


 **MEG** Medical Education Group

Polling Question

In which setting do you work?

- A. Academic Medical Center
- B. Society or Association
- C. Healthcare System/Hospital
- D. Medical Education Company
- E. Gov't/VA
- F. Other


 

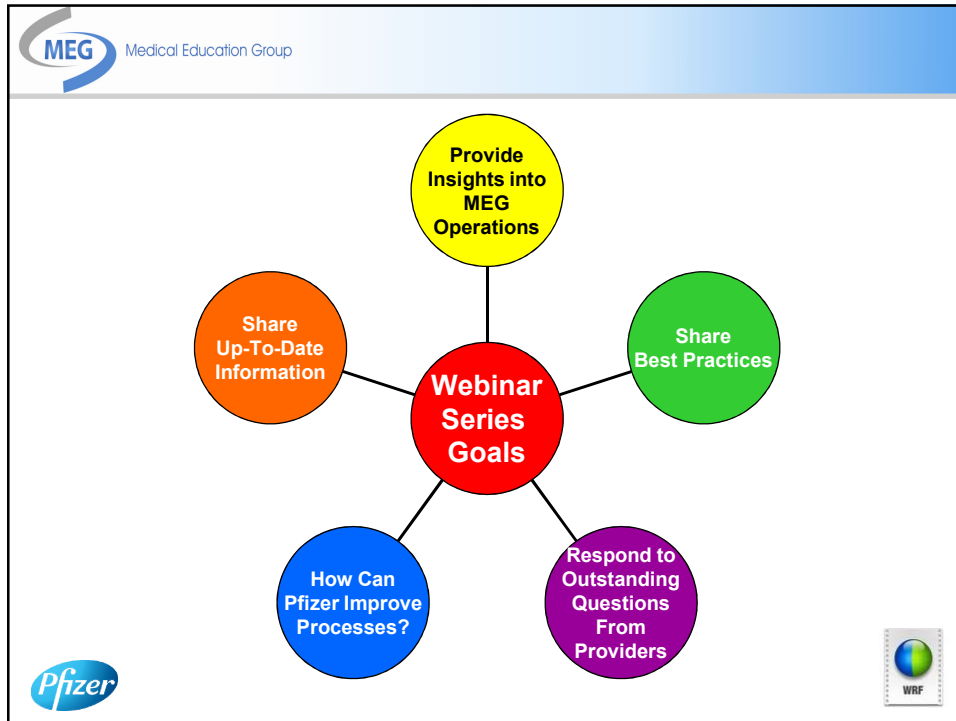
 **MEG** Medical Education Group

**First Fridays Webinar Series:
Medical Education Group (MEG)**


September 9th, 2011

This webinar is being recorded



 




- ## Agenda
- Welcome
 - *The Value Proposition of CME*, Todd Dorman, MD, FCCM, Associate Dean & Director, Continuing Medical Education Professor & Vice Chair for Critical Care Department of Anesthesiology & Critical Care Medicine Joint Appointments in Medicine, Surgery and the School of Nursing Johns Hopkins University School of Medicine
 - Q and A
 - Closing Remarks
- Logos for MEG Medical Education Group, Pfizer, and WRF are present in the slide's header and footer.

 **Calls for Grant Applications**



- **Clinical Areas**
 - Adult Immunization
 - Improving Care for Patients with Renal Cell Carcinoma (RCC): Supporting Practice Improvement in Community Oncology Setting
 - Improving Care for Patients with Non-Small Cell Lung Cancer: Accelerating Adoption of New Guidelines and Evidence-Based Practice Change
- **Due Date:** 10/15/2011
- **Expected approximate monetary range of oncology grant applications:** \$25,000-\$100,000



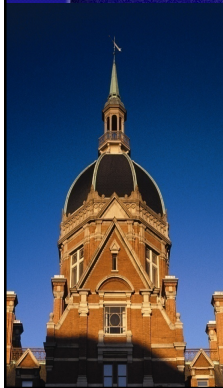
The Value Proposition of CME

Todd Dorman, MD, FCCM
Associate Dean & Director, Continuing Medical Education
Professor & Vice Chair for Critical Care Department of
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in Medicine, Surgery and the School of Nursing Johns
Hopkins University School of Medicine

Leadership in Lifelong Learning

Continuing Medical Education A Value Center



Todd Dorman, M.D., FCCM
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Immediate Past President, SACME


Discovering and Disseminating the Value of Continuing Medical Education

Webinar
September 2011



Disclosures

I have no relevant financial interests to disclose




Education Scope

- **Keywords**
 - Ethics, professionalism, value, education
- **Core Competency**
 - Professionalism
 - Practice-based learning/Improvement

Objectives: Attendees will be able to.....

Formulate a presentation, pertinent to their environment so as to establish themselves as a Value Center within their organization

List three values Ed. brings to their organization at the macro and micro environmental levels



- In fact, under the traditional model, student performance is expected to show a **wide range of abilities**.....The highest-performing students are given the highest grades...and the lowest performing students are given low grades. Schools used norm-referenced tests, such as ... multiple-choice computer-scored questions with single correct answers, to quickly rank students on ability. These tests do not give criterion-based judgments as to whether students have met a single standard they merely rank the students in comparison with each other. In this system, grade-level expectations are defined as the performance of the median student,By this definition, in a normal population, half of students are expected to perform above grade level and half the students below grade level, no matter how much or how little the students have learned.



The good teacher tells
The very good teacher explains
The superior teacher
demonstrates
The truly great teacher inspires



Key Concept

- So I find outcomes too limiting and believe education provides value not just quantifiable classic outcomes



MARS (Manual Audience Response System)

- The SOM Dean/CEO knows you exists.
- You report more to the Dean/CEO.
- You reports more to the CFO.
- The Dean/CEO drives the decision bus.
- The CFO drives the decision bus.
- You just won a \$50,000 grant for research in your office, your Dean/CEO/CFO.....
 - Doesn't know
 - Doesn't care
 - Rolls over dead
 - Congratulates you publicly
 - How dare CME seek a grant for an academic endeavor so they fire you



MARS 2

- You are in the primary business of
 - Education
 - Meetings and meeting planning
 - Business (making a profit)
 - Research grant attainment
 - Making activity directors/faculty happy



Business Centers

- Profit Center: R/E & profitability determined
 - Examples: Consulting divisions, a store
 - Accountable and thus controls all R/E
- Cost Center: Directly adds to cost & indirect profit
 - Examples: R&D, Customer Service
 - Service Centers like banquet services or AV
 - Value Centers are usually seen as a subtype
 - Danger does exist
- Investment Center: Measure is use of capital
- Revenue Center: Adds to profit but doesn't control costs



CME MUST Not Be A Profit Center

- Profit centers are profit seeking
- If a margin is the required bottom line then CME is at risk and that risk carries liability
 - Two kinds of bias
 - Conscious
 - Subconscious
- A Value Center can make $R > E$...Its just not required to!!!!
- The values are seen as viable alternatives to direct profits



Value Definitions

- **General:** Price X Quantity
- **Accounting:** Monetary worth of an asset, business entity or service.
- **Economics:** Worth of all the benefits and rights arising from ownership. Refers to intrinsic value
- **Marketing:** Extent to which a good or service is perceived by its customer to meet his or her needs or wants, measured by customer's willingness to pay for it. It commonly depends more on the customer's perception of the worth of the product than on its intrinsic value
- **Mathematics:** Magnitude or quantity as in a numbers



Two Step Process

1. Identify Value provided
 - a. Benchmark when possible
2. Know thy audience
 - a. If you have seen one Dean/CFO you have seen one Dean/CFO
 - b. Know who the decision maker is
 - i. Deans can usually be swayed by clinical, education & research data and faculty development/promotion
 - ii. CEOs of organization tend to appreciate stakeholder service
 - iii. CFOs typically are pure \$\$ people

Macro versus micro environment

- | | |
|--------------------------|----------------------------|
| • Macro Environment | • Micro Environment |
| • Think Organizations | • Think Individuals |
| – Dean/CEO, Vice Dean | – Professional development |
| – CFO | – Promotion |
| – Board | – Recognition/satisfaction |
| – Risk Management, Legal | – Honoraria |
| – PI/UM | – MOC |
| – Univ/SOM/Org mission | – MOL |
| – Community | – Member services |

So what is “CME”?

- It's a strategic and tactical **asset** tied intimately to mission
- It's a strategic and tactical **lever** to accomplish mission
- It's a **force** for improvement
- All interventions start with education!
- Thus..... **CME is indispensable**



Question

Has your organization realized full value from your office?

Take 2 minutes and self reflect on how your organization has **NOT realized its full value. Jot yourself a note.**



Exercise

- Write down up to 5 things that your office/ program does that bring value to your organizations mission (research, education, patient care)

You have about 2 minutes for this exercise



Value Domains to Consider

- Accreditation status
- Image/Brand
- Research funding
- Improved Outcomes
- Leadership
- Faculty development
- MOC/MOL
- Conference Ctr management
- Regulatory Support
- Economic Impact
- Portfolios
 - Job satisfaction
- Promotion
 - Clinician Educator
- Partnerships
- Referrals

Stakeholder Satisfaction



Accreditation Status

- Explain cycle
- Process
 - Connectivity into LCME
 - Connection with ACGME
- State status
- State domains if scored exemplary
- Benchmark status



Image/Brand

- How do you protect it
- How do you impact it
- Tabloids, best doctors, rankings
- Web site hits
- Attendee satisfaction data
- Preceptorships, observerships, etc



Research Funding

- Do you do education research?
- Diversification of grant funds
- Diversification of office funding



Improved Outcomes

- Patient care
 - PI-CME
 - GR tied to sentinel events
 - Case conference stories
 - M&M stories
- Research
 - Ethics of research
- Education
 - Knowledge, competency
 - Faculty development



Faculty Development

- Speaking skills
- Presenting skills
- Knowledge in education cycle
- Curriculum development
- Educational objectives
- Portfolio materials
- Core competencies



Economic Impact

- The Baltimore Area Convention and Visitors Association (BACVA) attributes an average of \$1,036 per attendee
- We had 6565 attendees from outside Baltimore area...so economic impact for Baltimore of over \$6.8 mil



Appropriate Referrals

- CME can never be done to engender referrals
 - **Absolutely no Quid Pro Quo can exist!**
- Physicians should refer based upon their desire to refer a certain patient for a certain condition at a certain stage of illness to whomever they and the patient desires
- Education from specialty practices on when to and when not to refer can resolve gaps and outcomes can be collected and analyzed
- Referrals may be a secondary/tertiary outcome that can be assessed

Programs

- Epocrates
- POC-IT
- Podcasts
- **ASiM**
- **E-Newsletter**
- Nursing ASiM
- Hopkins Dialogues
- Clinical Geriatrics
- Teleconferences Board reviews
- Dinner series
- **BOM**
 - **Carey “distinctive competency”**
- Journals
- Biennial
 - **Alumni**
- Collaborations with SPH, SON
- Grand rounds
- DVDs
- **BMJ Learning**
- Regularly scheduled conferences (RSCs)
- Live
- Enduring materials
- Preceptorships and Practicum
- Web
- Podcasts

Our Customer's Opinion Matters

- 99% say we meet or exceed objectives
- 74% state they plan on changing practice based on activity
- 99% stated overall good, **very good, or excellent**
- 99% stated content was good, **very good or excellent**
- 98% stated usefulness was good, **very good or excellent**
- 3.8% say they are concerned that potential commercial bias existed. Median value 2%.
- 1.6% stated activity was below the average CME
- Activity Director's evaluation of coordinating staff was excellent > 95% of the time

Additional Activities

- Grant review
- Research in Ed Symposium
- Innovation, simulation, PI, RM
- **Keywords and core comp as curriculum**
- Consult with departments on ME and GME
- PI CME as value to institution and value to individuals for MOC. Also value to residencies, etc as core competencies
- Capstone projects from BOM and informatics
- Civility and diversity
- Essential public purpose
- Alumni affairs

Values from SACME Participants

- Outreach/Inreach
- Meet national mandates like Stroke Centers
- Disseminate CPGs
- Improve interdisciplinary communication
- Improve family satisfaction with care
- Mentorship programs
- Engage strategic partners
- Forum for new initiatives
- Resource for practice integration of knowledge
- Funds for departments



Values Raised from Participants

- Innovation awareness
- Using educational innovations
- Clinical services are seen by regional MDs
- Compliance issues for SOM
- Improve patient safety
- Improve patient outcomes
- Accessible education
- National recognition
- Team based education and care
- Support & Promote alumni issues



Presenting The Information

Painting the Picture
Telling a Story
Play up YOUR Strengths
Try to Touch Hearts & Minds



Basic Principles

- Know the audience
- Executives like short and sweet
 - Have a handout that has more information that your slides
 - Summarize where possible but use data to support
 - A presentation of all data slides will usually fail
 - Use a story... Create the connection
- Use the key phrases repetitively
 - Value, strategic, asset, lever,
- I like to present to a mixed audience



Use the Opportunity to Educate?

- OCME Organization & MVV
- Diversity
- Policy & Procedure
- Future issues



Value: CME is a Strategic Asset

- JHUSOM Accredited status
- Large number of external physicians view of JHM is through CME experience- Impact on USWN&R
- Referrals
- Staff licensure, credentialing, & Maintenance of Certification (MOC)
- Support of tripartite mission + leadership
- Regulators



Accreditation

- Accreditation Council for CME (ACCME)
- Accreditation with Commendation (top 10%)
 - 6 years
 - Exemplary compliance in 1.1, 2.1, 2.4, 2.5
- Included in *Best Practices* by ACCME
- Included in *Best Practices* by Alliance for CME
- Role in LCME

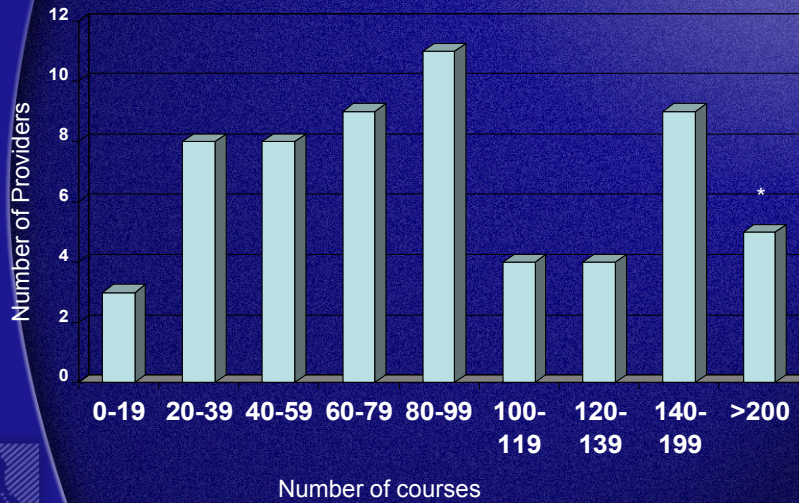


External Physicians View of JHM

- > 800 activities
- ~100,000 physician attendees/year
- ~ 50, 000 non-physician attendees
- > 650,000 unique web hits/year
 - > 10,000,000 million hits
- Marketing to >800,000 per year

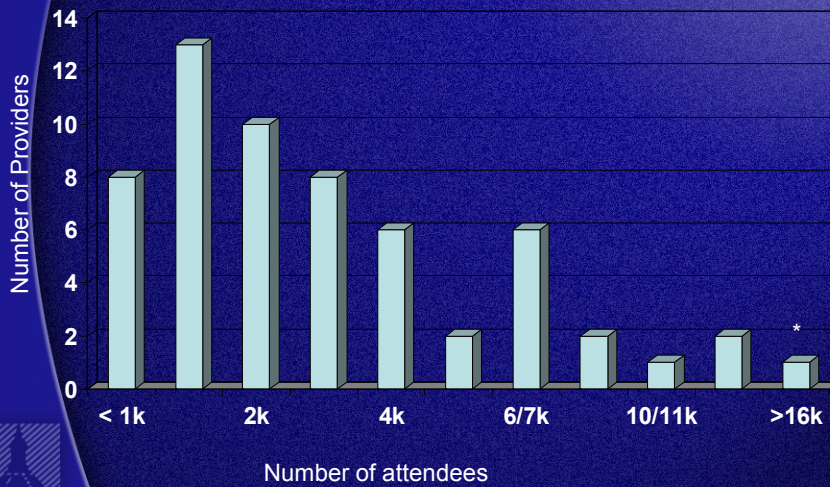


Courses for External MDs



Data from SACME survey 2006

External Attendees



Data from SACME survey 2006

Referrals

- 50% of “community” attendees at a Cardiology course referred patients
- Case study- ~ 7 years
 - 25 of 26 physicians referred patients
 - 1760 patients referred
 - > 57 million in charges
- May be a continuous loop
 - CME-referral-CME-referral



Licensure, Credentialing & MOC

- Through RSC/RSS and other activities your staff likely receive all or most of their credits on site

$2500 * 25 \text{ credits} * \$25/\text{credit} = \$1.5 \text{ million}$

$2500 * (4 * 100/1000) = \$1-10 \text{ million}$



Tripartite mission + 1

- Research
- Education
- Patient care
- Leadership



Research

- AHRQ grant on “Effectiveness of CME”
 - Monograph & manuscripts
 - “The Flexner Report for CME”
- Annual research in education symposium
- Submitting additional grants
 - AHRQ CERT/TRIP (EPC partnership)
 - Needs assessments
 - Outcomes
- Diversification of institutional research funding streams
- Recruitment into research trials*
- Benchmarks
 - 26% of academic CME offices involved in research

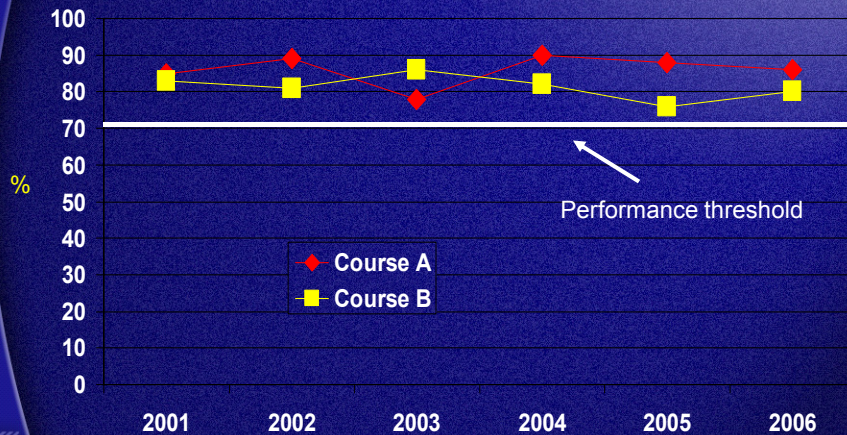


Education

- Regularly Scheduled Conferences (RSCs)
- QI/PI/RM- education as a lever for change
- Institutional Training
 - Course director's module
 - Grand Rounds series on CME, Lifelong learning & MOC
 - CORE
 - BOM
- Faculty development activities
- Teacher credits & portfolio material
 - > 33% of faculty participate in activities sponsored through OCME



% of attendees stating they intended to change practice



Average for all live activities for 2007 calendar year = 74.5%



Patient Care

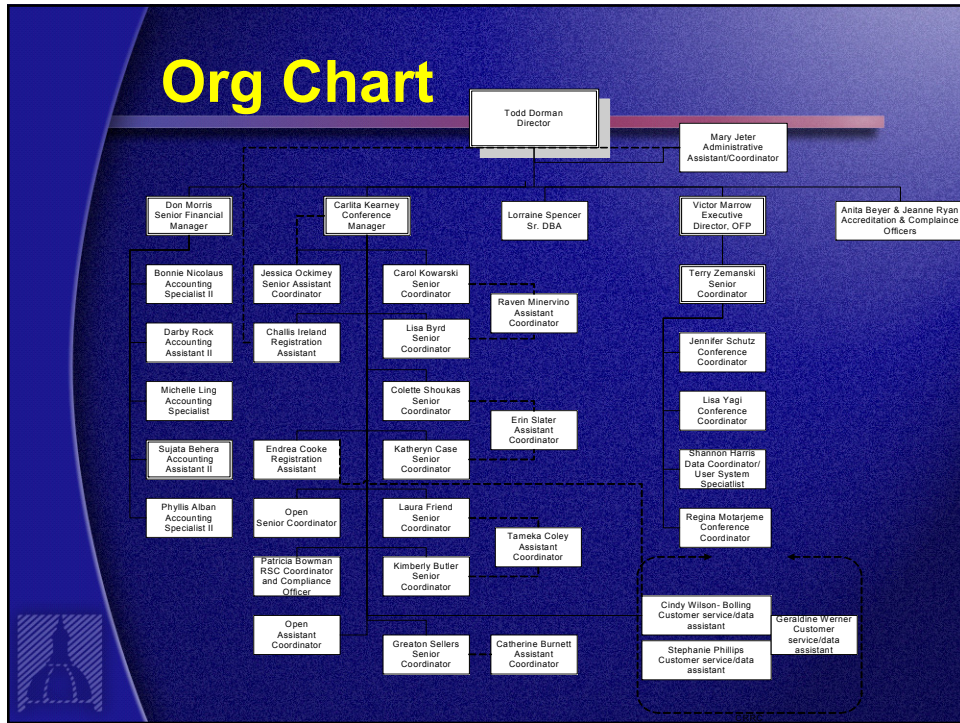
- Practice-focused Continuing Professional Development
- Projects
 - Partnerships with PI/QI
 - UHC projects
 - Risk Management program
 - E learning tool with Clinical Practice Association
 - “How to admit harm”
 - Possible projects with CPOE being explored



Leadership

- Sarah Davis Buck Scholar Program
 - 2 scholars per year since 1999
 - 75% continued past Bachelors
 - 4 PhD, 2 MD, 3 Masters, 1 DDS
- Dean & Director
 - Alliance of CME (ACME)
 - Society for Academic ACME (SACME)
 - Program Committee
 - Fox Award
 - Vice President....President-elect
 - Journal of Continuing Education in the Health Professionals (JCHEP)
 - Consulting Editor
 - National Organizations
 - ACCP, ASA, SCCM





- # Diversity
- Office staff
 - Gender: 88% female: 12% male
 - Race: 69% White, 22% African American, 8% other
 - Leadership team
 - 25% WM, 50% WF, 12.5% AAM, 12.5% AAF
 - Advisory Boards (AB)
 - Main Board: 68% WM, 14% WF, 4.5% AAM, 4.5% AAF, 4.5% OM, 4.5% OF
 - OFP: 63% WM, 21% WF, 5% AAM, 0% AAF, 5% OM, 5% OF
 - Activity Directors
 - Project underway
 - Attendees
 - Project underway

Policies & Procedures

- Standardized for all activities
- All policies submitted for review and approval by ABs
- Major policies resubmitted yearly for review and approval
- Activities must have Hopkins faculty as Director/co-director with content under their control
- Applications must be reviewed & approved by ACS, ABs and then by Associate Dean
- Disclosure managed by ACS & Associate Dean +/- AB
- Marketing meets institutional & ACCME guidelines
- LOAs meets institutional & ACCME guidelines



MO: Continuous Improvement

- Financial
 - Audits
 - Internal & External controls
 - Good shepherd (tax, travel)
 - Account Trak
 - Income diversification
- Process redesign
 - Standardized procedures
 - CRRC
 - SWOT
 - Yearly theme
 - Web
- Partnerships
 - QI/PI
 - Innovation
 - RM
 - CPA
 - POE
 - MedBiq
- Legal
 - State reporting
 - Marketing
 - Copyright
 - LOA
- Metrics/benchmarking



Liability Management

- State licensure
- Hotel contracts
- Printing contracts
- Email & fax blast laws
- Tax regulations
- Copyright management
- Accreditation & Compliance Office
- HIPPA



Society Partners 200X

- American Association Clinical Endocrinologists
- American College of Cardiology
- American College of Gynecologists
- American College of Physicians
- American College of Surgeons
- American Diabetes Association
- American Diabetes Association
- American Psychiatric Association
- American Society of Bariatric Surgeons
- American Society of Clinical oncology
- American Urological Association
- Congress of European Academy of Allergy & Clinical Immunology
- European Congress of Clinical Microbiology & ID
- Infectious Disease Society of America
- International AIDS Society
- International Congress of Endocrinology
- World Congress of Gastroenterology



Future

- Tighter integration with QI/PI, RM, CPD, CPA
- Simulation center
- Progress from ROE to ROO to ROI
- **Upfront integration of CME into planning & achieving JHUSOM strategic goals**
 - **CME as a Strategic Lever**



Leadership in Lifelong Learning




JOHNS HOPKINS

M E D I C I N E

CONTINUING MEDICAL EDUCATION

A Value Center



Until Next Time...

- Please join us for our next webinar – Patient-Centered Medical Home
 - Bob Meinzer, New Jersey Academy of Family Physicians
 - Mary Ales, Executive Director, Interstate Postgraduate Medical Association
 - Shelly Rodriguez, California Academy of Family Physicians
 - Friday, October 7, 2011
 - 11am ET
- Current grant window: September 1 – October 15 for activities starting after January 1, 2012
- See what providers are doing to move education forward
 - PfizerMedEdGrants
 - Resource Center
 - Publications
 - First Friday Webinars
 - Transparency Report

