



## Practicing What We Preach: Tools for Getting Serious About Our Own CPD

Breakout F29

Friday, January 29, 2010

**Competency 8.3: Promote  
professional development  
for self and staff**

## Presenter Disclosures

- Principal presenter: Heather Flynn
  - Does not have an interest in selling a technology, program, product, and/or service to CME professionals
- Co-presenter: Sheila Robertson, MPH, CCMEP
  - Does not have an interest in selling a technology, program, product, and/or service to CME professionals
- Co-presenter: Richard Thielen, PhD
  - Does not have an interest in selling a technology, program, product, and/or service to CME professionals

## Question #1 for Audience

- Which best describes your organization?
  - Commercial Supporter
  - Hospital or Health System
  - Medical Education and Communication Company
  - Medical School
  - Medical Specialty Society
  - State Medical Society
  - Other

## Question #2 for Audience

- What is your most pressing question about developing a staff CPD program?
  - Needs Assessment
  - Gap Analysis
  - Curriculum Framework
  - Administration and Tracking
  - Interventions
  - Evaluation
  - Other

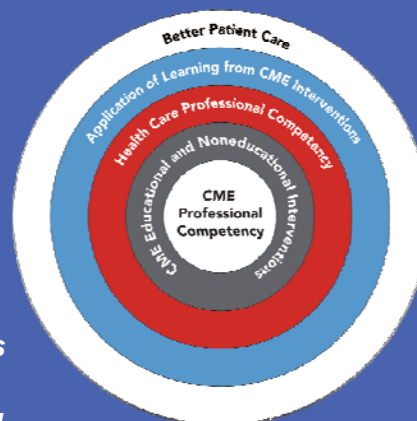
## Session Objectives

At the completion of this session, participants should be able to

1. Adapt the CME Professional Competencies Self-Assessment for use as a **staff needs-assessment tool**
2. Create a **timeline** for developing a staff continuing professional development (CPD) program
3. Describe approaches to establishing a **curriculum framework**, including possible resources and interventions, to use in their CPD program
4. Describe ways to **overcome common barriers** to implementing a staff CPD program

## Link to Conference Theme

- “Establishing CME as a Pathway to Better Patient Care”
- We are catalysts for and facilitators of change in practice and improvement in patient care through the CME interventions we develop
- *Please see the handout for links to the conference purpose, target audience, objectives, and competency area*



“Educate from the inside out”

## Icons You'll See in the Presentation

*Practical Tool*



*CME Planning Parallel*



## CPD Program Background and Foundation



## Why Have a CPD Program?

- Maintain and enhance the skills of your staff
- Empower and equip staff so they are fully capable of executing their roles and responsibilities
- Decrease risk in your work
- Support staff seeking certification
- Ultimately, bring more value to your stakeholders and partners as you plan and implement CME activities

## Some Desired Program Features

- Add depth and structure to already-occurring CPD activities that were in various formats and levels of formality
- Create without great cost or sophisticated technology
- Be structured, yet flexible and expandable to meet evolving and differing needs tailored to
  - Requirements of one's role in the company
  - One's experience level



## Staff Needs Assessment and Gap Analysis

### Needs Assessment Foundation

- Alliance for CME “Competency Areas for CME Professionals” (June 2003)\*
  - Close replica of the Alliance’s CME Professional Competencies Self-Assessment

Alliance Competency Area	Competency Area Description
1	Adult/Organizational Learning Principles
2	Educational Interventions
3	Performance Measurement
4	Systems Thinking
5	Partnering
6	Leadership
7	Administration/Management
8	Self-Assessment and Lifelong Learning

Alliance for Continuing Medical Education. CME Professional Competencies Self Assessment.  
Available at: [http://www.acme-assn.org/home/ComptAreas/self\\_asesmnt.shtml](http://www.acme-assn.org/home/ComptAreas/self_asesmnt.shtml). Accessed January 8, 2010.

## Needs Assessment Foundation (cont.)

- National Commission for Certification of CME Professionals (NC-CME) content outline (March 2008)\*

NC-CME Domain	Domain Description
1	Adult Learning Principles
2	Educational Interventions
3	Relationships With Stakeholders
4	Leadership/Administration and Management
5	Knowledge of CME Environment

National Commission for Certification of CME Professionals. Final Content Outline, NC-CME Certification Exam. Available at: [http://www.nccme.org/pdfs/NC-CME\\_VALIDATED\\_CONTENT%20OUTLINE\\_final\\_2008-03-25.pdf](http://www.nccme.org/pdfs/NC-CME_VALIDATED_CONTENT%20OUTLINE_final_2008-03-25.pdf). Accessed January 8, 2010.

## Needs Assessment Tool

Practical Tool



### ACME Competencies

For each of the competencies below, please place an X in the box for the corresponding rating column that describes the extent to which you perceive the competency to be a responsibility of your job (relevance) and the extent to which you believe you've attained this competency (proficiency).

#### Rating Scale Key

1	2	3	4	5
None	Slight	Moderate	Considerable	Great

#### Competency Area 7: Administration and Management

Manage office operations to meet personnel, finance, legal, logistical, and accreditation standards.

To what extent is this competency a current responsibility of your job? (*relevance*)

To what extent have you attained this competency? (*proficiency*)

	To what extent is this competency a current responsibility of your job? ( <i>relevance</i> )					To what extent have you attained this competency? ( <i>proficiency</i> )				
	1	2	3	4	5	1	2	3	4	5
7.1 Document the value of the CME program to its own organization and learners										
7.2 Manage finances of the CME program to meet the organizational needs										
7.3 Provide appropriate logistics for educational activities										
7.4 Facilitate the work of educational committees										
7.5 Develop a collaborative, service-oriented management culture that promotes continuous improvement										
7.6 Assure compliance with ACCME and other regulatory										
7.7 Apply effective management skills (e.g. problem solving, interpersonal skills, delegation and supervision)										

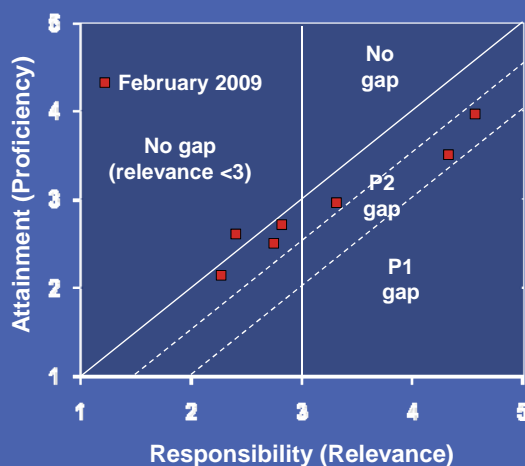
Area 7: Do you have any questions or suggestions regarding specific knowledge, skills, or resources that would best help you attain these competencies?

Modified from: Alliance for Continuing Medical Education. CME Professional Competencies Self Assessment. Available at: [http://www.acme-assn.org/home/ComptAreas/self\\_assessmnt.shtml](http://www.acme-assn.org/home/ComptAreas/self_assessmnt.shtml). Accessed January 8, 2010.

## Needs Assessment: Staff Comments

- Comments and suggestions from staff included:
  - “[I] would like to tap into resources to help me prepare for the CCMEP exam in 2009”
  - “I feel that I have a good understanding of the concepts, but lack the expertise to put them into practice”
  - “I need good, current texts, articles, or training sessions on adult learning principles”

## Gap Analysis: Example Results for Comp. 7.1-7.7



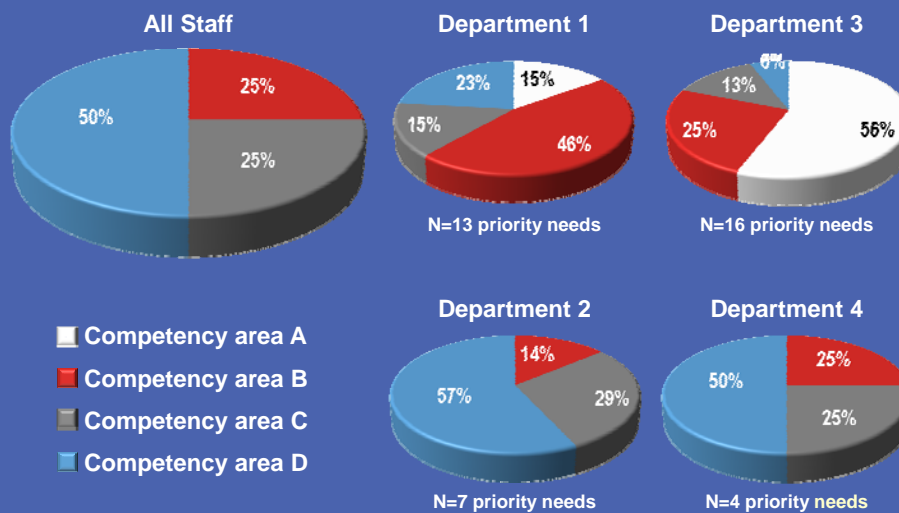
- Priority 1 (P1) gap:  
Relevance – proficiency  $\geq 1$
- Priority 2 (P2) gap:  
Relevance – proficiency = 0.50-0.99
- Gaps not considered if relevance  $< 3$

## Priority Needs: Example Results (C7: Administration/Management)

Alliance C #	Competency Description	All Staff	Dept 1	Dept 2	Dept 3	Dept 4
7.1	Document the value of the CME program to its own organization and learners		P1			
7.2	Manage finances of the CME program to meet the organizational needs			P1		
7.5	Develop a collaborative, service-oriented management culture that promotes continuous improvement		P2	P1		
7.6	Assure compliance with ACCME and other regulatory requirements					P2
7.7	Apply effective management skills (eg, problem solving, interpersonal skills, delegation and supervision)	P2	P2	P1	P1	P2

P1=priority 1 (Relevance - proficiency  $\geq 1.0$ )  
P2=priority 2 (Relevance - proficiency = 0.50-0.99)

## Priority Needs: Example Results by Department



## Gap Analysis: Our Results

- No priority 1 gaps at company aggregate level
- Some priority 1 gaps emerged for particular competencies at the individual and department levels
  - Diversity of roles and experience levels across the company

## Example of Desired Outcomes

*CME Planning  
Parallel*



- Close the gaps
- Target # of contact hours per year per employee
- Target # of attained certifications by staff

# Curriculum Framework and Resource Library

## Curriculum Framework

- CCMEP certification exam study sessions were cornerstone of pilot year program
  - Developed by CME Enterprise President, Bruce Bellande, PhD, FACME, CCMEP
  - Study outline covers many crucial elements, including identified company-level priority 2 gaps
  - Formal training binders provided study guide, references, and resources to support the concepts in each domain

## Curriculum Framework: Additional Interventions

- Journal club
  - *Journal of Continuing Education in the Health Professions (JCEHP)*
  - *CE Measure*
  - *Harvard Business Review (HBR)*
  - *PM Network*
- Internal policies and procedures
- Medical lunch-n-learns
- Alliance for CME Webinars
- Independent Webinars (partners, supporters, etc)
- Attendance at major external meetings (Alliance, AMA Task Force) and review of key takeaways with staff

## Curriculum Framework: Example of Competency Links

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Alliance C #	Competency Description	Possible Interventions/Resources
3.6	Promote <b>continuous improvement</b> of the CME office	<ul style="list-style-type: none"> <li>• Journal club - <i>MM&amp;M</i> and <i>Almanac</i> articles</li> <li>• Alliance for CME Webinars</li> <li>• Alliance for CME 2009 Annual Meeting review sessions</li> </ul>
5.4	Apply effective <b>communication and interpersonal</b> skills	<ul style="list-style-type: none"> <li>• Journal club - <i>HBR</i> and <i>PM Network</i> articles</li> </ul>
7.7	Apply effective <b>management skills</b> (eg, problem solving, interpersonal skills, delegation and supervision)	<ul style="list-style-type: none"> <li>• Journal club - <i>HBR</i> and <i>PM Network</i> articles</li> <li>• Workshops - eg, Handling Objections</li> </ul>

## Resource Library

- Handouts and study materials for each intervention
- Audio recordings for CCMEP study sessions
- Supplemental resources to further support staff seeking certifications
  - Book chapters, slide sets, literature resources

## Administration and Tracking

## Timeline: Year 1 (Pilot Year)

- February 2009 Staff Needs Assessment
- March Gap Analysis
- April Curriculum Framework, Tracking Tools
- May-November Interventions (Webinars, CCMEP Prep Sessions, etc)
- November Summative Evaluation
- December Analysis of Remaining Gaps
- 2010 *Individual Learning Plans*

## Administration Pre-Intervention

- Designated staff member schedules intervention—whether live/internally driven or external opportunity (ie, Alliance for CME Webinar)
- Intervention is added to master tracking spreadsheet
- Sign-in sheet is created; utilized much like verification of participation at a CME activity—only claim credit commensurate with participation

## Administration Post-Intervention

- Sign-in sheet scanned; electronic copy archived as well as original hard copy in binder
- Tracking spreadsheet updated
- All available handouts, resources, etc, obtained and cataloged in resource library

## Sign-in Sheet

Practical Tool



### Continuing Professional Development (CPD) Program Intervention Sign-in/Attendance Verification Form

Host/Sponsor: <Internal, ACME, Partner, etc>		
Title/Description/Topics: <Official session title, article title, topics, etc>		
Presenter(s)?: <Presenter name(s)>		
Format: <input type="checkbox"/> Live Meeting <input type="checkbox"/> Live Webinar <input type="checkbox"/> Enduring (Articles, etc) <input type="checkbox"/> Other:		
Date: <Day and Date>	Time: <Start time – end time>	# Contact Hours: <# avail hrs>
Organizer: <Individual sending meeting request, email, etc>		
Category: <input type="checkbox"/> Internal-Company Level <input type="checkbox"/> Internal-Department Level <insert dept name and contact>		

*NOTE: Participants should only claim contact hours commensurate with the extent of their participation in the intervention. Those arriving late to or leaving early from interventions should update the sign-in sheet accordingly, with claimed hours in 0.25 increments.*

*\*Presenters will also receive contact hours for presenting, in addition to participating.*

Staff Name	Staff Signature	Contact Hours Claimed
Bloom, Benjamin		
Doe, Mary		
Flexner, Abraham		
Knowles, Malcolm		
Maslow, Abraham		
Osler, William		
Smith, John		



# Tracking: Intervention Details

Format	Host	Intervention / Resource	Title/Description/Topics	Scheduler	Presenter(s) (internal receive double credit)	Handouts	Occurrence	Date	Time (location if live/external training)	ACME Competency Area(s) (1-5)	CCMEP Domain(s) (1-5)	# Contact Hours	Status
<b>INTERNAL</b>													
Live - Meeting	CMEE	Journal Club	Evaluating Your Evaluations: A Practical Guide (CE Measure); Outcomes Analysis of Case-based Education in a Multidisciplinary, Multiple Format Setting (CE Measure); Picking the Right Transition Strategy (HBR)	Staff A	Staff C, Staff D, Staff E	Agenda, articles, and reviews filed electronically	Monthly	01/26/09	11:00am-1:00pm	2, 3, 7	1, 2, 4	2.00	Completed
Live - Meeting (in conjunction with monthly CMEE staff meeting)	CMEE	CMEE Policies and Procedures Training	Policies on content review and validation, educational planning, evaluation and improvement	Staff A	Staff F	Policy handouts distributed in session; filed electronically	Monthly	04/30/09	8:30-10:00am	7	6	0.60	Completed
<b>EXTERNAL - WEB</b>													
Online - Webinar	ACME	Legal Issues Impacting CME (2 Session Package)	Session 1: Federal (FDA, HHS, OIG) and State Regulation of Certified CME	Staff A	John Kamp	Handouts downloaded from ACME Web site; in file (session ID = 2280)	Series of 2	05/14/09	2:00-3:00pm	7	5	1.00	Completed
<b>EXTERNAL - MEETINGS</b>													
Live - Meeting	ACME	ACME Annual Meeting 2009	Conference theme: Elevating the Profession and Practice of Continuing Medical Education: Professional Challenges in the 21st Century; Various sessions and	Staff B	Various	Program book and session slide handouts collected by managers; relevant information distributed at ACME Annual Meeting shared learning sessions	One-time	01/28/09 - 01/31/09	San Francisco CA	1,2,3,4,5, 6,7,8	1,2,3,4,5	Varies	Completed



# Tracking: Staff Participation

Format	Title/Description/Topics	Staff A	Staff B	Staff C	Staff D	Staff E	Staff F	Staff G	Staff H	Staff I	Staff J
		Dept 1	Dept 1	Dept 1	Dept 2	Dept 2	Dept 3	Dept 3	Dept 4	Dept 4	Dept 4
<b>INTERNAL</b>											
Live - Meeting	Evaluating Your Evaluations: A Practical Guide (CE Measure); Outcomes Analysis of Case-based Education in a Multidisciplinary, Multiple Format Setting (CE Measure); Picking the Right Transition Strategy (HBR)	3.00	3.00	4.50	19.50	5.50	2.00	3.50	30.00	1.50	2.50
Live - Meeting (in conjunction with monthly CMEE staff meeting)	Policies on content review and validation, educational planning, evaluation and improvement	2.00	2.00	4.00	4.00	4.00	2.00	2.00	2.00		
<b>EXTERNAL - WEB</b>											
Online - Webinar	Session 1: Federal (FDA, HHS, OIG) and State Regulation of Certified CME	1.00	1.00		1.00	1.00	1.00	1.00	1.00	1.00	
<b>EXTERNAL - MEETINGS</b>											
Live - Meeting	Elevating the Profession and Practice of Continuing Medical Education:				14.00				26.50		

# Outcomes

## How Do We Know We Are Successful?

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Parallel*



- Did we ...
  - Close the gaps?
  - Attain target # contact hours?
  - Attain target # certifications?
- Employee assessment of success
  - Conducted staff satisfaction survey
  - Invited feedback regarding the relevance of interventions, format, ideas for improvement in 2010

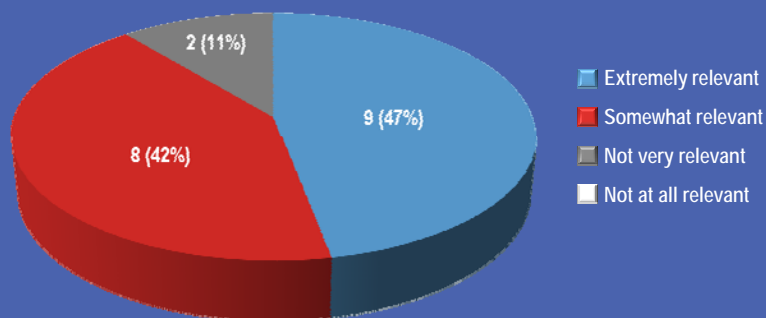
## Outcomes: Exceeded Hours and Certification Goals

- Contact hour goal: 60 hours/employee
  - Outcome: average 73 hours/employee
  - Inflated slightly by those in corporate-sponsored certification classes for PMI and LSS, as well as those attending multi-day external industry meetings
- Certification goal: 11 (out of 18 staff)
  - Outcome: 12 certifications attained
    - 2 CCMEPs (3 total)
    - 3 PMI CAPMs
    - 7 LSS yellow belts (16 total yellow, 1 green)

PMI=Project Management Institute. LSS=Lean Six Sigma. CAPM=Certified Associate in Project Management.

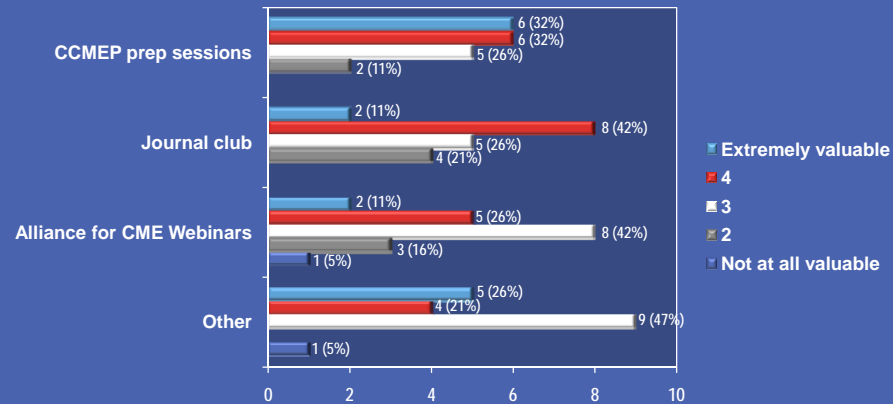
## Outcomes: Interventions Were Relevant

- As they relate to my particular role at CME Enterprise, the CPD Program and the interventions in which I had the opportunity to participate in 2009 were:



## Outcomes: Interventions Were Valuable

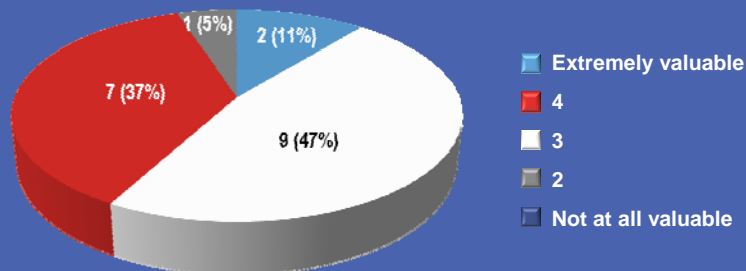
- Please rate the following types of CPD interventions based on how valuable you think they were in providing meaningful takeaways and helping you do your job better



## Outcomes: CPD Program Value to Self-Actualization

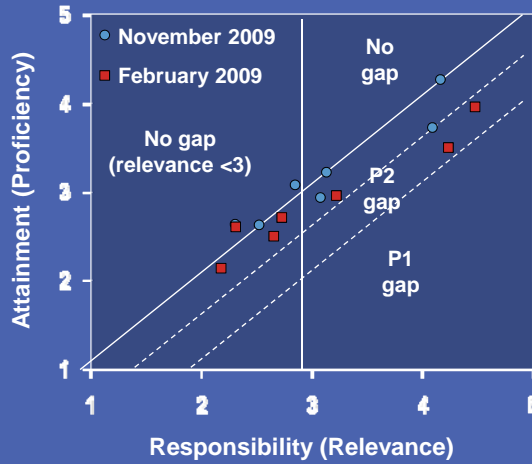
- The ultimate goal of the CME Enterprise CPD program is to help you achieve self-actualization\*. Recognizing that our CPD program is not yet one year old, please rate the level to which the program has been valuable to your self-actualization

\*Defined as the apex of Maslow's hierarchy of needs as "the full realization of one's potential" or "the tendency for the individual to become actualized in what he is potentially...to become more and more what one is, to become everything that one is capable of becoming."



# Outcomes: Example of Closing the Gap

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- Re-conducted initial needs assessment survey
- Compared change in gaps from start (red squares) to end (blue dots) of 2009 program
- Many factors contribute to change
  - Formal CPD
  - Informal learning experiences
  - Other activities

## Best Practices to Overcome Barriers

## Best Practices to Overcome Barriers

Barrier	Best Practice
Time commitment for staff to participate in formal CPD interventions	<p>Be realistic about time commitment involved</p> <p>Consider Web-based interventions and recordings of live interventions that are accessible on-demand to suit individual staff schedules</p>
Challenge of meeting many individuals' varying needs	Build out corporate-level program first; then with experience, expand efforts to the department and individual level

## Ideas for Expansion/Improvement

- More focused curriculum, driven by company and department managers
- Self-directed learning and individual learning portfolios
  - Implementing in 2010
- Tracking mechanism for non-company initiated (individually driven) interventions
  - What should qualify?
  - How to count credit?

## Ideas for Expansion/Improvement (cont.)

- Make more effective use of resource library
  - Point-of-need learning
  - Opportunities for reinforcement
  - Store and retrieve intervention materials and tools
- Conduct formative evaluations
  - Assess relevance of interventions
  - Determine intended change in practice
  - Follow up to reinforce learning and measure actual change in practice
- Continue to apply CME planning principles in the design and format of CPD interventions

*CME Planning  
Parallel*



## Practical Tools for Getting Started



## Practical Tools

- Needs assessment tool
- Sign-in sheet
- Tracking spreadsheet sample
- CPD resource library

## How Will I Get Started?

- Write down 3 practical ways you can either start a CPD program in your organization, or improve upon an existing program
- Discuss with your neighbor; what can you learn from their ideas?
- For those that have already implemented a CPD program, any advice for the group?

## For More Information

Please visit our poster presentation, titled  
**“Educating From the Inside Out:  
A Provider Model for Continuing Professional  
Development of CME Professionals” (AP1)**

Or contact one of the presenters

Thank you for coming  
and good luck with your CPD programs!

## Link to Conference Purpose

- This session is directly linked to the Alliance conference purpose, which is advancing the Alliance’s mission to provide professional development opportunities for CME professionals, advocate for CME and the profession, and strive to improve health care outcomes
- This session is focused on how we can ensure we are developing and maintaining competent, credible CME professionals committed to lifelong learning as the foundation for the development and delivery of effective CME

## Link to Conference Theme

- This session is related to this year's conference theme, which is Establishing Continuing Medical Education as a Pathway to Better Patient Care
- Just as our healthcare professional learners must be committed to performance and quality improvement and lifelong learning, so must we be committed to doing the same in our profession; we can and should put into practice many of the common CME activity planning principles: "educating from the inside out"

## Link to Conference Theme (cont.)



- In many ways, we, as CME professionals, are the beginning of change in practice and improvement in patient care; we are the catalyst and facilitator for many very important learnings through the CME interventions we develop, so it stands to reason that we should strive to create and maintain the most proficient foundation possible for this process

## Link to Conference Target Audience

- The segments of the conference target audience that are the focus of this session include:
  - People who have been working in the field but who want to sharpen their skills
  - Individuals with an in-depth understanding of CME but who want to expand their knowledge and advance the field

## Link to Conference Objectives

- The conference objectives that are relevant to this session include:
  - Assess continually individual/organizational performance and make improvements via relevant learning experiences
  - Provide leadership for the CME program that emphasizes improvement, professionalism, and ethics
  - Recognize physicians and CME professionals as part of a health care system when providing learning interventions
  - Comprehend evidence-based adult and organizational learning principles that improve performance and outcomes
  - Establish continuing medical education as a pathway to better patient care

## Link to Competency Areas and/or Competency

- The ACME Competency Area related to this session is Competency Area 8, Self-assessment and Life-long Learning – Continually assess individual and organizational performance and make improvements through relevant learning experiences
- In particular, we will be addressing Competency 8.3 – Promote professional development for self and staff