



Different Approaches to Planning CME Activities

Transcript of Video FAQ

December 18, 2009

<http://education.accme.org/video/accme-video-faq/different-approaches-to-planing-cme-activities>

Description: Does the planning process for a CME activity have to follow the ACCME's Criteria in order or in any special sequence?

The ACCME Accreditation Criteria can be looked at as an algorithm for planning. But they don't need to be rigid and seen as inflexible and sequential and over a certain period of time.

The traditional way to plan a CME activity is that some months out one decides what professional practice gap one wants to address. They are thoughtful and reflective in looking at what need underlies that and decide what the structure of their educational activity should be. They bring in the right media, the right people, the right authors, they write narrative, they do presentations, they deliver them. After, they evaluate, they analyze their results and they look back and they try to implement change. That whole scenario describes compliance with most of the ACCME Criteria, from establishing your mission through evaluation and change and improvement. But that time sequence and timeline isn't required by the ACCME and there's opportunities for organizations to integrate the Criteria into educational activities that perhaps they've never thought of doing.

The example that I use is morbidity and mortality rounds, where a group of professionals comes together to analyze their team's management of a patient circumstance. They have an undesirable outcome that they want to examine. And they enter the educational activity without necessarily a professional gap identified. They get together and they talk and they keep talking with each other until they arrive at the professional practice gap. Maybe thirty minutes in to the hour-long session they say: So this is what our team could have done better than it did. This is what our team could have done to prevent this undesirable outcome that we got. That's our professional practice gap. And people sit back in their chairs and go: Now why was that? Was it because we didn't know? Because we didn't have the right strategy? Or could we just not execute our strategy appropriately? The group reflects on it and comes up with an answer and says: Nope, this was strategic, we just didn't have a right plan of action for this set of circumstances that we'd seen before. But, we just didn't have it. So, let's articulate that. And there the group designs the strategy that they're going to use. They've identified the need that underlied the professional practice gap, they design their future strategy. And the difference between the strategy that they used and the strategy that they now articulate is the change for the group. So, in this scenario, this group established the difference between what they should



do and what they were doing. So they established the professional practice gap as called for in Criterion 2. And they moved on to establish what it is they would do in the future. So, they designed this educational event this one hour or one-and-a-half-hour morbidity and mortality round in compliance with C.3. They designed the educational activity, they designed it to change practice, to change competence. So that they identified what it was that they did wrong, then they moved on to say: We're not leaving this room until we establish how we are going to deal with this in the future and compare it to what we have done in the past. They designed the activity so they can demonstrate for us, for ACCME, and for themselves that the added value of creating this as an educational activity is that there is a deliverable. They come out with having designed it and they come out with change that can go on and measure their performance.

Imagine that next time when they get together they start off saying: Last week we decided that we were going to change our strategy for addressing this problem. Have we seen that problem since? And if they say, yes, they review: What did we do? And you could say: Well, you know, we actually changed our performance as a result of that educational event. So there was an early measure of change in strategy and a later measure of change in competence. It doesn't have to be the next week. It could be the next year, it could be at the end of the year. It could be a summary activity. All of these are accommodated for in the ACCME Accreditation Criteria.

© 2009 Accreditation Council for Continuing Medical Education; all rights reserved.

For non-commercial educational use only. For permission to reproduce and/or distribute for other purposes, please contact postmaster@accme.org.