

# Policy on the Content of CME

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## INTRODUCTION

In accordance with Sunrise Health System's (SHS) CME Mission Statement, CME offered by SHS is ultimately for the purpose of improving quality of care and safety for the patients whose physicians are SHS learners. The CME Program is managed by Office of Continuing Medical Education (CME) and overseen by the Education and Library (E & L) Committee.

## THE ORIGIN OF SUNRISE HEALTH SYSTEM CME CONTENT

Office of CME planning staff collaborates with the E & L Committee, quality and safety leadership, medical authorities and department heads within the medical center community and other experts—both on a planned quarterly basis as well as individual ad hoc sessions to identify practical issues that arise in the scope of practice at SHS and the greater metropolitan Las Vegas, Nevada area for which it provides care. This 'ideation' process generates a formal process of gap analysis. In addition, formal assessment of issues relating to quality and safety outcomes, obtained from Quality Improvement, Clinical Improvement Committees and other sources are used to identify gaps and target educational interventions.

The Office of CME applies a traditional and classical gap analysis process consistent with isolating learner gaps based on a comparison of current versus best practices. Once learner gaps are identified, they become the basis for the development of learning objectives, which in turn inform the content of CME interventions certified by Sunrise Health System.

## IDENTIFICATION OF INTENDED EDUCATIONAL OUTCOMES

For each identified gap, CME planners make a determination as to the focus of education and its related intended outcomes. Options include an improvement in (1) learner competence, and/or 2) learner performance-in-practice, and/or (3) patient outcomes. Often it is a combination of all three possible outcomes.

The choice of educational outcomes measurement (EOM) tools relates directly to the intended outcome linked to each identified gap. Office of CME frequently collaborates with internal medical center quality and patient safety departments to assess impact on health indices.

## ASSESSING LEARNER SCOPE OF PRACTICE AND ITS IMPACT ON CME CONTENT

As an integral part of the planning of CME content, Office of CME staff and physician planners perform an in-depth analysis of the scope of practice of its targeted learners. With the realization that various targeted learner cohorts have differing scopes of practice, planners must gain an understanding of the current or potential scope, including:

- Demographics of the targeted learners' practices with special attention to cultural diversities.
- The patient mix of the learner cohort.
- Levels of specialization.
- Ideal practices as identified by the appropriate specialty certifying board and/or national specialty society.

## IDENTIFICATION OF BARRIERS TO CHANGE AND STRATEGIES TO ADDRESS THEM

As the goal of every CME activity is behavior change, planners must ensure that consideration has been given to barriers that could impede such change or other factors outside SHS's control that could impact the desired results of the activity. Office of CME's comprehensive planning document contains prompts for planners to implement this requirement and document educational strategies that will be utilized in CME content to address, overcome or remove such barriers to change.

## PREPARATION OF LEARNING OBJECTIVES

As a final step in the development of CME content, CME planners will utilize gap analyses to write learning objectives that reflect best practices from the gap analysis, the results of the analysis of scope of practice, and the type of intended results stipulated in the planning process.

Learning objectives are written in terms of competence, performance, and/or patient outcomes, and are actionable and measurable.

## EDUCATIONAL OUTCOMES MEASUREMENTS (EOM)

Every CME activity will include one or more outcomes measurements that link to the intended outcomes as indicated above. The choice of an EOM tool depends on whether the activity was designed to improve competence, and/or performance, and/or patient outcomes.

## INDEPENDENCE

Sunrise Health System and its Office of CME are solely responsible for the development of all aspects of the planning of CME including:

- The gap analysis that is the foundation for the activity
- Development of learning objectives
- Designation of intended outcomes
- Analysis of the scope of practice of targeted learners
- Selection of educational methods and formats

- Selection of faculty, other teachers and planners
- Choices of outcomes measurement tools

Under no circumstances will SHS consult with the commercial supporters of the activity or other relevant commercial interests to validate the content of the activity, suggest faculty resources, or to distribute the content of the CME activity.

With regard to referencing trade names, as a general rule, SHS does not reference trade-named products in its educational materials. Should a situation arise in which the use of a trade name is warranted because learners would not recognize the generic or scientific name of the product referenced in the context of treatment discussions, then all products mentioned should reference their trade names so as not to distinguish the products of a company supporting the activity.

All content certified by SHS will observe the following policies:

- The content of CME activities does not promote the proprietary interests of any commercial interest.
- CME activities will provide a balanced view of therapeutic options and conforms to the generally accepted standards of experimental design, data collection and analysis.
- Recommendations involving clinical medicine in a CME activity will be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients.
- Content will not contain recommendations, treatment, or manners of practicing medicine that are not within the ACCME and AMA definition of CME, nor are known to have risks or dangers that outweigh the benefits, nor are known to be ineffective in the treatment of patients.