A 21st Century Vision for Continuing Education
at Thomas Jefferson University

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The US health care system is undergoing profound change including educating a new health profession workforce. Recommendation 12 of the Committee on the Quality of Health Care in America in their report for the IOM, “Crossing the Quality Chasm,” states that “clinical education, to be consistent with the 21st century health system, must be restructured throughout the continuum of undergraduate, graduate, and continuing education.” This effort includes developing the concepts of teamwork and interdisciplinary educational programs.

On October 8, 2002, the Committee on Continuing Medical Education convened a task force for the purpose of examining the role of Continuing Medical Education (CME) in relation to the Jefferson Medical College (JMC) overall mission. There were 28 attendees representing 12 clinical departments/divisions of JMC and the College of Health Professions. Barbara E. Barnes, MD, MS, Associate Dean for CME at the University of Pittsburgh, gave the keynote presentation: “Thinking Strategically about CME, Opportunities, Challenges and Creative Approaches for Academic Medical Centers.” Dr. Barnes made the following points:

- There is a limited literature regarding the effectiveness of traditional CME.
- More sophisticated outcomes studies are needed.
- Over 50% of funding for CME comes from commercial support, advertising and exhibits.
- New techniques for CME might include writing software programs for use in PDAs.
- The health care system will require physicians to practice as part of a team.
- CME needs to develop performance metrics for measuring outcomes.
- CME needs to be central to the academic mission of medical schools.

The rest of the meeting was devoted to three brainstorming sessions devoted to identifying: the elements necessary to develop a “branded” Jefferson CME program, the obstacles to Jefferson’s CME program’s ability to meet the needs of 21st century health care delivery, and the resources needed to support the vision of Jefferson CME for the 21st Century. Conclusions reached in the sessions include: establishing a logo for all CME materials, developing integrated programs for physicians and other health care professionals, developing new sources of funding, obtaining a dedicated on-site facility for presentations, developing economic incentives for the faculty that reward CME activities, and assessing the needs of our customers (eg, pharma, physicians, and other health care professionals).

In our Office of Health Policy & Clinical Outcomes, Center for Research in Medical Education and Health Care, and Office of Continuing Medical Education, Jefferson has the expertise to create a visionary CME program for the 21st Century that includes...
developing innovative, interdisciplinary programs and sophisticated outcome measures.

About the Author

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