



## Measuring Professional Practice Gaps of Your Learners

Transcript of Video FAQ  
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<http://education.accme.org/video/accme-video-faq/measuring-professional-practice-gaps-of-your-learners>

### ***Description: Do I need to measure professional practice gaps in my own learners?***

Who makes the measurements that wind up being used by accredited providers as professional practice gaps? Many providers feel or thought that they had to make an individual measure on each individual learner and add those measures up and that was the professional practice gaps of the learners that they were trying to address. That's fair. For some, you wanted to do that; that would be compliant with the ACCME Criteria. But, there's much easier ways, much more relevant ways, much more efficient ways to arrive at professional practice gaps that are perfectly valid and very important for all the physicians in the country.

Starting at the very highest levels, there's data that some people call the annual report card. The Commonwealth Fund, the Rand Corporation, produce data on an annual basis that describes the ability of patients in this country to get care according to benchmark measures. Some of the data shows that overall, a patient has only a 55 percent chance of getting care according to benchmarks. And for some problems like hypertension, they might have a 65 percent chance; for alcohol dependence, they might have a 10 percent chance. Those measures are valid scientific measures of professional practice gaps of everyone who delivers care to alcohol-dependent people or people with hypertension in this country. And it is fair for accredited providers to say: We're going to try to address that. And for example, the alcohol dependence, we're going to get our institution to assume that every physician in the institution sees patients with alcohol dependence — they might not recognize them — but they see them. And we're going to say that the need that underlies the professional practice gap of that 10 percent versus 90 percent, is that people don't know the epidemiology. And we're going to try to address that and then we're going to measure it in terms of their changed ability and the changed strategy, changed approach, to all of their patients.

You could do it from the literature. You read the literature and you find that in the literature, the case studies in the literature on a certain clinical problem, demonstrate a common systematic institutional error, problem, challenge that contributed to the outcome that was reported. And that you in your institution are going to say: We're going to use this literature-based professional practice gap that was determined from these case studies and we articulate it. You say to the ACCME, The professional practice gap that we've identified from this literature review is the following: The physicians were unable to recognize the pathophysiology as it was unfolding and



that our educational interventions were designed to create recognition by the physicians of the unfolding pathophysiology. And that's linking the literature to your physicians and your physicians' patients and using that professional practice gap to develop your educational activity.

So, three examples: measuring everybody who comes into the room before they come into the room, looking at the literature and treating everybody as a population, taking the literature and saying: We have found a pattern that is a professional practice gap in the literature and we're going to address that. These are all opportunities and options for the accredited provider to use in fulfilling our Criteria and meeting the needs of the learners.

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