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CME Update

Timothy P. Brigham, PhD\* Jeanne G. Cole, MSEd\*

\* Thomas Jefferson University

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# CME Update

Welcome to the inaugural column of CME UPDATE, provided by the Office of Continuing Medical Education at Jefferson Medical College.

# The purposes of this column are to:

- Inform *Health Policy Newsletter* readers about CME and its issues both at Jefferson Medical College and beyond;
- Showcase new and/or particularly interesting CME activities that may be of interest to readers; and
- Expand the reader's knowledge of the sometimes arcane workings of the CME world.

# What is new in CME? In a word: CHANGE!

As the growth of managed care has pushed hospitals and physicians toward greater accountability in medical practice, similar forces have been operating in the educational realm, driving medical schools, residency programs and CME divisions toward greater educational accountability.

# In CME, there are three key organizations driving such change:

- The Accreditation Council for Continuing Medical Education (ACCME) (the national accrediting body for CME)
- The AMA
- The American Board of Medical Specialties (ABMS)

This year, the ACCME launched a new system for approving organizations to provide CME for physicians. Simultaneously, the AMA and the ABMS are reconsidering the importance of content over process in CME. CME organizations must adapt to this new and evolving environment and transition from old to new. This is a difficult task, especially for CME units like Thomas Jefferson University that serve complex health care systems and medical schools.

The new accreditation system follows the trends in health care management by focusing on accountability and ongoing evaluation/improvement processes; and by directing attention to the impact of continuing medical education activities on the ultimate goal: *do physician performance and patient care improve as a result of the education?* This is a different view from the old system, which at times seemed to emphasize 'documentation' (or the collection of paper for the files) over educational outcomes.

In the new system, accredited organizations will not be rewarded for maintaining good files (although documentation in the world of medicine is a continuing fact of life); rather, achievement of exemplary accreditation status can be reached only through tracking how physician practice and patient care improve. This is a significant change and one that cannot happen overnight. To achieve this goal, the collaboration of many different partners will be necessary.

Jefferson Medical College is a member of an unique consortium of medical colleges in Pennsylvania known as CACME (which includes three other medical schools in Pennsylvania: The University of Pittsburgh, Temple School of Medicine, and Penn State School of Medicine). This Consortium is collaboratively implementing the new accreditation system. As participants in a national pilot study that influenced the development of the new accreditation standards, CACME members strive to simplify approval processes and concentrate on education, evaluation, and improvement. We hope that you will see these changes as they are implemented here in the Philadelphia area, and invite you to share your expertise to improve our CME offerings and the care of our patient population.

As a new regular feature in the *Health Policy Newsletter*, we will present answers to commonly asked questions, and keep you informed on the progress of change in the practice of CME. We welcome your questions and feedback, and thank Dr. David Nash for providing this opportunity to be part of the Newsletter.

#### Timothy P. Brigham, PhD

Assistant Dean for Graduate and Continuing Medical Education Jefferson Medical College of Thomas Jefferson University Email: timothy.brigham@mail.tju.edu Phone: 215-955-2012 Fax: 215-955-2868

#### Jeanne G. Cole, MSEd

Managing Director, Office of CME Jefferson Medical College of Thomas Jefferson University Email: jeanne.cole@mail.tju.edu Phone: 215-955-8411 Fax: 215-923-3212