AAP Accreditation update

American Academy of Pediatrics- Division of CME - Accreditation Team



Accreditation Unit: Nikki Berry (right) and Virginia Roldan (left)

Hello everyone and happy 2019 from the entire accreditation team!

A new year is upon us, and with it, many exciting possibilities and opportunities for change especially with the addition of our new Senior Vice President of Education—Dr. Haftel. Make sure you read our spotlight interview with Dr. Haftel starting on page 2 of this newsletter to get to know a little more about her, as well as all the other feature pieces on CME that we included in this exciting edition of our newsletter.

As we look toward the exciting prospects each new year brings, I want to make sure that all of you know one of the main goals of the accreditation unit is to continue to be a resource to those of you who plan and implement CME activities. From our newsletters, to our weekly CME labs, our monthly email updates, and the biannual in-person meetings that we schedule with you, we continuously try to identify ways to support each of your efforts.

Last fall we identified the opportunity to serve as faculty at the Illinois Alliance for CME's Basics Workshop. CME professionals from over 20 organizations in the Chicagoland area came together at this workshop, hosted at AAP Headquarters, to engage in interactive lectures, case studies and group activities to learn more about the fundamentals of CME. We also delivered a presentation on the joint providership process during the January Chapter Chat Webinar Series last month and have plans to participate at ALF this March.

These were great opportunities for us to connect and support our colleagues that work on CME activities and we are excited about discovering new opportunities as we move forward in 2019 and try to expand on our resources and outreach efforts.

Finally, as a reminder, every new year brings about our collection of annual activity data that we must report to our accrediting agency. All of your activity data was due to us at the end of January, and this was a critical deadline, so please reach out to us if you have not been able to comply with this request.

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Please know that the accreditation team remains committed in its outreach efforts to support our CME colleagues in understanding educational development and the AAP CME process so always feel free to share with us any feedback, challenges, ideas and/or opportunities that you have on how we can better support you.

We are excited about 2019 and we thank you for starting off this year by reading this edition of our newsletter.

Nikki



Accreditation is not something we do to you, but for you and with you

-AAP Accreditation Team

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SPOTLIGHT

Get to Know our New Senior Vice President of Education Dr. Hilary Haftel



In August 2018, Hilary Haftel, MD, M.H.P.E., FAAP, a noted researcher and educator, joined the AAP as the new Senior Vice President of Education. While there have been several formal pieces written up about the arrival of Dr. Haftel and her plans for the Department of Education (DOE), we reached out to our new leader for a very informal interview discussion we could get to know her, as a person, better.

Recognizing that you have only been at the Academy about 6 months, what kind of changes can we look forward to in our department?

I continue to learn new things about the Academy every week, so I have lots of ideas that I still need to work on fully developing, but with all the potential here I think there a lot of really cool opportunities that are going to be happening in the next year or two. We want to work with people, so a major focus will be building and expanding on our collaborations both within and outside the Academy.



How would you describe your communication style?

Thinking in leadership terms, I would say I have a very horizontal education style, not hierarchal. I don't believe in only communicating with the people at the "top" and expecting it to trickle down. I appreciate all staff and the professionalism they bring to their jobs, so I prefer one-on-one communication and encourage an open door policy with all the people I work with. I also like to be collaborative, if you let a group do their job, I think people in a group will almost always make better decisions than a single person. And humor, work should also be fun, so I like humor.

Can you highlight some of your more memorable CME experiences?

It means the most to me when people contact me later to say how much they learned, how much they enjoyed their learning experience, or they passed their boards, it's very rewarding as an educator. Seeing grads become successful in their own right is very gratifying.

SPOTLIGHT

Get to Know our New Senior Vice President of Education Dr. Hilary Haftel



What has been your biggest challenge?

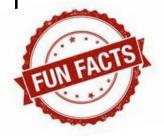
I've always been really bad at getting mad, sometime you need to and I am just not very good at it.

What would say is your greatest strength?

That I genuinely like people. I like working with people, talking with people, I get great energy from those interactions.

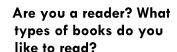
What makes you laugh the most?

Other peoples see idiosyncrasies, and my own, always my own.



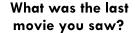
What are your hobbies?

I love spending time with my family, I have a rescue dog, and I never have the time but I like crafts and needlepoint. I also collect everything Minnie Mouse.



I like mysteries and sort of true sci-fi books, ones with actual plots not where people are killing each other. Where is the most exotic place that you have travelled?

Caribbean, Italy



Really? New state, new job, new house, teenagers, what's a movie?

What is favorite song or who is your favorite performer?

Barry Manilow



Do you have any hidden talents?

I like music—I play and sing—I play the piano and guitar, the clarinet and oboe, oh and the violin, poorly, but I can play.

CME Toolbox

Giving you the tools you need to build a compliant CME Activity



Sharing Tips and Tricks Among Activity Managers

As part of our biannual touchbase meetings with activity managers, you suggested the idea of sharing tips and tricks for navigating the AAP CME process with eachother, and we listened. Each edition of our newsletter will include any tips and tricks we hear about from any of you that oversee planning and implementing CME activities. From unique and innovative features you incorporate into your activities, to new tools or features that you integrate into your workflow, to process tips that reduce the time it takes to complete CME tasks, we will share them with the over 60 activity managers that also work on CME activities in an effort to help. This feature will only be as good as you make it so please feel free to share any new ideas, processes or innovations you come cross.

Evaluation Data

AAP has a set of required evaluation questions that must be asked at every AAP activity that offers CME credits and you are required to submit to accreditation staff the summary data for each of these required questions (ex: how many participants answered yes, how many no).

Many of our activity managers use Survey Monkey, Zoho, or other online evaluation tools, some which are free, to collect evaluation information from activity participants. The required questions are combined with the additional questions that they want to use to evaluate their activity, the link to the evaluation tool is sent to participants to complete, and these online systems automatically produce a summary report of the data which they then use to submit to us. These online survey tools have also been used to administer the quizzes that are utilized for MOC Part 2 Points as well.

You are free to convert many of our documents that you use for your activities into other formats such as an electronic document that appears online, a pdf, or an email. Just always keep in mind when the learner receives the information (ie verification requirements have to be shared with learners before the activity starts) and how any data will be returned to you (ie eval data must be summarized) so you may want to avoid a tool that causes you to count individual responses.

NC Chapter

We use the YAPP for our event apps. We are able to keep 3 event 'apps' alive at one time. We are able to put all CME documents and presentations on the app and you need a specific code to access the event app within YAPP! Link: https://www.yapp.us/login

<u>Pros</u>

- 1. Very simple to use for both the attendees and NCPeds. Very clear and concise.
- 2. Very easy to download for our members/attendees.
- 3. Has the capacity to upload large presentations, pdfs, and videos- most important feature for our group.
- 4. We have the ability to connect with attendees real-time via an app newsfeed. Example: "The xyz group will be having an impromptu meet and greet on the terrace at 5, please feel free to join" or "Raffle winners are"
- 5. We have the ability to host multiple tabs. I haven't tested how many but I believe last year we had 10 + tabs (info, speaker, map, agenda, exhibitors, handouts.....)
- 6. Variety of templates available. Again not as many as most apps but Yapp provides at least one template for pages like speakers, exhibitors, faculty, documents.
- 7. You can save drafts of new apps.
- 8. You can save old apps and make a copy of them if you want to use them again. This is great if you have similar events each year.
- 9. Ability to connect app to social media in real-time.
- 10. Ability to add photos of the event in real-time.

<u>Cons</u>

- 1. Not a lot of availability for any customization ex. color, logo, or template customization.
- 2. No copying and pasting- if you choose to present the agenda or speaker you have to type it in multiple places.
- 3. Increased price- not sure of the new price structure.
- 4. Customer support not very helpful. The good news is because the process of creating the app is so simple you will not need customer support very often.
- 5. Not geared towards exhibitors. There are other apps that interact with exhibitors, but these apps tend to be very pricy.

Of course these quick synopsis cannot encompass all of the elements so we encourage you to reach out to us if you want more information. Look out for more tips, tools, and updates from the CME Toolbox in the future.

Greetings and Happy New Year from the COCME



Pictured back row left to right: COCME member Dr J. Huang, AAP staff K. McCaskill, COCME member Dr W. Stubblefield, and AAP staff Dr H. Haftel, V. Roldan, D. Samuel

Pictured front row left to right): COCME members Drs R. Gereige, T. Turner, AAP staff N. Berry, and COCME member Dr M. Foulds

The AAP Committee on Continuing Medical Education (COCME) is the oversight committee of the AAP CME/CPD Program and its members play an integral role in helping to ensure high quality and compliance for all AAP CME activities. The committee meets bi-annually to review and discuss the AAP CME/CPD program. Below are brief highlights from the meeting the committee conducted this past January:

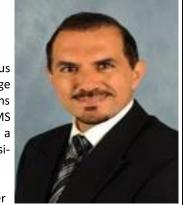
- Revamping the About AAP CME Webpage on PediaLink: the committee discussed the valuable resources for planning and implementing AAP CME activities that are housed on the About AAP CME Page of PediaLink and how they can encourage more CME planners and staff to use these documents. It was determined that one of the first steps that should occur would be to better organize the webpage to make it more interactive and easier to navigate.
- Education Information/Guidance: members are developing a set of tools through the Best Practices Guide to Learning to help facilitate the development of a high-quality CME activity. From checklists, to evaluations, to faculty guides, these documents will be helpful to those with or without experience in putting on AAP CME activities in all of the varying formats. They also discussed holding an inperson workshop for CME staff during their summer meeting.
- Outreach: because AAP has such a wide and diverse CME/CPD program, members discussed the importance of outreaching with all of its varying CME constituents throughout the Academy. The committee continued to brainstorm on ways to learn more about the various projects these groups are engaged in and how the members may best offer educational expertise to help with the planning, design and delivery of a CME activity.
- Article Reviews: all members read and summarize pearls from the literature on current practice and future advancements in the field of CME. Discussion occurred on various ways that these summaries can be widely disseminated to individuals who plan and implement educational activities. Currently these summaries are housed in the "Scholarly Review" section on the About AAP CME webpage on PediaLink.

Meet A COCME Member

We are pleased to introduce you to Dr Rani Gereige, who joined the Committee on CME in July 2017.

Dr Gereige has been the Director of Medical Education & Designated Institutional Official at the Nicklaus Children's Hospital (NCH) (formerly Miami Children's Hospital) since February 2010. In this role, Dr. Gereige oversees the Undergraduate, Graduate, Continuing Medical Education, and Faculty Development Programs and participates in medical students and residents/fellows' education. He also oversees the ABP and ABMS (multi-specialty) MOC4 Portfolio Sponsor Program at Nicklaus Children's Hospital. Dr Gereige also holds a faculty appointment as a Clinical Professor in the Department of Pediatrics at Florida International University (FIU) Herbert Wertheim College of Medicine.

In addition to serving on the COCME, Dr Gereige is the CME Editor for Pediatrics in Review and a former member of the National Conference & Exhibition planning group. He is a member of the Academic Pediat- Dr. Rani Gereige, MD, MPH, FAAP ric Association (APA), the American Public Health Association (APHA), and the Association of Pediatric Program Directors (APPD) and is a surveyor for the Accreditation Council for Continuing Medical Education



(ACCME). Dr Gereige is also a member of the National Board of Medical Examiners (NBME) Step 2 USMLE Interdisciplinary Review Committee (IRC), and a member of the Accreditation Council for Graduate Medical Education (ACGME) Pediatric Residency Review Committee (RRC) where he serves as the Vice-Chair of the RRC.

Dr Gereige's interests include Oral Health, School Health, primary care Sports Medicine, Public Health, Evidence-Based Medicine and QI, Children with Special Health Care Needs and Sports, and Medical Education.

Happenings in AAP CME



Simulation in HealthCare Week—Dr Patterson — EVP Life Support/Global — Intubating a newborn SIM



AAP Accreditation Manager Nikki Berry accepting award from the ACCME for successful completion of 25 interviews as a surveyor!

CHILDREN WILL ONE DAY LIVE IN A NATION
WHERE THEY WILL NOT BE JUDGED BY THE COLOR
OF THEIR SKIN, but by the content of
their character." — M. J. J. J.

Happenings in AAP CME



EDUCATION RECAPS

Highlights and Pearls from the Alliance for Continuing Education in the Health Professions Annual Meeting

Alliance
2019 ANNUAL
GAYLORD NATIONAL RESORT &
CONFERENCE

JANUARY 23-26, 2019
NATIONAL HARBOR, MD
GAYLORD NATIONAL RESORT &
CONVENTION CENTER
CONVENTION CE

Innovative Educational Formats - to implement in activities

- Problem-based learning discussions/roundtable sessions Ask learners to submit case-based problems they have encountered (and solved) in practice. Select some and ask those individuals to present them in a roundtable discussion. As details are presented, other learners should try to "solve" the case through discussion with the presenter and each other.
- Brain Dates/ask the expert This is a good for networking and learning, enabling learners to discuss topics one-on-one with expert faculty or organizational leaders.

Outcomes Assessment

- *Pre/post-tests* When using pre/post-tests, the same questions do not need to be used in both assessments, as people tend to be sensitized when using the same questions. Alternatively, different questions can be used, as long as they still address the concepts asked in the pretest. The ordering of the questions could also change. One can also send the post-test to learners at a later time, such as one month after an activity concludes/is completed.
- Impact on patient care While assessing the impact of education is often focused on changes in learner competence (strategies used in practice) and performance (what is implemented in practice), one way to assess an educational activity's impact on patients is through the following calculation: # clinicians that were educated X average # of relevant patients seen in practice (within a defined time interval) = # patients impacted by the educational activity
- Evaluation rating scales Rating scales should include seven or fewer points. An even numbered scale requires respondents to "choose a side" (there is no natural midpoint on a 6 point scale), while odd numbered scales allow for a neutral response (e.g., selecting 4 on a 7 point scale). Scales should be anchored with labels; more specific labels = more accuracy.

Adult Learning Theory - Truth or Myth?

- Asking learners to write down what they will do/change in practice after an educational activity is only beneficial if follow-up with the learner occurs Myth. While providing learners with reminders is helpful, even the act of writing something that one plans to do (intent to change) increases the likelihood that they will remember to make practice change.
- *Telling a story always improves the educational activity* **Mostly true**. Stories assist with connecting learners emotionally to the content, if they are relatable, connect with "real life"/practice, and enhance the content that is presented.
- Most adults know how they learn best Myth. Most adults do not know how they learn best. Oftentimes, they participate in educational formats in which they are most comfortable. If they were trained by attending large lecture halls, they may prefer that format, though it is not effective without some forms of active learning integrated in the design.
- Professionals typically know what they need to know and what they don't need to know Myth. Physicians are not effective at self-assessing (D Davis et.al., JAMA, 2006). Part of our job as educators is to bring the unconscious into consciousness and provide education on those areas. Also, faculty are often focused on telling learners what they know, not on what learners need to know. It may be more effective for faculty to educate on fewer, but more meaningful concepts, giving learners a change to engage with the content and each other in the process. This may require faculty to change their educational approach from what they are used to.

Below is a simple list of items to consider and how they can be incorporated into your daily CME world to start change or improvement...

	constant and not they can be incorporated into your
Content should be your GUIDE not Technology	Power of 3 – Repeat important info 3x to make impact/have it "stick"
K.I.S. – Keep it Simple – Most basic plan is the best	Think outside traditional/always used venues/formats to engage learners
The Why is more important than the What	Understanding the Why helps people buy into the What (needs to get done)
Emails – keep key points in the subject line	All improvements are changebut not all change is an improvement
Technology NOT as scary as I (or you) may think	Think about changing the subject line to a question rather than statement
Fear of loss/regret is why people change	Remove ALL CAPS and punctuations to avoid email going to SPAM
Incorporate behavioral change	Learners want/crave creativity – they are done with didactic sessions
How to defeat the forgetting curve	Very difficult to provide impactful communication skills and training virtually
Don't over use technology (don't take away from the content)	Storytelling engages learners/creates emotional connections that make content relevant

Be proud to be a CME professional because we are creating change!

For more information about ACEhp, please visit: www.acehp.org

Burnout among CME providers? Take the test at https://www.mededwebs.com/well-being-index



Former COCME member, Dr Jack Dolcourt, gave the Francis M. Maitland Memorial Mentorship Lecture. Among his essentials for mentoring others are: Attitude — be caring and nurture the progress of the mentee, and establish a human connection with others.

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EDUCATION RECAPS

Pearls from the Summit on Physician Learning and Improvement and the Council of Medical Specialty Societies Meeting, November 2018



- Physicians can serve as transformational leaders to address challenges, such as the opioid epidemic
 and health care disparities. Medical specialty societies should educate physicians on how to assume roles to effect change identify problems, connect them to health, provide data and analysis, and implement solutions.
- Physicians do not appear to accurately self-assess their knowledge/skills (DDavis, et.al., JAMA, 2006). Accuracy in self-assessment is lowest among those who are the least skilled and highly confident. Honest, accurate, and external feedback is needed to inform physicians on how they are doing. Feedback can provide insights into physicians' current performance, and coaching can help promote improved future performance.
- The health needs and expectations of patients should be at the core of the continuing professional development system.



Focusing on competency-based medical education provides a mechanism for this – to focus on what physicians are trying to do, challenging education to be more intentional and less episodic; and to integrate learning and regulatory needs together instead of separating lifelong learning from physicians' needs to meet MOC and licensure requirements.

Medical specialty societies can help identify physicians' core competencies and then develop innovative educational strategies, tools, guidelines, feedback mechanisms, communities of practice, etc. to support physicians and enhance their competencies.

For more information about CMSS, please visit: www.cmss.org

AAP Staff D. Samuel and Dr. Haftel with Dr. Graham McMahon of the ACCME at the CMSS Annual Meeting last November



Best Practice: NCE 2018—Reflective Assessment for MOC Part 2 Points

While quizzes tend to be the primary way to assess learning in order to award participants with MOC Part 2 points, it is not the only way. For the second year in a row, the AAP National Conference & Exhibition offered attendees, who were also American Board of Pediatrics (ABP) diplomates, the opportunity to earn ABP MOC Part 2 points by completing a reflective assessment. Confirmed attendees of the conference, who attended seven different sessions and identified new knowledge, strategies, and practice changes they gained, were eligible to earn 15 ABP MOC Part 2 points. Over 1,200 professional physician attendees successfully met the passing standard and earned MOC points. Individuals participating in a large, national conference can attend a variety of educational sessions, based on their unique learning needs and interests, practice settings, and patient populations. This assessment method enabled learners to potentially earn MOC points in relation to the specific topics about which they learned at the conference.

For more information about NCE 2019, please visit: https://aapexperience.org

AAP Accreditation Update



Accreditation staff will be at ALF! We will be part of a Chapter Services Lab for chapter executive directors, on Friday, March 15 during the Annual Leadership Forum's voting time (10:00 AM – 12:00 PM) at the Westin.

This lab will have a variety of AAP staff available to share resources, answer questions, and discuss best practices and we will be there to help answer any questions you have about the AAP CME program and the process for working with us to award CME credits and MOC Part 2 Points for your educational activities, so feel free to stop by.

Your next bi-annual touch base meetings with accreditation staff will occur in April 2019. Lookout for your meeting invitations later this month.

This year the spring meeting of the Committee on CME (COCME) will take place

June 20-21.

CME open lab occurs every Tuesday and Thursday in CR341 or via phone for assistance with your educational activities. No appointments are necessary so feel free to stop by with any CME/MOC 2 questions that you have.

UPCOMING

EVENTS IN CME

Tiel.	Provider-	-	Start Date	Fud Data
Title Colobration of Padiatria Pulmonalary and	ship	Туре	Start Date	End Date
Celebration of Pediatric Pulmonology and Sleep 2019	Direct	Live Course	2/15/19	2/17/19
Caring for the Whole Child: Supporting Children and Families in Today's Context	Direct	Live Course	2/21/19	2/24/19
Perinatal Depression Screening	Joint	Webinar	2/21/19	2/21/19
PROS Coordinator Research Program 2019	Direct	Live Course	2/23/19	2/24/19
Caring for Children and Youth with Epilep- sy: What Primary Care Providers Should Know	Direct	Webinar	2/28/19	8/2/19
AAP Lead Testing ECHO	Direct		2/28/19	7/31/19
AAP Neurodevelopment ECHO	Direct	Webinar	2/28/19	7/31/19
2019 Trauma-Informed Pediatric Provider	Direct	Live Course	3/2/19	3/5/19
Practical Pediatrics Course: Orlando	Direct	Live Course	3/22/19	3/24/19
International Mtg on Indigenous Child Health	Direct	Live Course	3/22/19	3/24/19
Workshop on Neonatal-Perinatal Practice Strategies	Direct	Live Course	3/29/19	3/31/19
NRP Road Show	Direct	Live Course	3/29/19	3/29/19
Sideline Care for the Young Athlete - Training Course	Direct	Live Course	4/6/19	4/6/19
28th Legislative Conference	Direct	Live Course	4/7/19	4/9/19
Practical Pediatrics Course: Las Vegas	Direct	Live Course	4/12/19	4/14/19
2019 HIV Course	Direct	Live Course		5/21/19
Southeastern Association of Neonatolo- gists 33rd Annual Meeting	Direct	Live Course	5/23/19	5/26/19
Practical Pediatrics Course: Hilton Head	Direct	Live Course	5/24/19	5/26/19
Practical Pediatrics Course: Seattle	Direct	Live Course	5/24/19	5/26/19
Practical Pediatrics Course: Denver	Direct	Live Course	6/21/19	6/23/19
Pediatrics in the IslandsClinical Pearls 2019	Joint	Live Course		7/5/19
Practical Pediatrics Course: San Diego	Direct	Live Course	8/30/19	9/1/19
2019 National Conference and Exhibition	Direct	Live Course	10/25/19	10/29/19
Practical Pediatrics Course: Orlando	Direct	Live Course	11/15/19	11/17/19
Practical Pediatrics Course: Nashville	Direct	Live Course	12/13/19	12/15/19

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