

# AAP Accreditation Update

American Academy of Pediatrics- Division of CME - Accreditation Team



Volume 8, Issue 2  
Summer 2020

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Hello and welcome to this edition of our newsletter. The world has changed since the accreditation unit has last reached out to all of you. With the current pandemic and resulting economic havoc combining with widespread social protests over the killing of George Floyd and long-term effects of racial injustice, we first and foremost genuinely hope you, your families, and colleagues are all staying healthy and feeling well.

As we all navigate through the changes to our work environments and the transition to virtual meetings and activities, the accreditation unit is working very hard to be a resource to help. From assisting you with ways to meet the CME requirements as activities change to online formats, to the inclusion of tips and tricks in our monthly emails, we will continue to look for ways to support all of you who continue to offer accredited CME activities so feel free to reach out to us at any time. Additionally, in this edition of our newsletter, we have included recaps from three webinars that we attended to share some resources that we hope you will find helpful as you develop new education in a virtual format (see pages 3-5).

Looking ahead, our Department of Education is currently going through several changes that we are all excited about. Under the direction of our SVP Dr. Haftel, our department has been reorganized from a group of 2 divisions to a group of 4 teams that will work together more cohesively to meet the future educational needs of the Academy. Already, there is a virtual education team in place to work with staff who are developing virtual content (see page 8) and discussions are underway to explore how we can consolidate the locations where all of our education is housed to offer a more streamlined way for members to find and participate in the Academy's educational offerings. Finally, and this part is even more exciting, as part of these new changes, the accreditation team will also be adding new staff in the near future to better support the CME needs of all of our colleagues that develop AAP educational activities. I am sure navigating new teams, new roles, new people via the virtual environment we are all currently in will be both challenging and invigorating and we are enthusiastic about the positive impacts we will have in Education moving forward.

The accreditation team remains dedicated 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. Thank you for reading this edition of our newsletter.

Nikki



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

*-AAP Accreditation Team*



Year after year we have watched the staff at National, Chapters/Districts and ABP, whom we call Activity Managers, due a tremendous job of planning and delivering thousands of exceptional educational activities all in a concerted effort to meet the Academy's mission to advance the health and well-being of all children.

We know that accrediting these activities, ensuring CME rules and requirements are met, is only one of the many pieces that these individuals orchestrate to deliver the final product.

We, the accreditation unit, are behind the scenes, but we see the passions, hard work, and efforts our colleagues bring to each of their educational endeavors.

**And over the past several months we have watched in awe as they raised their games yet another level to continue to plan and deliver education during these current crises.**

We have personally witnessed how hard AAP activity managers have been working to manage the transition of activities to a virtual environment and the many, many challenges they have been facing and conquering over the last several months such as:

- Learning new systems to deliver the education
- Managing the expectations of their planners
- Teaching faculty how to deliver virtual content
- Budget issues
- Time issues
- Operating in a remote location without all of the same tools they might have in the office
- Balancing their home work life now taking place at the same time and the same place
- Simultaneously handling the demands and disappointments of their, bosses, planners, faculty, colleagues, immediate family, extended families, friends, and pets

**We saw, we see, and we just wanted to take a moment and say**

**THANK YOU**



# 2019 Annual Reporting for the AAP CME/CPD Program



In order to maintain its accreditation status, AAP must annually report every individual activity that it conducts and submit specific activity information to the Accreditation Council for Continuing Medical Education (ACCME). This information includes, but not limited to:

- final income figures (ads, exhibits, registration and financial support)
- final expenses
- final number of MD and non-MD participants
- evaluation information

As we continue to fulfill our obligation each year to the ACCME by submitting this required information, it's with many thanks to those involved in this endeavor that helped make it happen for 2019. We especially want to thank our Direct Providers within the AAP Dept. of Education, Direct Providers outside the AAP Dept. of Education (non-DOE department/divisions), and Joint Providers (Chapters/Districts/ABP) not only for the activities they manage each year, but for the dedication and hard work in providing the Accreditation Team with the requested information to report.

We're happy to share the following information that was submitted for 2019:

## **The AAP Conducted 398 CME activities**

292 direct activities

-115 within the Dept of Educ

-177 outside the Dept of Educ

106 joint activities

## **The AAP awarded 3,888 CME credits**

2,794.75 credits for direct activities

-1,825.5 within the Dept of Educ

-969.25 outside the Dept of Educ

1093.25 credits for joint activities

## **The AAP educated 522,732 learners**

470,793 learners for direct activities

-94,630 MDs within the Dept of Educ

-167,447 MDs outside the Dept of Educ

-10,704 non-MDs within the Dept of Educ

-198,012 non-MDs outside the Dept of Educ

51,939 learners for joint activities

-50,834 MD learners

-1,105 non-MD learners

## **Reminder: Recording Credits and Printing Certificates Via the Transcript System**

In an effort to help decrease the amount of time staff spend on administrative tasks associated with their CME activities all learners should now be directed to claim their credit and print out their own CME certificates via the transcript system.

AAP's online Transcript System (<http://transcript.aap.org>) is the official way to claim credit and print certificates and transcripts for all AAP CME Activities and directing all learners to the system will eliminate the need for staff to print out individual certificates on behalf of their learners.

A short, easy to follow step by step guide was created and made available to all activity managers to share with their learners this past June and a detailed instructional document can be found on the transcript homepage. If you have any questions or concerns about this process change, please reach out to accreditation staff and let us know.



# Webinar Updates

## ADVANCING SOCIAL JUSTICE WITH ACCREDITED CE Diversity, Inclusion and Equity: How CME Providers Can Respond

To kick off the #MeetingChallengesTogether webinar series, ACCME offered a conversation discussing how we, as educators, can be part of the solution to addressing healthcare inequities. Given the current crises, including COVID-19 and the killing of George Floyd, we have an obligation to face these challenges founded in structural, deeply entrenched racism, and work together to navigate a path from empathy to understanding to action.

### DIVERSITY, INCLUSION AND EQUITY

#### What is Health?

*Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.*

-- World Health Organization

#MeetingChallengesTogether

The **current situation** of our society has brought to the forefront challenges and inequities in healthcare, that have always existed. As CME providers, it is our duty to encourage the creation of education that is not just based on the disease state but rather the entire wellbeing of a person, including social wellbeing and promoting social justice.

### DIVERSITY, INCLUSION AND EQUITY

#MeetingChallengesTogether

#### Health Disparities

Health disparities are preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations as defined by:

- Race or ethnicity,
- Gender,
- Education or income,
- Disability,
- Geographic location (e.g., rural or urban), or
- Sexual orientation

### DIVERSITY, INCLUSION AND EQUITY

#### Blind Spots

"I'm an excellent driver."

"I got this job because I earned it."

"I chose that speaker because of her expertise."

"I'm not a bigot."

"I'm not racist."

**Address systemic inequities with CME.** CME has an important role in creating content moving forward. Educate yourself so that you know what you are doing. Do not follow the cliché "if it's not broken/don't fix it" mentality. Those that feel they are *not* affected don't care and won't work with others

**We need to address the blind spots that are within us all.** First step is acknowledging we all have biases. One way to help address a bias is by slowing down when making decisions. Generally, in our fast-paced world, we make rash, snap decisions. In, order to curb bias, we should slow down, bring in a variety of perspectives (when possible), ask questions and evaluate, then make our decision. Our brains make unconscious decisions using cognitive shortcuts relying on past experiences to make on the spot decisions. These blind spots can, and have, led to health disparities.

### DIVERSITY, INCLUSION AND EQUITY

#### Racism is Rampant in American Healthcare

- Physicians and healthcare institutions are complacent about and perpetuate policies that discriminate in access and care based on race
- Physicians and healthcare professionals occupy positions of stature, power and authority
- Healthcare payment structures create disincentives for the care of people of color
- Disparities in access and care exacerbate the harm that social structures and policies cause to people of color
- Addressing racism and its consequences should be a central task of CME

#MeetingChallengesTogether

### DIVERSITY, INCLUSION AND EQUITY

#### What Can We Do to Enhance Objectivity?

Acknowledge that you have biases

Slow down

Be open

Ask questions and evaluate objectively

Seek out contradictory views

Bring in other perspectives

When creating education, change it up **be more representative** in choices of speakers and planning committee members.

### DIVERSITY, INCLUSION AND EQUITY

#### Strategies to Address Systemic Inequities with CME



Help HCPs understand they have a responsibility to act



Teach about biases, empathy, and advocacy



Foster an inclusive work environment



Advocate for eliminating barriers to care



Partner with and take direction from community members



Recruit diversely to be more representative

Represent your audience and patients (underserved communities).

Embed equity or some form of equity training/policies in all cme projects (not only during black history month).

Train on explicit bias.

Move beyond the language of diversity and inclusion (important) but not where work ends, incorporate equity and anti-racism.

Racism is hierarchy of Power which assigns value based on skin color (root of what racism is). System advantages people who are white and disadvantages those that are of color. Decision making affects patient lives. Distribution of funds, working within the community and who is being hired affects equity and shared power.

Be open, LISTEN to OTHERS, to do institutional transformational work.

# Webinar Updates

## Making Presentations: What makes an Effective Presentation? Eye Contact, Statics in Trends and the Objectives.

Facilitated by: The University of Washington

### Key takeaways from this webinar:

- ⇒ Use effective techniques to begin a presentation, being Nervous is Normal. Prepare and practice, plan ahead of time, while presenting breathe deeply, breath out longer than you breath in.
- ⇒ Always, make eye contact, find a few people to focus on, try not to use a script. In a virtual/live presentation, make sure your camera is at eye level and look at it to engage the audience.
- ⇒ We all know the rule of thumb, speak LOUD and SLOW, keep a tempo, pause at items that are important in order to make an impact.
- ⇒ Fillers - Um, yes that is a filler, and fillers can be distracting to your audience. Fillers do not help you appear professional. Practice your presentation to avoid fillers.
- ⇒ Questions - Two ways to handle questions. You can have your audience ask questions at any time or save questions for the end of your talk. Ensure you communicate to the audience at the beginning of a talk, HOW/When questions will be addressed.

**SLIDES:** Remember that **you** are the main event, not your slides. Slides support your presentation; they should not give your talk. Guy Kawasaki: 10 20 30 Rule for slides:

- ⇒ No more than 10 slides
- ⇒ Do not speak more than 20 minutes
- ⇒ Do not use a font size smaller than 30
- ⇒ Do not use paragraphs on a slide

**Bulleted list:** When using bullet points, use the 666 Rule. No more than

- ⇒ 6 words in a bullet point
- ⇒ 6 points on a slide
- ⇒ 6 slides with bullet points in a row
- ⇒ Limit the different fonts and colors you use on a slide (2 or 3 is the max for each).
- ⇒ Using visuals – after you explain a visual, return to your main point

Abbreviations- Do not use, unless your audience is familiar

Know the difference between an acronym and an initialism

- ⇒ NASA is an acronym – acronym speaking as a word
- ⇒ MBA is an initialism – acronym that cannot be speaking as a word

### Basic Plan for a Presentation

- ⇒ **Attention** – get your audience attention
- ⇒ **Benefit** – what benefit will the audience get out of your presentation
- ⇒ **Credibility** - you're qualified, and the audience can feel confidence that you know what you are talking about. Support your ideas with strong evidence. Address concerns.
- ⇒ **Direction** – what's your plan/agenda

### Hooks to get and hold your audience attention

- ⇒ **Ask a question**, one that will not draw attention from your presentation. Example: did you know that public speaking is the #1 fear? It ranks higher than death in some polls.
- ⇒ You can **tell a story** to draw the audience in. Usually it's a story that deals with a pain point that the audience can relate to, like a problem they all share.
- ⇒ **Give some surprising information** (statistics)

# Webinar Updates

## *The Secrets to Virtual Facilitation - Presented by Leadership Strategies*

### There are 6 P's of Preparation

1. Purpose – Why are we having this session?
2. Product – What do we need to have when we are done?
3. Participants – Who will be attending? What are their attitudes?
4. Probable Issues – What issues will likely need to be addressed?
5. Process – What steps will get us there?
6. Place – How will you effectively utilize your virtual meeting environment/platform?

Figure out the **Virtual Details** for each agenda. If you are going to have break-out rooms, white boards, chat rooms or chat functions, split screens, sharing your screen, you as the facilitator need to KNOW how all these things work. Practice-Practice-Practice. Otherwise, it is important to work with a company that can have a moderator to facilitate these items on your behalf.

**ALWAYS** start the meeting on time. Do not punish the punctual. In order to do this you will need to “open” up your meeting a few minutes early. You can add a slide with a Welcome message and a timer to count down to the start time. Your agenda sent out prior to the meeting should reflect the “gather time” and actual start time. For example, if the meeting/program will begin at 9:00am, the agenda should read.

8:50-9:00am - Gathering Time  
9:00am - Meeting begins promptly  
9:00-10:00am - Session 1: Influenza Rates with Dr Flu

Consider having a **pre-session** for attendees that may not be familiar with virtual meetings. Think of having it 30 mins before the start of a multi-day course. Provide a tip guide a few slides with information on how to do breakout sessions and what tools (whiteboard) will be used during the meeting. Attendees **MUST** have the right technology to make any virtual meeting a success.

Doing an **engagement** activity every 10-15 mins, may drastically change the dynamics of your activity. You want to give the learners a task to do or think about to stay engaged. Ask questions, if smaller meeting, you can round robin-say we are going to start with someone who's name starts with C and then proceed. You can add a poll-get a read from the group about what they are thinking at that moment.

Deciding to do a virtual meeting you should try as close as possible to recreating the feeling and engagement of being in an in-person meeting.

### **KEY tips** for running a virtual meeting

1. Use a virtual meeting platform to maximize engagement
2. Have an engagement activity every 10-15 mins
3. Use round robins and/or mini-round robins
4. Have a checklist of names and locations
5. Establish a method for doing consensus checks
6. Use redirection questions to keep the discussion on track
7. Do considerable summarizing
8. Review all issues, decisions and actions before closing



## Activities, Meetings & Events



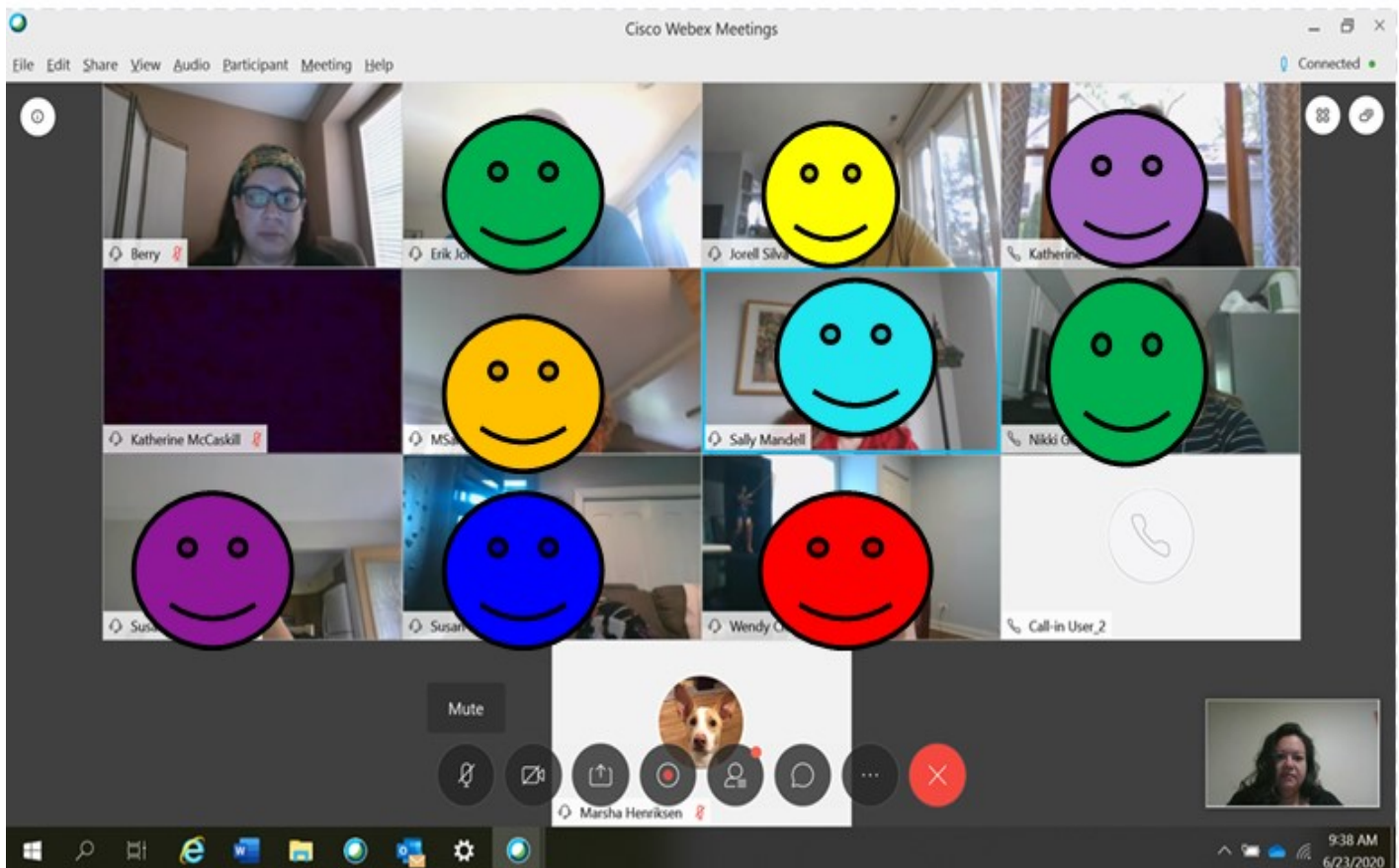
### Life in CME before COVID-19

Here is Dr. Haftel and Dr. McMahon in late 2019 having some fun at the Society for Academic Continuing Medical Education (SACME) Meeting in Miami before the term social-distancing entered our lives.

Hilary Haftel, MD, MHPE, FAAP, Senior Vice President of the Department of Education  
Graham McMahon, MD, MMSc, President and CEO, Accreditation Council for Continuing Medical Education (ACCME)

### Life in CME after COVID-19

Bi-Annual meetings this year looked like a throw back to the Brady Bunch... do your meetings look like this?





### Virtual Education Content

Considering developing virtual content as part of your CME activity? Check with the Virtual Education Team before getting started. Contact Charlette Blackful at [chblackful@aap.org](mailto:chblackful@aap.org)

### CME Open Lab

The accreditation unit hosts open labs that occur every Tuesday (9:30-11:30am) for assistance with your educational activities. No appointments are necessary call (630/626-6653) with any CME/MOC 2 questions that you have.

### Biannual Meetings

Your next bi-annual touch base meetings with accreditation staff will occur in November 2020. Look out for your meeting invitations later this month.

## UPCOMING EVENTS IN CME

Title	Providership	Activity Type	Activity Start Date	Activity End Date	MOC Part 2
Lead Free Utah: Improving Blood Lead Testing and Reporting in Utah Children	Joint - Utah Chapter	Internet Activity Enduring Material (Online/web-based)	7/13/2020	7/12/2023	Yes
2020 PREP® The Cram	DOE	Internet Activity Live / Live Webinar (Online/web-based)	8/8/2020	8/9/2020	Yes
Practical Pediatrics CME Course: New York	DOE	Other (Internet Live and Enduring)	8/10/2020	9/6/2020	Yes
2020 Specialty Review in Pediatric Cardiology	Direct	Other (in-person/live stream)	8/10/2020	9/30/2020	Yes
2020 ABP Youth Suicide Prevention Self-Assessment	ABP	Internet Activity Enduring Material (Online/web-based)	8/11/2020	8/10/2023	No
Clinical Pediatric Hospital Medicine	DOE	Other (Internet Live and Enduring)	8/13/2020	1/29/2021	Yes
NCPeds 2020 Annual Meeting	Joint-NC Chp	Internet Activity Live / Live Webinar (Online/web-based)	8/15/2020	8/15/2020	Yes
2020 Potpourri in the Cloud (Scientific Sessions)	Joint - LA Chp	Internet Activity Enduring Material (Online/web-based)	8/21/2020	10/31/2020	Yes
Chapter Quality Network (CQN) Improving Immunization Rates for Adolescents - AZ	Direct	PI CME	9/1/2020	8/31/2021	Yes
Chapter Quality Network (CQN) Improving Immunization Rates for Adolescents - OH	Direct	PI CME	9/1/2020	8/31/2021	Yes
Chapter Quality Network (CQN) Improving Immunization Rates for Adolescents - NC	Direct	PI CME	9/1/2020	8/31/2021	Yes
Chapter Quality Network (CQN) Improving Immunization Rates for Adolescents - PA	Direct	PI CME	9/1/2020	8/31/2021	Yes
Chapter Quality Network (CQN) Improving Immunization Rates for Adolescents - UT	Direct	PI CME	9/1/2020	8/31/2021	Yes
Project ECHO: Anxiety	Joint - OR Chp	Internet Activity Live / Live Webinar (Online/web-based)	09/03/2020	8/5/2021	Yes
AzAAP Substance Use: Screening, Brief Intervention, Referral to Treatment (SBIRT) ECHO	Joint - AZ Chp	Internet Activity Live / Live Webinar (Online/web-based)	9/3/2020	4/1/2021	Yes
13th Annual District VI Neonatology Meeting: Controversies in Neonatal Clinical Care	Direct	Internet Activity Live / Live Webinar (Online/web-based)	9/11/2020	9/11/2020	No
QI Bootcamp for Hospitalists	Direct	Internet Activity Live / Live Webinar (Online/web-based)	9/25/2020	9/25/2020	Yes
<b>2020 National Conference and Exhibition</b>	DOE	Other (Internet Live and Enduring)	10/2/2020	10/6/2020	Yes
Aloha Update: Pediatrics® 2020	Joint - CA Chp	Course/Live Activity	10/17/2020	10/23/2020	Yes
Practical Pediatrics CME Course: Tucson	DOE	Course / Live Activity	11/6/2020	11/8/2020	Yes
Harnessing the Power of Traditional and Social Media in Health Care	DOE	Course / Live Activity	11/14/2020	11/14/2020	Yes
42nd Annual Las Vegas Seminars	Joint	Course / Live Activity	11/19/2020	11/22/2020	Yes
Developmental-Behavioral Pediatrics Course	DOE	Course / Live Activity	12/2/2020	12/6/2020	Yes
Practical Pediatrics CME Course: Savannah	DOE	Course / Live Activity	12/11/2020	12/13/2020	Yes

## Contact the Accreditation Team

### Senior Manager of Accreditation

Nikki Berry  
800-433-9016 Ext. 6382  
[nberry@aap.org](mailto:nberry@aap.org)

### Accreditation Specialist

Virginia Roldan  
800-433-9016 Ext. 6653  
[vroldan@aap.org](mailto:vroldan@aap.org)

### Accreditation Coordinator

Katherine McCaskill  
800-433-9016 Ext. 6274  
[kmccaskill@aap.org](mailto:kmccaskill@aap.org)

