Educational Intervention Development Worksheet

Use this planning guide to develop an educational intervention related to the needs/gaps you identified in your department. This tool will assist you in completing the CME application / reference.

Standards for Integrity and Independence: Standard 1 – 5 Identified Needs/gaps must be linked with desired result. Educational interventions must be based on needs/gaps related to practice.		
1.	Explain why this educational intervention is being planned. *What is the need, the gap?*[1] *In other words, what problem(s) is being addressed?*	
2.	How was the problem(s) identified? From what sources(s) did you determine there is a problem(s)?[2]	
3.	Is this single intervention or multiple interventions[3] intended to help change: (Check all that apply) 1 knowledge 1 competence (knowing how to) 1 performance (behavior) 1 patient outcomes	
4.	Describe the physician target audience for this educational intervention(s) e.g., specialty, subspecialties, private practice etc. What are the potential or real barriers facing these physicians if this need/gap is to be addressed?	
5.	Identify the IOM, ACGME/ABMS or other competencies that are related to the content of this educational intervention or planned multiple interventions. (*refer to the List of Desirable Physician attributes).*	

[1] Defined as the difference between health care processes or outcomes observed in practice and those potentially achievable on the basis of current professional knowledge (AHRQ 2006)

[2] Examples of data sources already available might include hospital data, chart audits, patient surveys, pre-test of participants' knowledge, direct observation of performance, and results of local epidemiological or national epidemiological studies. Some examples of on-line sources for exploring and identifying needs/gaps include the Virginia Department of Public Health, the Agency for Healthcare Research and Quality, Health and Human Services, the Institute of Medicine, JCAHO Core Measures and others.

[3] The updated criteria offers more flexibility in how an educational activity is defined. For example, a provider may define a "CME

activity" in the traditional sense as a single intervention. A provider may also consider multiple interventions (linked together by a common goal/overall objective to close gaps in competence, performance or patient outcomes)

Objectives must be developed and communicated.		
6.	Considering the learners' current or potential scope of practice and the problems (needs/gaps) being addressed, briefly describe the content that should be covered.	
7.	Identify potential faculty/speakers that could effectively cover this content.	
8.	Based on the needs/gaps (problem being addressed/educational needs being addressed), what are the desired results of the educational intervention?	
9.	What are the objectives for this educational intervention? *(Objectives should be limited in number, and concisely describe the desired results in terms of changes of physician's knowledge, competence or performance. Objectives must be measurable. If multiple interventions are being planned, identify the overall objectives and describe the objectives for each intervention).*[4]	
10.	Considering the desired results of the activity, what format(s) will be used? What will be the educational design? (e.g., lecture, case studies, hands-ons, etc.) Will you be using more than one format and/or educational design?	

[4] Examples include: learners will list methods and tools available to diagnose patients with depression (change in knowledge), or learners will be able to ask patients appropriate questions to diagnose whether their patients exhibit symptoms of depression (change in competence-knowing how to), or learners will use methods and tools available to diagnose their patients for depression (changes in practice).

Must evaluate effectiveness of interventions in meeting identified gap/need.	
11.	Providers must be able to analyze changes in learners' competence, performance or patient care-achieved as a result of the educational intervention(s). What evaluation methods will you use to know if the educational intervention was effective in meeting the need/gap or addressing the problem and creating changes in competence, performance or patient outcome?[5] Check all that apply: 1 Changes in knowledge or attitudes ☐ 1 Changes in competence a ☐ 1 Change in clinician behavior or practice ☐ 1 Change in patient outcomes ☐
12.	How might you assist the physician learner in identifying areas for expanding his or her knowledge or improving methods of work? *(Refer to Sample Methods to Facilitate Assessment)*
13.	Are there any barriers facing physicians in addressing this need/gap? If yes, please explain:
14.	Identify any other interventions you may pursue to address the identified problem (gap/needs).[6]
15.	Are there any other interventions not directly related to the education of the physician learner (referred to as non-educational interventions) that may be used to help close the identified gap between practice and the best evidence available? (Examples might include peer review, participant reminders and patient satisfaction questionnaires). If no, what kinds of non-educational strategies could be used?

[5] A provider might assess each intervention individually or assess the multiple interventions as a whole to determine whether the objective was met. CME activities must be evaluated in terms of changes in competence, performance or patient outcomes. A test of knowledge, including an audience response system, might be used to determine if learners are able to list methods and tools available to diagnose patients with depression. A case study or simulated patient might be used to determine participants' ability to diagnose depression. Patient charts might be reviewed to assess the use of methods and tools available to diagnoses patient for depression.

[6]. Other interventions not directly related to the education of the physician learner (referred to as non-educational interventions), and not necessarily performed by the CME program, may also be used to help close the identified gap between practice and the best evidence available. Examples might include peer review, participant reminders and patient satisfaction questionnaires.

Briefly described the learning activity you are planning.

Criteria for Commendation

This section of the application process is meant to give us information about your CME activity. Since we would like for the process to be educational for you, please challenge yourself and your team to consider each criteria and how you might in an innovative way meet it. Discuss together how the criteria can support your strategic plan and which criteria are achievable and appropriate for your mission and your learners.

16.	Is this activity planned and delivered by a collaborative multidisciplinary team and designed to change competence and/or performance of the healthcare team? (must be more than one profession) If yes, please list the MD team member(s) and specialty involved in planning: Please list the multidisciplinary team member(s) and specialty other than MD's involved in planning:	
	Will multidisciplinary health care professionals participate in the teaching of this activity? (e.g. Ph.D., RN, NP, Social Worker, PharmD, other related professional) If yes, please provide a list of sessions taught by multidisciplinary professionals:	
	Will this activity be attended by health care professionals other than MD's? If yes, please provide a list of types of other providers:	

17.	Are patients and/or public representatives engaged in the *planning AND presentation/delivery* of the CME education? (e.g. school board, the Mayor, Teachers, Lawyers, Business people, etc.) If no, how could this be something you would incorporate into your program? If yes, please list any patient(s), public representatives involved: (teachers, lawyers, business professionals, etc.)	
	Are other departments / divisions within your organization engaged in the *planning AND presentation/delivery* of the CME education? If no, could this be something you would incorporate into your program? If yes, please list departments / divisions within your own organization:	
	Are there any external organizations with which you collaborated in planning this activity? If no, what organization could you enlist in developing your program? If yes, please list external organizations:	
	Are medical students, residents, fellows, or other health care students involved in the *planning AND presentation/delivery* of the CME education? If no, could this be something you would incorporate into your program? If yes, please list any trainees involved:	
	Will any sessions in this activity be *taught or led* by trainees (any students/residents/fellows within the health care professions)? (e.g. This can include a case presentation by a student) If yes, please list those sessions which fulfill this criteria:	
	Will trainees (any students of the health care professions) *attend* this activity? If yes, please describe:	

18.	Please list any part of this activity that used Quality Improvement and Patient Safety Data in the planning, and were designed to address this need:	
	Consider how this activity can teach about collecting, analyzing or synthesizing health care or practice data, please describe:	
	Please describe how it might be adjusted to incorporate research:	
	Were any research studies or observations done to demonstrate the basic elements of your activity that leads to improved patient care? If yes, please describe:	
	Please describe additional strategies that would be used outside of this activity to reinforce changes in patient care? (e.g. signage, EMR changes, follow-up e-mails, notices)	
19.	Does this activity address factors beyond clinical care that affect the health of populations, such as economic, social and environmental conditions; healthcare and payer systems; access to care, health disparities, or the population's physical environment? If yes, what are those factors:	
20.	Please consider how collaborating with one or more outside healthcare organization(s) can more effectively address population health issues? (e.g. Virginia Department of Health, Centers for the Disease Control, National Institute of Health, etc.) Name potential collaborating organizations:	

21.	Does this activity include any focus upon patient or interprofessional communication skills? (e.g. verbal, nonverbal, listening, and writing with patients, families, teams, presentation, leadership, teaching and organizational skills) If yes, please list any sessions that incorporate this:	
	We will provide an evaluation of observed (e.g. in person or video) communication skills: ☐ Yes ☐ No	
	We will provide documentation of formative feedback to the learner about communication skills: ☐ Yes ☐ No	
22.	Do any of the sessions of this activity specifically focus on learning technical or procedural skills in patient care? (e.g. operative skill, device use, procedures, physical examination, specimen preparation, resuscitation, critical incident management, electronic medical record, etc.) If yes, please list:	
	We will provide an evaluation of observed (e.g. in person or video) technical or procedural skill: ☐ Yes ☐ No	
	We will provide documentation of formative feedback to the learner about technical or procedural skill: ☐ Yes ☐ No	
23.	Do any of the sessions of this activity develop individualized educational plans for the learner? (e.g. customize an existing curriculum for the learner, track learners through a curriculum or work with leaners to create a self-directed learning plan where the learner assesses their own gaps and selects content to address those gaps) If yes, please describe:	
	We will provide documentation that tracks the learner's repeated engagement with a longitudinal curriculum/plan over weeks or months AND provide individualized feedback to the learner to close practice gaps. ☐ Yes ☐ No	
	How do you anticipate providing this? (e.g. competency checklist), please describe:	
24.	Carilion Clinic's CME Program values the utilization of support strategies which are designed to supplement, enhance, and reinforce learner changes. Please identify which strategies will be utilized to support the learners for this activity: ☐ Reminders (emails, cards, newsletters, posters, etc.) ☐ Additional materials (handouts, resource lists, templates, pocket guides, etc.	

	____ Online instructional materials (including apps, discussion, etc.) ____ Other (please specify):	
	How can you conduct a periodic analysis to determine the effectiveness of the support strategies and planned improvements? Please describe:	
25.	Does this CME activity do any of the following: Will you be able to engage in research/scholarship? If yes, please list: Will you be able to submit, present or publish a poster, abstract, or manuscript in a peer-reviewed form? If yes, please describe:	
26.	We developed a learning plan based on needs assessment of the team? ____ Yes ____ No	
	Our learning plan includes some activities external to the provider (attending conferences, lectures, etc.)? ____ Yes ____ No	
	Our department dedicates time and resources for the CME team to engage in the plan? If yes, please explain:	
27.	Improve participant performance? (e.g. measures performance changes in learners, demonstrates improvements in the performance of learners) If yes, please explain the educational format:	
	Improve healthcare quality? (e.g. collaborates in the process of healthcare quality improvement, demonstrates improvement in the healthcare quality If yes, please explain the educational format:	
	Improve patient/community health? (e.g. collaborates in the process of improving patient or community health, demonstrates improvement in patient or community outcomes) If yes, please explain the educational format:	

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