

CMEHappenings

July 2024

About Us

The UConn School of Medicine's Office of Community and Continuing Medical Education serves the educational needs of physicians and other clinicians both within UConn Health and throughout the state of Connecticut. The office supports educators who strive to plan, implement, and evaluate educational events whose goals are to enhance patient care and to improve clinical practice. The office accomplishes these goals by sponsoring, reviewing, and approving educational programs, as well as a by providing knowledgeable faculty to present and discuss important health-related matters.

The UConn School of Medicine's target audience of UConn CME includes the broad range of the medical profession, from full-time practitioners to academic physicians with special interests in research and teaching, primary care providers, and other related health professionals. The ACCME credits through the office of Community and Continuing Medical Education is specifically associated with those licensed as M.D., D.O., and APRNs, however, all other related health professionals are welcome to attend any CME event and use the certificate of credit for their certificate attendance for their own professional development activities.

Office of Community & Continuing Medical Education

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Newsletter of the UConn School of Medicine Office of Community & Continuing Medical Education

> The UConn School of Medicine is accredited by the Accreditation Council for Continuing Medical Education (ACCME) as a provider of continuing medical education. The school offers a variety of ACCME accredited continuing education programs by working in partnership with UConn Health Departments.

The Al Revolution: A Hot Topic @ ACCME's 2024 Annual Meeting

The ACCME's annual meeting, Learn to Thrive 2024, was held from May 14-16, 2024, hosted a variety of sessions centered on the concept of "Artificial Intelligence (AI)" in Continuing Education (CE). These sessions focused on addressing the trends of using AI-related clinical competencies for health professionals in developing CME/CE strategies, revolutionizing continuing medical education in harnessing AI for CME/CE providers, and the creative frontiers in CME/CE with the AI revolution that is now taking off.

The keynote speaker, **Dominic Slauson**, **Learning Experience Designer**, **University of California**, **Irvine**, provided us an exploration into the transformative role of generative AI in advancing continuing education (CE). We learned how AI can augment human creativity in crafting dynamic educational content, ranging from simple analogies to intricate roleplay scenarios, while delving into the ethical considerations of its application. To learn more about what Dominic Slauson has create and made as open source resources, please visit his webpage: <u>https://www.codaptivelabs.com/</u> where you can find a wealth of information regarding AI and most notably, a prompt and GPT library that he has developed and open to anyone to use.







Accredited Continuing Medical Education that Delivers.

Accredited continuing medical education (CME) plays an invaluable role helping physicians and healthcare professionals improve patient care. For physicians, it can improve performance by focusing on the unique needs of individual learners. For organizations, accredited CME can be a catalyst for change, providing practical solutions to many of their most pressing problems. The evidence is in.

Accredited CME:

- Improves patient safety. CME has been shown to be one of the most effective methods for improving physician performance (1).
- Controls spending. Unnecessary medical procedures, prescriptions, and hospital readmissions are averted (2, 3).
- Increases physician recruitment and retention. CME has been linked to a decrease in physician burnout and turnover (4, 5, 6). Physicians thrive through meaningful work and feedback tied to their own practice.
- Protects physician learners. Commercial influence in medical education puts learners at increased risk (7). Accreditation protects the integrity and independence of medical education, ensuring it is accurate and based on best practices (8, 9).
- Uses teams to improve care. Interprofessional teams are empowered to work more effectively together to achieve their organization's quality improvement and strategic goals (10).
- Expands preventative care. Accredited CME has a proven track record of life-saving interventions. It has been linked to increases in stroke identification, timeliness of care, cancer screenings, pediatric immunizations, and more (11, 12).

For organizations looking to innovate, investing in accredited CME can provide a remarkably costeffective solution. CME professionals know how to improve performance, eliminate waste, and inspire and reward valued employees. CME is designed to plan, assess, and create change (13). Engagement and participation in CME are at record levels, with roughly 230,000 accredited educational activities and over twenty-one million physician interactions reported in 2022 (14). Organizations that invest in accredited CME can expect a meaningful return on their investment—it makes change possible for physicians, teams, and our larger healthcare system.

References

(1) Cervero, Ronald, and Julie Gaines. "The Impact of CME on Physician Performance and Patient Outcomes: An Updated Synthesis of Systematic Reviews." Journal of Continuing Education in the Health Professions 35, no. 2 (2015): 131-138.

(2) Cook, David A., Chistopher R. Stephenson, John M. Wilkinson, Stephen Maloney, and Jonathan Foo. "Cost-effectiveness and Economic Benefit of Continuous Professional Development for Drug Prescribing: A Systematic Review." JAMA Network Open (2022).

(3) Decreases in patient readmissions were reported by ACCME-accredited providers who achieved Accreditation with Commendation in July 2021-March 2022.

(4) Griebenow, Reinhard, Henrik Hermann, Michael Smith, Mohamed Bassiony, Arcadi Gual, Philip K. Li, Essam Elsayed, Robert D. Schaefer, Siham A. Sinani, and Graham T. McMahon. "Continuing Education As a Contributor to Mitigating Physician Burnout." Journal of CME 12, no. 1 (2023).
(5) McMahon, Graham T. "The Leadership Case for Investing in Continuing Professional Development." Academic Medicine 92, no. 8 (2017): 1075-1077.

(6) National Academy of Medicine. "National Plan for Health Workforce Well-Being." The National Academies Press (2022): 64.

(7) Marks, Jonathan H. "Lessons from Corporate Influence in the Opioid Epidemic: Toward a Norm of Separation." Journal of Bioethical Inquiry 17, (2019): 173–189.

(8) Accreditation Council for Continuing Medical Education. "Standard 2: Prevent Commercial Bias and Marketing in Accredited Continuing Education." Standards for Integrity and Independence in Accredited Continuing Education.

(9) Accreditation Council for Continuing Medical Education. "Standard 1: Ensure Content is Valid." Standards for Integrity and Independence in Accredited Continuing Education.

(10) Reeves, Scott, Simon Fletcher, Hugh Barr, Ivan Birch, Sylvian Boet, Nigel Davies, Angus McFadyen, Josetta Rivera, and Simon Kitto. "A BEME Systematic Review of the Effects of Interprofessional Education: BEM Guide No. 39." Medical Teacher 38, no. 7 (2016): 656-668.

(11) ACCME-accredited providers who achieved Accreditation with Commendation in July 2021-March 2022 reported success in increasing cancer screenings, pediatric immunizations, vaccinations, stroke identification and more. They also reported decreased mortality rates through smoking interventions and alternatives to opioid prescriptions.

(12) The Texas Medical Association accredited provider Gulf Coast AHEC reported using targeted accredited CME to reduce the occurrence of patient sepsis cases in their state.

 (13) Moore, Donald E. Jr, Kathy Chappell, Lawrence Sherman, and Mathena Vinayaga-Pavan. "A Conceptual Framework for Planning and Assessing Learning in Continuing Education Activities Designed for Clinicians in One Profession and/or Clinical Teams." Medical Teacher (2018).
 (14) Accreditation Council for Continuing Medical Education. ACCME Data Report: Renewal and Growth in Accredited Continuing Education – 2022.



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Kickoff to the CME Office's 2024-2025 Reaccreditation Process!

We have officially begun our 12-month reaccreditation process. This is a process that takes place every 4 years (for standard accreditation) or every 6 years (if accreditation with commendation). The process involves learner data that is uploaded into the ACCME's learner data tracking system, a written self-study, a review of performance in practice which involves 15 program activities pulled into an audit process and a site interview. The data upload into the ACCME tracking system is the first deadline that must be met by mid-July 2024 and then both the written self-study and responses to the audit is due late November 2024. In early spring 2025, the CME office will have their accreditation interview with the site surveyors. If no further data requests are needed by the ACCME site surveyor team, the CME office will receive their notification status in July 2025 if they were successfully reaccredited!



CME Calendar of RSS Events

Click on the link to explore current offerings:

https://health.uconn.edu /continuing-medicaleducation/





Q: What cannot be on the Speaker's Content Slides?

A: Educational materials that are part of accredited education (such as slides, abstracts, handouts, evaluation mechanisms, or disclosure information) must <u>not contain</u> any marketing produced by or for an ineligible company, including corporate or product logos, trade names, or product group messages. In addition, presentations shall not use the names, images, biographies, or other recognizable features of patients without prior express written permission. (Data or materials that are 'anonymized' or otherwise modified to prevent recognition of individuals are permitted.)

However, Information distributed about accredited education that does not include educational content, such as schedules and logistical information, may include marketing by or for an ineligible company.

Refer to ACCME