



UNIVERSITY OF UTAH
SCHOOL OF MEDICINE

IOM SESSION III: CONTINUING PROFESSIONAL GENETICS EDUCATION

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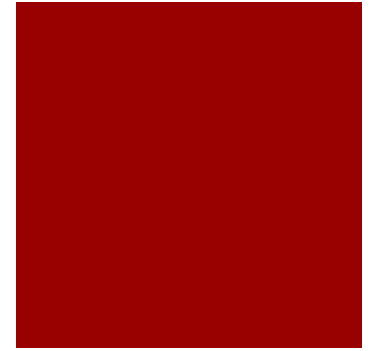
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Disclosures

- Immediate Past President Physician Assistant Educational Association (PAEA)—501c3 organization



Session objectives:

To discuss pragmatic approaches to the application of educational processes and principles for continuing professional genetics education



Continuing health professional learning—CE/CME, CPD...?

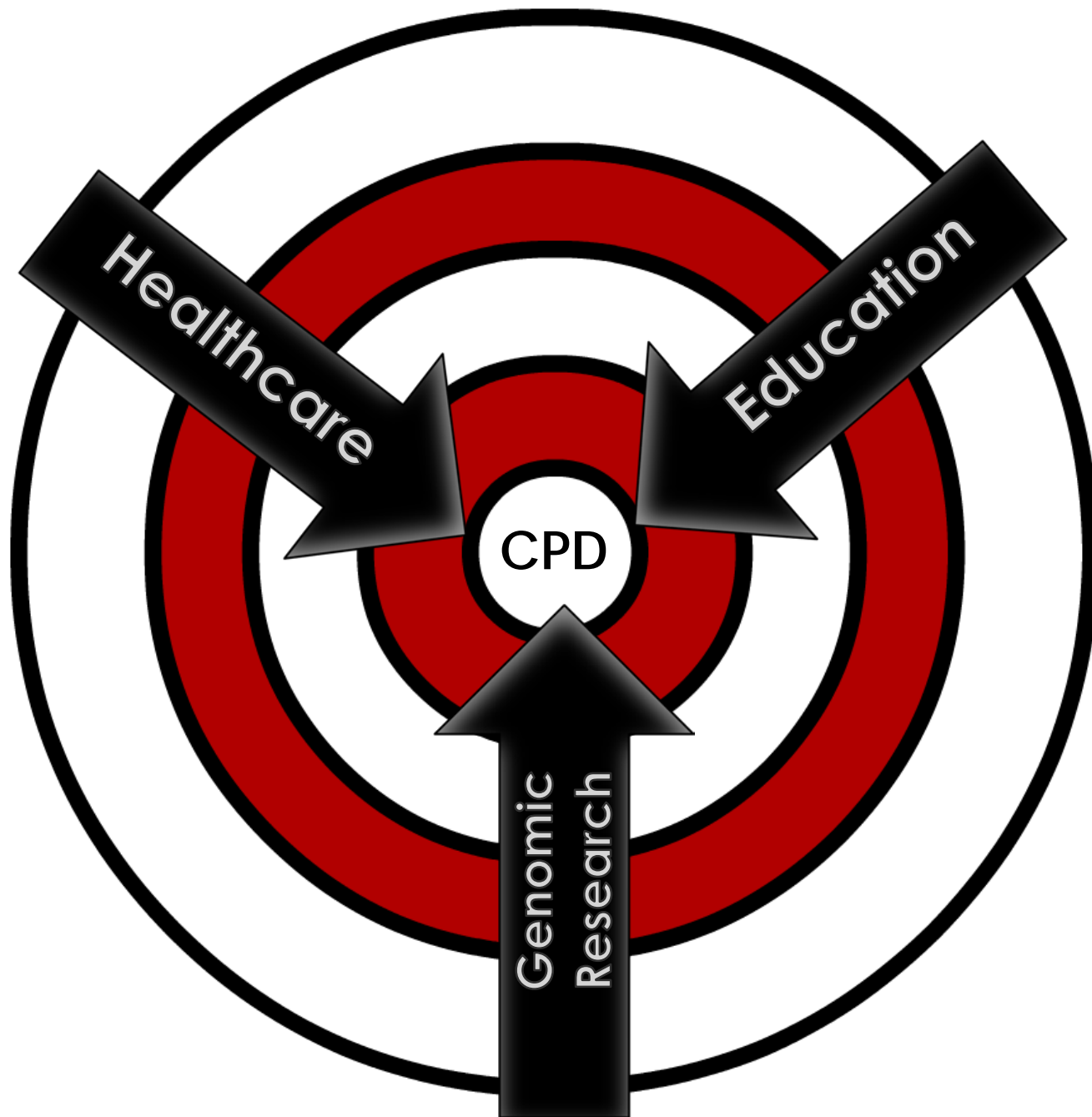


- **CE = continuing professional education**
educational activities which serve to maintain, develop, or increase the knowledge, skills, and professional performance
- **CPD = continuing professional development**
“a multi-faceted approach to the acquisition and application of knowledge during the practice life of a health care professional”
 - Is learner-driven, allowing learning to be tailored to individual needs
 - Lifelong learning across the span of one’s career

Framing Questions

How will genomics education for providers need to change, given its increasing impact on clinical practice?

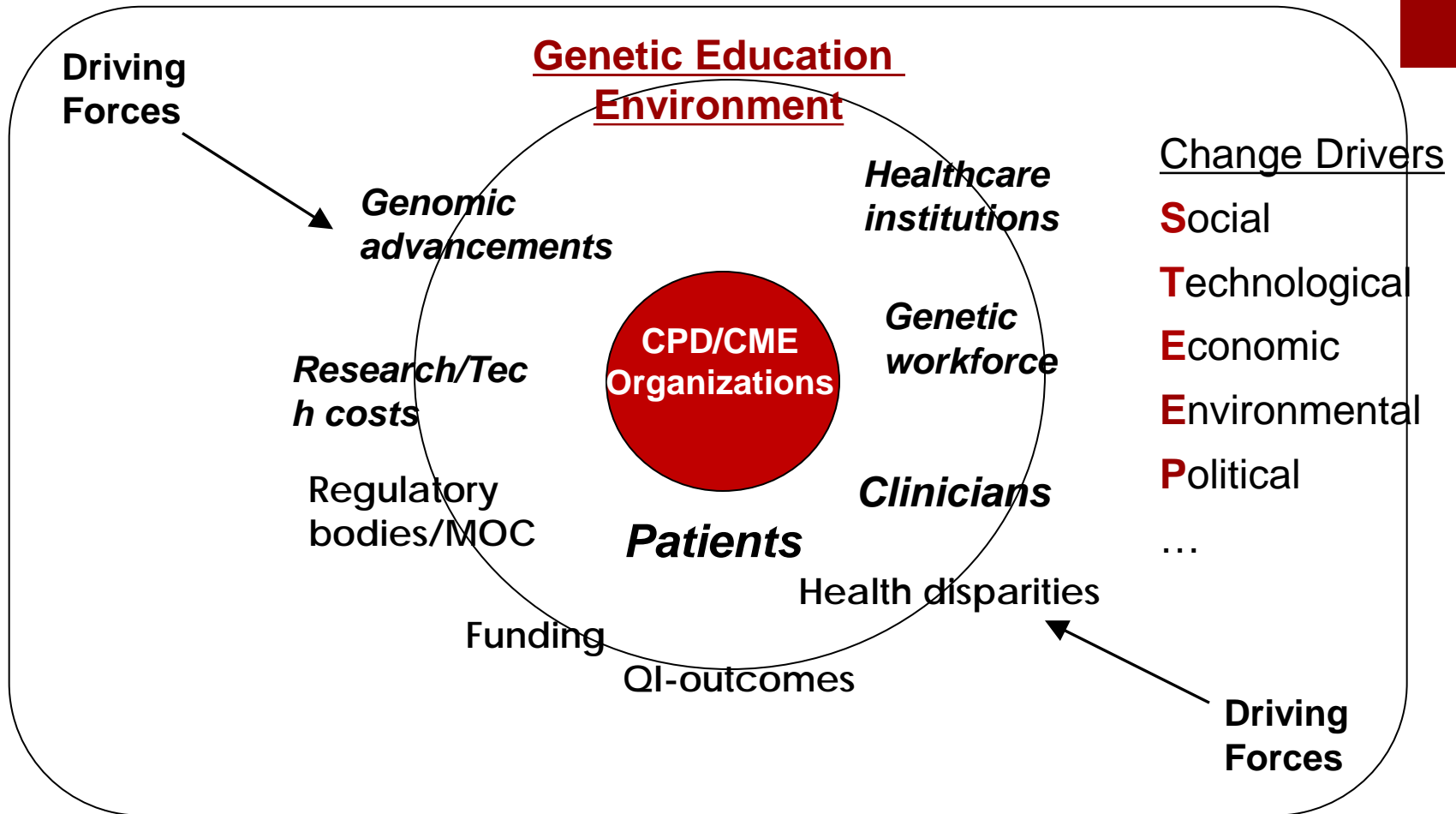
What innovative methods can we employ in CPD to help us deliver it?



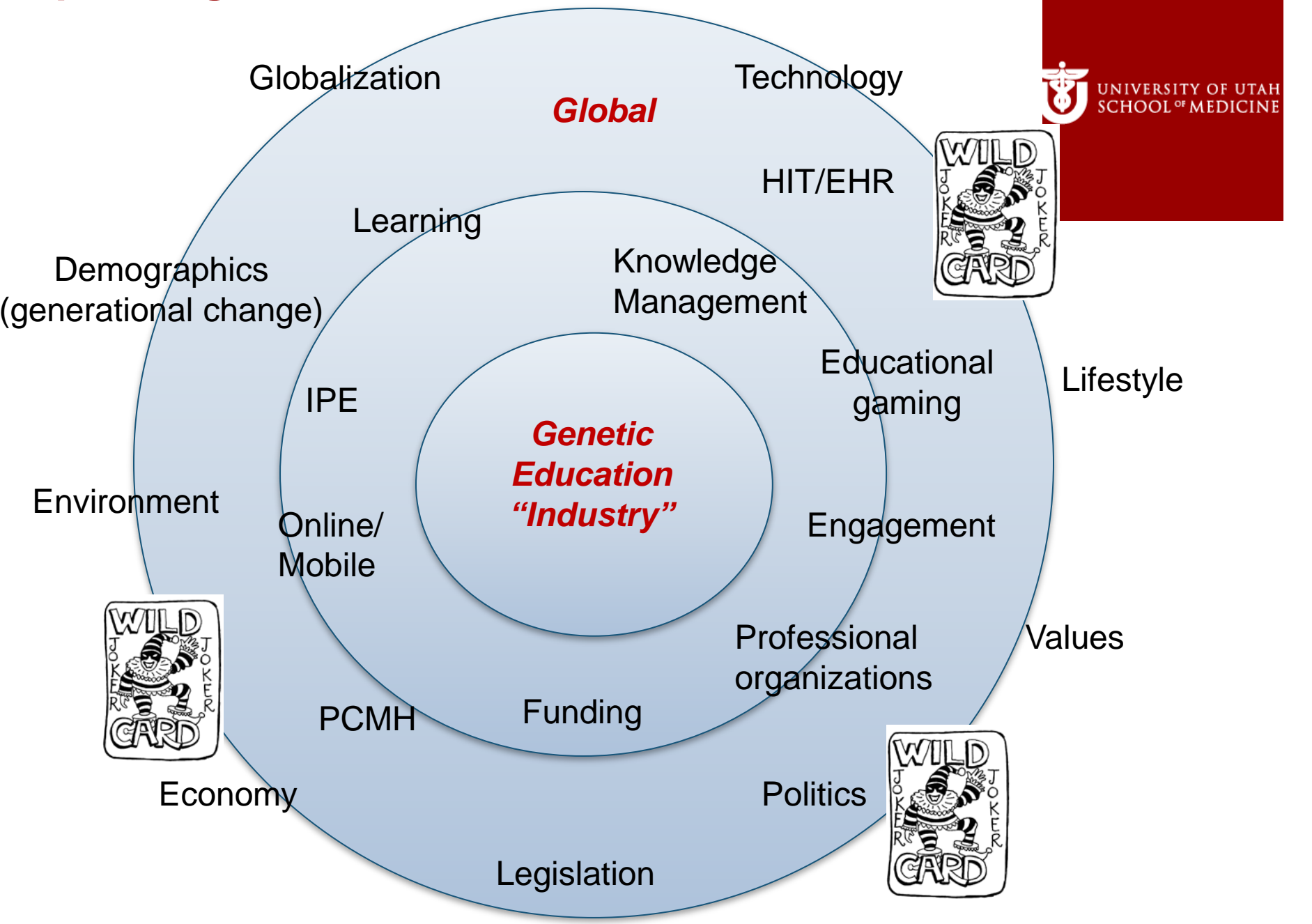
How do we plan when the future is unknown and the context of these three dynamic, converging arenas is quite uncertain?



Genomics education as an example

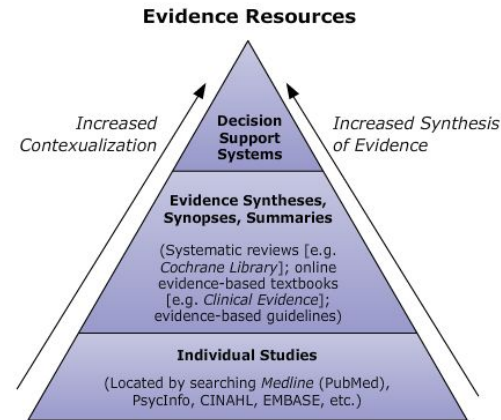


Expanding the external environment



What clinicians like:

- Structure/Framework
- Evidence
- Learning by thinking, doing, assessing (multi-modal approaches)
- Cost/Time savings/Value
- Bottom line:
Things that are worth us learning *must* positively impact patient care outcomes



Adapted from Haynes et al. Evid Based Med. 2006; 11

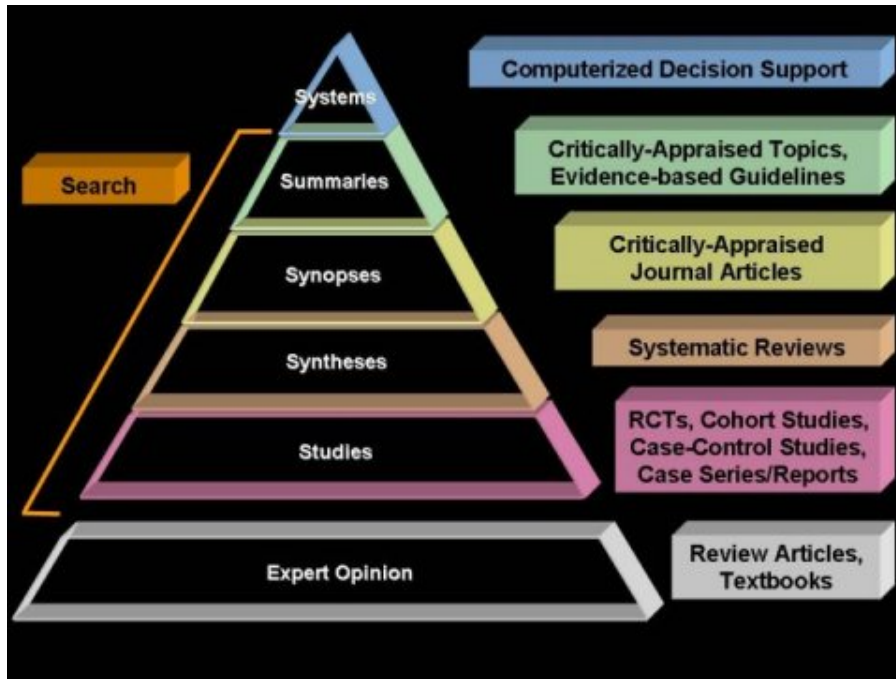


Competency Framework

- Defines the outcomes desired at the end of the educational pathway—
i.e., practicing clinician
 - Across the medical education *continuum*
 - In specialties, subspecialties
 - In a multitude of health professions
- Competency = an observable ability of a health professional
- Essential to adaptive change

Six Core Competencies for Quality Patient Care





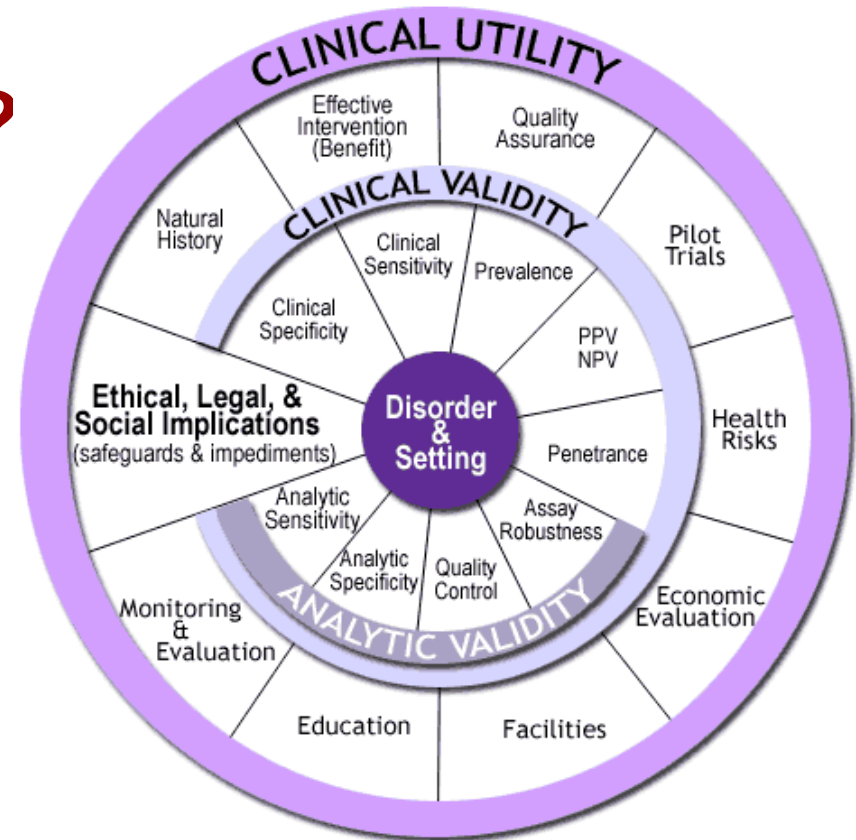
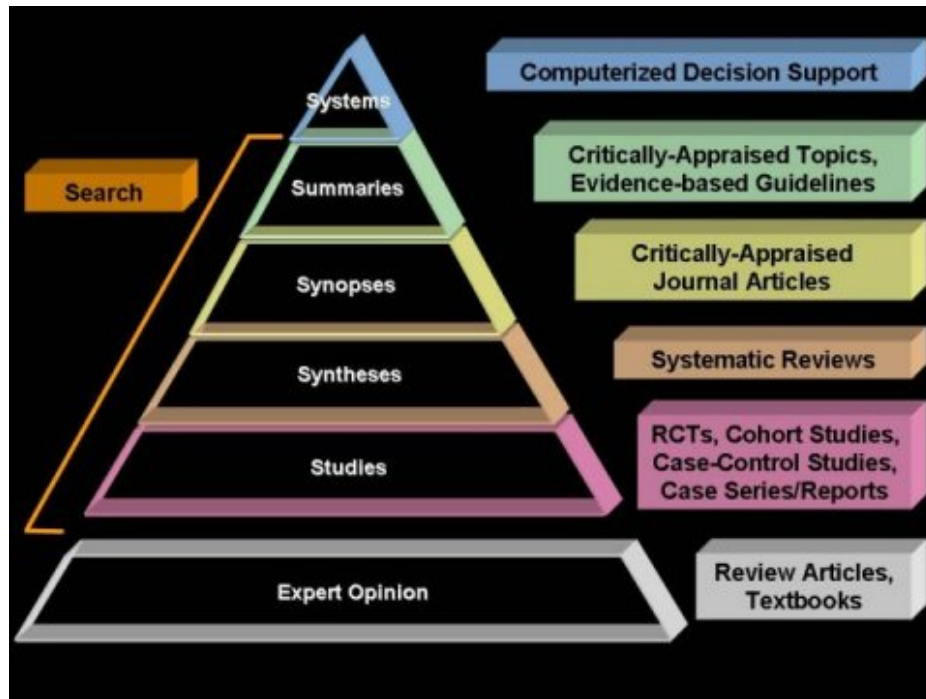
Clinicians want evidence

- Clinically meaningful
- Implementable
- Point-of-care

“If you build it [evidence], they will come...”



But, *which* evidence?





How might we imagine crafting
genomics CPD for practicing
clinicians in the near future?

Systems-based

- MOC/state licensure
- Workplace learning (POC, simulation)
- QI projects w/IP teams
- HIT audit of population
- Decision-support tools
- Patient surveys
- Workforce development

Competency-based

- MOC
- POC learning/ PI-CME
- Audit of patient panel
- Academic detailing
- Web-based learning portfolios
- E-learning (eg, MOOCs, virtual patients)

**Plausible scenarios:
Outcome-based CPD**

References



- Manolio T, et al. Implementing genomic medicine in the clinic: the future is here. *Genet Med* 2013;15(4):258–267.
- McInerney JD, et al. Preparing Health Professionals for Individualized Medicine. *Personalized Medicine* 2012;9(5):529-537.
- Advisory Committee on Interdisciplinary, Community-Based Linkages (ACICBL). Continuing education, professional development, and lifelong-learning for the 21st century health care workforce. 11th Annual Report to the Secretary of Health and Human Services and the U.S. Congress, 2011.
- Interprofessional Education for Collaboration: Learning How to Improve Health from Interprofessional Models Across the Continuum of Education to Practice: Workshop Summary. Patricia A. Cuff, Rapporteur; Global Forum on Innovation in Health Professional Education; Board on Global Health; Institute of Medicine, 2013.
- Van der Heijden K: "Scenarios: the art of strategic conversation." Wiley, 2006.



Questions/Discussion



What is needed?

For Clinicians

- Identify learning gaps/self-assessment
 - Competence in knowledge management
 - Health information technology
 - Principles of communities of practice
- Identify and access resources
- Critically appraise and decide on whether and how to apply the information

For the System

- To transform the CE world
 - Includes regulatory bodies
 - Change of culture for clinicians (champions)
 - New educational methods
- HIT
 - Integration with HER
 - POC resources/tools
 - QI/outcomes processes
 - Clinical decision making aids
- Funding sources

Potential CME/CPD Scenarios

POC CME

- Designed to help clinicians
 - manage data
 - improve safety
 - make informed clinical decisions
 - access information or community resources
- *e-Mentoring* (e.g., telemedicine consultations)
- Can provide
 - needs assessments to guide CPD
 - Interactivity with continuous integrated feedback
 - multiple learning methods
 - CE credits

PI CME

- Self-directed *and* includes systems factors; QI based
 - Assesses practice using E-B performance measures with feedback
 - Interprofessional (including patient)
 - Tests intervention and measures outcome(s)
 - Reflective
 - Must be incorporated into workflow
 - Transforms care at the practice level