4
funded in part by the Samuehi Foundation. The grantees will develop tools and resources to support educators in their collaborative efforts to increase faculty proficiency in pain management and substance use disorder.

**AAMC Receives National Grant for Advancing the Integration of the Humanities and the Arts in Medical Education**

The AAMC received a grant from the National Endowment for the Humanities (NEH) to support efforts to integrate the humanities and arts into medical education and professional development to better prepare physicians to practice humanistic medicine in the 21st century. The grant will fund the development of a monograph, resources for educators and learners, and the development of professional development opportunities for integrating the humanities and arts into education in the medical profession. Additional funding from the Josiah Macy Jr Foundation was also received to support this initiative.

**Select Recent Resources**

**AAMC Publishes Quality Improvement and Patient Safety Competencies**

The AAMC is developing a new publication series, *New and Emerging Areas in Medicine*, to frame competencies across the medical education continuum. The first in the series, *Quality Improvement and Patient Safety Competencies Across the Learning Continuum*, was released in November and is designed as a roadmap for curricular and professional development, performance assessment, and improvement of health care services and outcomes. An AAMC Expert Working Group developed these competencies over 18 months through an iterative process with extensive stakeholder feedback. The competencies are organized into five domains and three tiers that represent stages in physician development: 1) entry to residency, 2) entry to practice, and 3) experienced faculty physician. See “What Every Doctor Needs to Know About Patient Safety” and download the full report [here](#).

**AAMC Data Report Examines U.S. Physician Workforce by State**

The AAMC recently published the [2019 State Physician Workforce Data Report](#). This biennial report examines current physician supply, medical school enrollment, and graduate medical education in the United States, and includes profiles providing snapshots on individual states, the District of Columbia, and Puerto Rico.

**Education Resource Repository for Pain Management, Addiction Medicine, and Opioid Education**

To foster collaboration by educators and their partners to advance pain management, addiction medicine, and opioid education, the AAMC is hosting this free resource repository, featuring new approaches and best practices when it comes to improving how we teach and train. This resource collection allows for the agile sharing and disseminating of educational innovations. We are actively seeking submissions that are not ready or suitable for more formal peer-review publications. Examples of appropriate resources may include checklists, worksheets, lesson plans, cases, or lecture outlines. In addition, MedEdPORTAL is currently seeking submissions for publication consideration on the topic of Opioids Education.

**NAM Report Explores a Systems Approach to Clinician Well-being**

As part of the National Action Collaborative on Clinician Wellbeing, the National Academy of Medicine (NAM) published a consensus study report by the Committee on Systems Approaches to Improve Patient Care by Supporting Clinician Well-Being. The report presents findings from the study – which examined the factors contributing to clinician burnout, related consequences, and potential interventions – and calls for health care organizations and health professions educational institutions to take immediate action to improve the clinical work and learning environments.
I believe that accredited CME has the capacity to be part of the solution to many of the challenges we face, from clinician well-being to the wellbeing of our patient communities—that’s why we’re working hard to support education providers and promote the value of CME. As you’ll read below, we’re moving forward with our effort to modernize the rules that protect the independence and integrity of accredited continuing education for healthcare professionals. We continue to expand our educational resources for providers and to create collaborations with our colleague accreditors and certifying bodies to afford clinicians more flexibility in choosing education that meets their needs.

Please read about our recent initiatives below and visit our website, www.accme.org, for additional information. As always, please do not hesitate to reach out and let us know how we can support your work.

**CALL FOR COMMENT: PROPOSED REVISIONS TO STANDARDS**

We were pleased to invite stakeholders to participate in a call for comment about the proposed, revised ACCME Standards for Integrity and Independence in Accredited Continuing Education. The proposal is the result of a year-long review and revision process and is based on feedback we received from the stakeholder community. We appreciate all of you who have participated in our dialogue and we look forward to reviewing your responses to our proposed Standards.

The ACCME Board of Directors will analyze and consider the responses to the call for comment at its March 2020 meeting. After the Board makes modifications and adopts the revised Standards, we will release a transition plan for the accredited continuing education community, to give you the time and resources you need to meet the new expectations and to support your successful adoption of the revised Standards.

The ACCME’s goal is to streamline, clarify, and modernize the Standards, and to ensure their continued relevance and effectiveness in the changing healthcare environment. The initiative supports our strategic goal to assure the quality of accreditation.

This effort assures clinicians and teams that they can continue to trust accredited continuing education to help them to improve their practice and optimize the care, health, and wellness of the patients and communities they serve. For more information, visit [www.accme.org/ACCME-standards-comment](http://www.accme.org/ACCME-standards-comment).

**COLLABORATION WITH THE ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA EXPANDS OPPORTUNITIES**

We announced a new collaboration with the Royal College of Physicians and Surgeons of Canada to expand opportunities for Royal College Fellows to earn Maintenance of Certification (MOC) Program Section 3 credits by participating in accredited continuing medical education (CME) activities that meet MOC requirements.

Accredited CME providers in the ACCME System have new opportunities to meet the needs of learners who are Royal College Fellows, without having to collect or submit additional data. Royal College Fellows can report participation in activities registered for CME in support of MOC that include the expectation that the learner engages in the evaluation and receives feedback. The Royal College will recognize these activities as meeting the requirements for MOC Program Section 3 (Self-Assessment Programs) credits. Activities that are available on or after November 1, 2019 until June 30, 2022, are eligible. Royal College Fellows will report their participation directly to the Royal College. CME providers do not need to report participant information. For more information, visit [www.accme.org/news-releases/accreditation-council-for-cme-and-royal-college-physicians-and-surgeons-canada](http://www.accme.org/news-releases/accreditation-council-for-cme-and-royal-college-physicians-and-surgeons-canada).

**JOINT ACCREDITATION**

**New Collaboration:** Joint Accreditation for Interprofessional Continuing Education™ has announced a new collaboration with the American Dental Association (ADA).
Jointly accredited providers now have the option of awarding single profession or interprofessional continuing education (IPCE) credit to dentists, without needing to attain separate accreditation through the ADA’s Continuing Education Recognition Program (CERP). For more information, visit jointaccreditation.org/newsletter/dec2019#ADA.

New Report: The 2019 Joint Accreditation Leadership Summit report, Let’s Go Team! Planning Education for Maximum Impact! is now available at jointaccreditation.org/reports. This report summarizes the 2019 Joint Accreditation for Interprofessional Continuing Education (IPCE) Leadership Summit, which brought together leaders in IPCE to explore educational methodology that demonstrates excellence in identifying professional practice gaps of teams, different formats for learning, planning processes that highlight the roles of team members, and changes in the team. The report includes best practice case studies and insights from jointly accredited providers.

PROMOTING THE VALUE OF CPD: JOURNAL ARTICLES

• “Comparison of Continuing Medical Education at US Medical Schools and Other Accredited Organizations,” Academic Medicine, describes a long-term overview of accredited CME at medical schools in the US. This article is co-authored by William F. Rayburn, MD, MBA, Distinguished Professor and Associate Dean, CME and Professional Development, University of New Mexico School of Medicine; Kate Regnier, MA, MBA, Executive Vice President, ACCME; and Graham T. McMahon, MD, MMSc, President and CEO, ACCME. Visit: https://journals.lww.com/academic-medicine/Abstract/publishahead/Comparison_of_Continuing_Medical_Education_at_US_97412.aspx?fbclid=IwAR0nJ-9rDEazY7LoG-Guw2-i3ATqLvUMytt2iQOYusqrlO_NvF0BT8zu4nE#pdf-link

• “The Rise and Role of Interprofessional Continuing Education,” Journal of Medical Regulation, discusses the pivotal role of accreditors and regulators in driving the advancement of IPCE and team care now and in the future. This article is co-authored by Kate Regnier, MA, MBA, Executive Vice President, ACCME; Kathy Chappell, PhD, RN, FNAP, FAAN, Senior Vice President, Accreditation, Certification, Measurement, and the Institute for Credentialing Re-
Learn with Us

We’re excited to announce that registration for the ACCME Meeting 2020: Driving Change is now open. Buckle up and get ready to discover new skills and practical strategies that will fuel your journey of educational leadership in accredited CME. To register, visit www.accmemeeting.org.

At the annual conference you can:

- Get inspired for the road ahead with keynote sessions on educational leadership, teaming, and health equity.
- Plot a strategic educational plan to advance the impact of your CME program as an organizational change-engine.
- Share your CME story and make connections with colleagues who are sharing their experiences.
- Discover ways to foster wellness and meaning for your learners and your education team.
- Connect best practices in learning science to your CME planning.
- Find new routes to accelerating your CME with insights from fellow educators, researchers, public health leaders, and patient-partners.

For regular updates...

For regular updates on ACCME, please visit our website, www.accme.org; or follow us on Twitter, twitter.com/AccreditedCME; Facebook, www.facebook.com/AccreditedCME; Instagram, www.instagram.com/accreditedcme/; and LinkedIn, www.linkedin.com/company/AccreditedCME. For questions, email info@accme.org.

Physician Board Certification is on the Rise

More than 900,000 physicians in the United States are board certified—up 2.5% from last year—and more than half of those are from just 10 states. These are just a few statistics found in the latest ABMS Board Certification Report released by the American Board of Medical Specialties (ABMS).

The board certification process was created more than 100 years ago as a rigorous, independent evaluation of a physician’s experience, knowledge, and skills. Today, board certification supports continuous assessment and professional development activities. For more than 45 years, this annual report has illustrated the continued importance of board certification as a public credential. Several entities use ABMS data as the definitive guide to specialties and board certification in the U.S. For example, the Centers for Medicare & Medicaid Services use ABMS certification data for its popular “Physician Compare” website and to determine specialties for residencies.

The 2018-2019 ABMS Board Certification Report offers a variety of information about the 40 specialty and 87 subspecialty certification programs administered by the 24 Member Boards that comprise ABMS. This 58-page report also includes a snapshot of the active certificates held by ABMS Member Boards’ certified physicians by state. Colorful charts and infographics break down important data, such as state-by-state listings of the number of board certified physicians in each specialty. A table illustrates approved Focused Practice Designations by Member Boards.

Published annually, the ABMS Board Certification Report can be downloaded for free from the ABMS website. This report reflects information reported by the 24 ABMS Member Boards and data from the ABMS certification database, which contains more than one million records. The database is updated daily with information received from Member Boards and is considered a primary source for professional certification verification.
The American Board of Medical Specialties (ABMS) is seeking session (abstract) submissions for ABMS Conference 2020. Hosted September 23 – 25, 2020, at the JW Marriott Indianapolis, the conference provides an excellent opportunity to disseminate innovative collaborations, evidence-based research and best practices that support the value and help accelerate the transformation of board certification as well as improve the delivery of health care.

In this call for sessions, the ABMS Conference 2020 Programming Planning Committee is seeking high quality abstracts that advance best practices in assessment of physicians’ knowledge, competence and performance. Educational abstracts may be of original research, evidence-based practices or encore presentations of previously presented educational sessions.

Attended by a diverse community of more than 500 professionals, ABMS Conference 2020 will attract leaders and stakeholders from areas including ABMS Member Boards and Associate Members, assessment and evaluation, certifying organizations, credentialing, data sharing and informatics, health policy and research, hospitals and health systems, medical education, medical specialty societies and associations, patient advocacy, professional regulation and quality improvement.

**Session topics are being sought in the following areas:**

- Achieving the Vision for ABMS Board Certification: Collaborating to Implement the Continuing Board Certification: Vision for the Future Commission Recommendations
- Knowing the Goal: Balancing Assurance and Improvement in Physician Assessment
- Understanding and Assessing Professionalism as a Competence
- Using Data, Research, and Augmented Intelligence to Advance Certification
- Planning for the Future: The Role of Strategy, Operations, Collaboration and Communications

ABMS Conference 2020 Call for Sessions will close on March 8, 2020, at 11:59 PM CST. Acceptance notifications will be sent via email by March 31, 2020.

For additional session topic area information or details on how to submit a session abstract, please visit the ABMS Conference 2020 website.
The American Board of Medical Specialties (ABMS) has selected four outstanding individuals to participate in its 2019-2020 Visiting Scholars Program.

Launched in 2014, the one-year, part-time Visiting Scholars Program supports early career physicians and researchers in scholarship and leadership development in the fields of physician education, training, and assessment, continuing professional development, quality improvement, and federal health policy.

The 2019-2020 Visiting Scholars and their areas of interest are:

- **Rachel Frank, MD**, Assistant Professor, University of Colorado (Denver)—*Is there a Ceiling Effect in Virtual Reality Orthopaedic Surgical Simulators? A Prospective Clinical Trial* (Co-sponsored by the American Board of Orthopaedic Surgery)

- **Maya Iyer, MD, MEd**, Assistant Professor of Clinical Pediatrics, Nationwide Children’s Hospital (Columbus, Ohio)—*The Procedural Practice Perspective of General Pediatricians*

- **Laura Kim, MD**, Health Professions Education Evaluation and Research Fellow, VHA National Simulation Center (SimLEARN) (Orlando)—*Exploration of How MOCA Simulations Can Impact Future VA Educational and Policy Efforts* (Co-sponsored by the Office of Academic Affiliations, Veterans Health Administration, U.S. Department of Veterans Affairs)

- **Trisha Marshall, MD**, Pediatric Hospital Medicine Fellow, Cincinnati Children’s Hospital Medical Center (Cincinnati)—*Developing Tools to Identify Diagnostic Uncertainty in the Electronic Health Record* (Co-sponsored by the Gordon and Betty Moore Foundation)

This year, each Visiting Scholar will receive a $12,500 financial award to support the direct costs of research and travel expenses associated with program participation. During the year-long program, ABMS Visiting Scholars remain at their home institutions and participate in monthly interactive webinars with national leaders in medical education, practice regulation, and policy. They attend three in-person leadership meetings, ultimately presenting their research findings before a national audience at the annual ABMS Conference. To date, 29 Visiting Scholars have participated in the program.

Applications for the 2020-2021 Visiting Scholars Program are now available on the [ABMS website](https://www.abms.org).
The Academy of SACME Fellows was created in 2016 following unanimous approval by the SACME Board. The Mission of the Academy is to recognize preeminent leaders from the field of academic CPD and actively engage them in taking the field of academic CPD to a new level. As has been envisioned in creating this unique Academy, this is not merely an honorific group but one that would actively engage these leaders in pursuing innovative programs and lofty goals that would advance the field and be of great benefit to SACME. The Academy would also bring greater recognition to SACME, both nationally and internationally and would ensure that renowned leaders and experts in the field continue to remain actively engaged in the activities of SACME. The Vision for the Academy is that it would help ensure pursuit of long-range goals that are difficult to achieve with the customary changes in the elected leadership. The Academy would not replace or modify any existing structure within SACME and would add a mechanism to achieve far-reaching goals. The principal aims of the Academy are to recognize preeminent leaders in the field of academic CPD of national and international renown to engage them in pursuing lofty goals that would take the field of academic CPD to a new level through innovation, excellence, and expertise.

The model for selection and induction of SACME Fellows as Academy Members was also approved by the SACME Board in 2016. The SACME Board unanimously approved that all Past Presidents of SACME would be included in the initial cohort of Fellows of SACME and in future years as each SACME President completes his or her term, the individual would be automatically inducted as a Fellow of SACME. In addition, to reach further into the community of distinguished academic CPD leaders, the SACME President would nominate certain preeminent individuals for approval by the SACME Board as SACME Fellows. As the Academy launched, the initial cohort of CPD leaders beyond the Past Presidents included six preeminent CPD leaders who were approved as Fellows by the SACME Board. Also, the SACME Board approved that in subsequent years, a maximum of two such preeminent leaders from the field of CPD could be nominated by the President and approved by the Board. This model would ensure the appropriate balance between the Past Presidents of SACME and other preeminent leaders in the field of academic CPD. The individuals approved as Fellows of SACME would be inducted at the Annual Meetings of SACME. The SACME President could solicit nominations for SACME Fellowship and evaluate these nominations prior to presenting their names to the SACME Board. The Academy of SACME Fellows could also send in nominations to the SACME President for consideration.

The Steering Committee of the Academy would serve in an advisory capacity to the President and contribute to the evaluation of nominees prior to presentation to the SACME Board. The SACME Board also approved the use of “FSACME” by the SACME Fellows after their names, in recognition of their preeminent role within the field of academic CPD and their landmark contributions to this important field. The inaugural cohort of Fellows of SACME was inducted during the 2017 Annual SACME Meeting in Scottsdale, AZ. This event generated tremendous excitement and brought back many nationally and internationally renowned CPD leaders who had not attended the Annual SACME Meeting or participated in SACME activities for a while.

During the following year, dialogues were initiated with the new Fellows of SACME to define audacious and far-reaching goals for the Academy and strategies to achieve these goals. The first call of the full Academy occurred in September 2017 and these calls were convened quarterly thereafter. The productive discussions culminated in the first in-person meeting of the Academy of Fellows...
of SACME during the 2018 Annual SACME Meeting in San Antonio, TX. At that in-person meeting, the Academy Members discussed the goals of the Academy and approved pursuit of two major programs – the National Mentorship Program of SACME and the National Leadership Program of SACME. Also, the Academy Members approved exploration of a National Faculty Development Program of SACME. A Steering Committee was appointed to effectively advance programs being pursued by the Academy. The Steering Committee included Chairs and Co-Chairs of the programs being pursued and a few additional Academy Members. During 2018-19, quarterly calls of the Academy as a whole continued, and monthly calls of the Steering Committee were added to ensure significant progress. During the quarterly conference calls of the Academy, reports and updates relating to various programs have been shared and feedback from the Academy has been solicited. The Steering Committee of the Academy has continued to address a myriad of details relating to the programs, including approval of various items, and has reported the specifics to the Academy as a whole. At the 2019 Annual SACME Meeting in Charleston, SC, the Academy discussed the progress made with the programs being pursued by the Academy and approved the pursuit of the new Faculty Development Program of SACME. The Academy also approved pursuit of a new SACME Program on the New Technologies to Support Innovative CPD. Since the 2019 Annual SACME Meeting, major strides continue to be made in regard to all four programs being pursued by the Academy.

1. National Mentorship Program of SACME

Jack Kues chairs this Mentorship Program. The details relating to the mentorship model, including the process for selection of mentees and mentors, pairing of mentees and mentors, and communication strategies for the mentees and mentors were approved by the Steering Committee of the Academy and endorsed by the Academy of SACME Fellows as a whole. The SACME-wide announcement of this Mentorship Program resulted in expressions of interest by several SACME members. During the 2019 Annual SACME Meeting, there was a special session conducted by Jack for individuals seeking additional information on the new program. Several potential mentees and mentors attended the session. This resulted in a healthy exchange of ideas and generated considerable enthusiasm. Following the 2019 Annual SACME Meeting, formal applications were accepted for review by the Steering Committee and five mentees were selected. They were assigned to primary mentors, and in some cases co-mentors. The list of mentees and mentors appears below.

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<tr>
<th>Mentee</th>
<th>Primary Mentor</th>
<th>Co-Mentor(s)</th>
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<tr>
<td>Ruth Adewuya</td>
<td>Barbara Barnes</td>
<td></td>
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<tr>
<td>Helena Prior Filipe</td>
<td>Craig Campbell</td>
<td>Don Moore and Ajit Sachdeva</td>
</tr>
<tr>
<td>Christine Flores</td>
<td>Nancy Davis</td>
<td>Jack Kues</td>
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<tr>
<td>Samantha Hernandez</td>
<td>Moss Blachman</td>
<td>Todd Dorman</td>
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<tr>
<td>Peter Sandre</td>
<td>Jack Kues</td>
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Through the efforts of Moss Blachman, the few individuals who could not be accommodated in the initial cohort of mentees were brought to the attention of the Chair of the Membership Committee of SACME, Linda Caples, to offer these individuals opportunities to participate in other activities of SACME. The packet of information on the Mentorship Program was sent to the mentees and included the program overview, mentee/mentor assignments, program standards and expectations, and the anticipated next steps for both the mentees and the mentors. This information was also shared with the mentors. Communication between mentees and mentors has begun in due earnest and the goals and anticipated outcomes for the one-year mentorship experience are being defined by the respective mentee/mentor pairs. These pairs are expected to communicate monthly and connect in person at an appropriate national meeting if they are in attendance. A survey of the program participants and interviews will be conducted at the end of the mentorship cycle to evaluate the impact of the program. Jack continues to monitor the interactions between the mentees and their respective mentors and is providing guidance and counsel as needed. The mentees will present a report on their activities at the 2020 Annual SACME Meeting.

2. National Leadership Program of SACME

This program is co-chaired by Moss Blachman and Barbara Barnes. The foundation for the Leadership Program was established through initial steps taken a few years ago, and these included implementa-
tion of leadership training sessions at the SACME Annual Meetings. The responsibility for the Leadership Program was assumed by the Academy after the Academy was established. Efforts to explore collaboration with the Association of American Medical Colleges (AAMC) were initiated approximately a year ago. At the 2019 Annual SACME Meeting, Moss and Ajit Sachdeva (Sach) met with Alison Whelan and Lisa Howley from the AAMC, and Barbara also joined the discussions. There was a productive meeting hosted by the AAMC in August 2019 at which several SACME leaders were present. Since that meeting, conversations have continued with the AAMC, principally through the efforts of Moss and Barbara, and steps are being taken to explore a collaborative relationship between the AAMC and SACME in this CPD leadership training space. Further discussions were held between representatives of AAMC and SACME during the 2019 AAMC Meeting in Phoenix. These efforts have focused on definition of goals of this collaboration and identification of specific areas of strength and responsibility of each organization. Information on other leadership courses is being gathered to help in defining the specifics of SACME’s Leadership Program.

3. SACME Program on New Technologies to Support Innovative CPD

This program is co-chaired by John Parboosingh and Olivier Petinaux. They have identified a small group of experts from within SACME’s Membership to serve as Members of a new Committee on New Technologies to Support Innovative CPD. A Charter has been developed by the committee and appears below.

“The goal of this SACME Committee on New Technologies is to explore opportunities to incorporate new technologies into innovative CPD programs. The committee would conduct horizon-scanning; identify new and effective technologies; and create innovative CPD models using these new technologies.”

John and Olivier sent a survey to all SACME Fellows to collect fundamental information on the use of new technologies in CPD activities. Technology was broadly defined as “any technology or tool that incorporates adaptive learning, curated learning, social learning, and augmented reality/artificial intelligence.” Based on the survey responses, several SACME Fellows will be invited to share their experiences in more detail during semi-structured follow-up interviews that will take place over the next few months. Data collected from the survey of SACME Fellows and from follow-up interviews will be used to design and distribute a similar survey to the entire SACME membership and engage the SACME members to contribute to this endeavor. After the survey data are analyzed, the committee will define the next steps to best support the goals of SACME and needs of the SACME membership.

A conference call was convened in September 2019 with Johmarx Patton from the AAMC. Johmarx serves as Director of Educational Technology and Standards and heads the Medbiquitous Program. John, Olivier, and Sach participated on this call. Johmarx requested the Charter of the committee which has been sent to him. Although this dialogue is in its exploratory phase, exciting opportunities exist for a meaningful collaboration with AAMC. Also, John is planning to reach out to the Royal College of Physicians and Surgeons of Canada (RCPSC) to investigate possibilities for dialogue with the RCPSC Task Force on Artificial Intelligence.

4. National SACME Program on Faculty Development

Don Moore and Sach co-chair this program. Initial discussions with several interested parties have been helpful in developing plans for this program. Don has articulated the need to address challenges associated with retaining professionals in CPD, incorporating interactivity in learning, and further integrating current theories on feedback and learning in CPD activities. He has also emphasized the importance of addressing digitization of learning. During the 2019 Annual AMEE Conference in Vienna, Sach met with Miriam Uhlmann from Switzerland, who is a renowned faculty development expert. She has conducted several workshops on faculty development at AMEE Meetings. Sach and Miriam have discussed faculty development efforts focused on competencies relating to interpersonal and communication skills, teamwork, and patient safety within the context of CPD. Miriam is a Member of
SACME and is looking forward to contributing to the faculty development efforts and getting more engaged in SACME’s activities. Miriam is planning to attend the 2020 Annual SACME Meeting. During the RCPSC Meeting in September, Sach met with Yvonne Steinert, an internationally-recognized expert in the field of faculty development. Yvonne has been invited by Bill Rayburn to deliver a presentation at the 2020 Annual SACME Meeting and her involvement with the Faculty Development Program of SACME would be beneficial.

Also, Nancy Davis has volunteered to serve on the Faculty Development Committee and her expertise will be extremely helpful to the committee. An in-person meeting of the Faculty Development Committee will be convened during the Annual 2020 SACME Meeting, and the Program Committee is working on identifying a suitable time for this meeting.

During the upcoming 2020 Annual SACME Meeting in Miami, updates on the programs being pursued by the Academy will be provided during a Plenary Session. The 2020 session updates will again be chaired by Ajit Sachdeva (Sach) and speakers will include Jack Kues, Barbara Barnes, Moss Blachman, John Parboosingh, and Don Moore. This session will be similar to the one conducted at the 2019 Annual SACME Meeting when information on activities of the Academy was shared with the SACME Membership and feedback from SACME Members was solicited. In addition, there will be a Plenary Session during which mentees enrolled in the mentorship program of SACME will present highlights of their activities. This session will be chaired by Jack Kues. The new Fellows of the Academy will be inducted immediately after the presentations of the mentees. In addition, the annual 1.5-hour in-person meeting of the Academy of SACME Fellows will be convened on Thursday evening. This meeting will be chaired by Sach. Also, the Faculty Development Committee will have its inaugural meeting on Wednesday morning.

In efforts to further enhance the communication between the SACME Academy and the SACME Board, the SACME President serves as an ex-officio Member of the Academy and following completion of his or her term the SACME President will be inducted as a SACME Fellow and Member of the Academy and assume the role of Chair of the Academy. The Chair of the Academy serves on the SACME Board in the role of immediate Past President. This model is especially designed to ensure continuity and ongoing effective communication between the SACME Academy of Fellows and the SACME Board. The Academy of SACME Fellows looks forward to strong bidirectional communication with the SACME Board. The Chair of the Academy presents monthly updates on various programs to the Board and submits formal reports on a quarterly basis. The Academy reports to the SACME Board. The Academy also looks forward to a strong relationship with the Scholarship Committee and other Standing Committees of SACME.

The Academy is poised to serve SACME well through the active engagement of renowned CPD leaders and experts and involvement of a broad segment of the SACME membership. Activities of the Academy should help in advancing the field of academic CPD and in supporting the major, long-term goals of SACME.

It has been a real privilege and honor for me to serve as Chair of the Academy of SACME Fellows.
2020 SACME Annual Meeting Presentation & Poster Awards

Best Poster Presentation

“How Integrating Systems-level Quality Improvements into a Longitudinal Immuno-oncology (I-O) Educational Strategy” by Melissa A. Kelly, American Society for Clinical Pathology and Joseph Kim, Q Synthesis LLC

Best Practice Presentation Award

“Assessment and Evaluation Session – Debrief Meetings? Ain’t Nobody Got Time for that Stuff” by Ruth Adewuya MD, BS Pharmacy, Stanford School of Medicine

Best RICME Presentation Award

“Understanding Motivation and Needs in CPD Session - An Innovative Approach to Assess Perceived and Unperceived Learning Needs of Psychiatrists in the Province of Quebec” by Meron Teferra, MSc, Continuing Professional Development Office, Faculty of Medicine, McGill University

Young Investigator Award for Early Career or Student for a RICME Abstract

“How Integrating Systems-level Quality Improvements into a Longitudinal Immuno-oncology (I-O) Educational Strategy” by Dillon Welindt, BSc, Wales Behavioral Assessment

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