

The President's Perspective

By David Wiljer, PhD, University of Toronto
President, Society for Academic Continuing Medical Education



Dear Colleagues,

Time has flown by since the last Intercom issue and the dust is beginning to settle on the country roads leading back from Nashville. Congratulations to all on a great meeting and a special shout out to Tym Peters, who continues to try to explain the multiverse to me. There are, however, still workshops that you can attend to keep in the spirit of longitudinal learning, oh and I have some vague memory about repetition maybe being important. If you want a refresher about the meeting, you should check out the CE News proceedings from the annual meeting.

What is on my mind as we enter summer? During the first weekend of June, I went on my first camping trip on the shores of Lake Erie, where I listened to the cacophony of beautiful birds and waved at all our members in Cleveland as I sat on the beach and reflected on the past year and what is to come.

On a SACME note, I am very excited about the Manning Award presentation in June. The Manning grant has played such an important role for the Society and contributed to new discoveries in CPD. The work on the SACME JCEHP Supplement, exploring new conceptual ideas in CPD, continues and a great big thank you to all of those who submitted an article. The Board will be having a retreat in July to think about the future of CPD and the role that SACME will play. There will be new workshops in the fall and so much more, of course.

Unless you have been avoiding the internet or human interaction over the last few months, you know that natural language generation is creating quite a buzz everywhere, from planning your next trip to balancing your investment portfolio. ChatGPT, released November 30, 2022, has even become a household verb ... need

something done, CHATGPT it, Googling is so yesterday. Even my almost 80-year-old dad is starting to *dadsplain* AI to anyone who will listen. Yes, he watched a Geoffrey Hinton video and now he is an expert on the impending AI winter and subsequent apocalypse that will destroy humanity as we know it.

Are we ready for ChatGPT in CPD? I did a quick PubMed® search, my answer for almost everything... it

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gave me a list of 594 citations. Yikes, that is a lot of reading (I searched two weeks ago and it was only 392 citations). The first citation today was, *ChatGPT, artificial intelligence and scientific writing: What authors, peer reviewers and editors should know*. That seems important. Journals are starting to publish position statements on natural language generation and scholarship. But what about CPD? I don't have time to go through 594 citations and meet Ronan's deadline for Intercom this month. What am I to do? I know! I will ask CHATGPT, brilliant. So, I logged on to my free version of ChatGPT (still not convinced I should spend \$20 per month for the premium version) and I asked ChatGPT, *why is AI and ChatGPT important for Continuing Professional Development of Healthcare Professionals and what I should I say to SACME members?*

Here is the message that ChatGPT prepared for all of you:

Subject: The importance of AI and Chat for Continuing Professional Development of Healthcare Professionals

Dear [Name],

I am writing to you as a continuing professional development expert to discuss the importance of AI and Chat for healthcare professionals in their ongoing education and training.

Artificial intelligence (AI) and chatbots have become increasingly popular in the healthcare industry. They have the potential to revolutionize the way healthcare is delivered and have already started to do so. AI has the ability to analyze and interpret large amounts of data quickly and accurately. Chatbots, on the other hand, can provide instant responses to patients' questions and concerns, making them an ideal resource for patient care.

For healthcare professionals, AI and chatbots can provide valuable insights and support. AI can help identify patterns and trends in patient data, enabling healthcare professionals to make more informed decisions. Chatbots can help healthcare professionals provide patients with accurate information and support, enabling them to make better decisions about their health and well-being.

In addition to improving patient care, AI and chatbots can also enhance the continuing professional development (CPD) of healthcare professionals. With the rapid pace of technological change in the healthcare industry, it is essential for healthcare professionals to stay up-to-date

with the latest developments in their field. AI and chatbots can provide healthcare professionals with access to the latest research and insights, as well as practical tools and resources to improve their practice.

Furthermore, AI and chatbots can offer a more personalized and engaging learning experience for healthcare professionals. With AI-powered adaptive learning, healthcare professionals can receive tailored learning materials and assessments that cater to their individual learning styles and needs. Chatbots can also provide interactive learning experiences that simulate real-world scenarios, enabling healthcare professionals to practice their skills in a safe and controlled environment.

In conclusion, AI and chatbots have the potential to revolutionize the healthcare industry and enhance the continuing professional development of healthcare professionals. As a continuing professional development expert, I encourage you to consider the benefits of AI and chatbots for healthcare professionals in your training and education programs.

Thank you for your time and consideration.

Best regards, [Your Name]

Wow, this sounds impressive and rather important. I have to say that the ChatGPT response was pretty interesting. Although this is not perfect, it took less than a second to produce. And, there is a lot to unpack here, including potential strategies for personalized learning. This sounds like something we should spend some time on.

So, I would love to hear your thoughts. Are you thinking about this in your office? Are you being proactive? Are you incorporating AI into your CPD practice in some way? Please email me if you want to share and we will create some space at our next Annual Meeting to reflect on the impact of AI on CME and CPD.

Wishing you all a great summer,

*David Wiljer, PhD
President, SACME, 2023*

SACME 2023 Annual Meeting Evaluation Results: Inspiring, Igniting the CPD Imagination, March 14 – 17, 2023

The SACME Planning Committee is pleased to present our 2023 annual meeting evaluation survey results. Once again, overall feedback is positive and also identified opportunities for improvement as you might expect from our maiden voyage into the hybrid environment. The response rate for the survey was 40%, with 97 out of 242 attendees responding to the survey. Here are some highlights.

Who responded?

71% of respondents are currently working in a medical school, teaching hospital, or university department; 11% work at a professional association or society; 5% in a governmental agency and 4% at a community-based clinic or health center. Approximately half of all respondents (49.5%) were either a director or manager of a CME/CPD unit and 16% identified themselves as an associate or assistant dean (not that there's anything wrong with that. One quarter are relatively new to the field, with 0-5 years of experience; 49.5% have been involved in CPD for between 6-20 years; and 26% of respondents are part of the long-in-the-tooth crew with more than 21 years of experience.

Did we meet our Objectives?

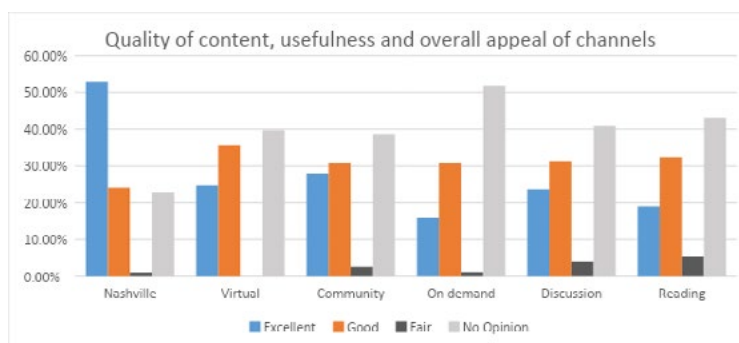
97% of either strongly agreed or agreed that we achieved our aims; 2% were on the fence and we did have 1% that disagreed, which is always something to work on given the time and resources we all give up to attend.

Did the hybrid, multi-channel approach work for you?

On the whole, the answer was an enthusiastic “yes”, but you did identify some areas for the committee to work on. When asked if the multichannel features enhanced the learning experience, 64% strongly agreed or agreed, 29.5% sat on the fence, and 6% disagreed.

When asked if they received adequate information on how to use the multiple content channels available to them, 62% said “Yes” while 38% responded that they could have benefitted from more detailed information, giving us an area to target for improvement (probably some information that could be repeated more often ☺?).

When assessing quality of content, usefulness, and overall appeal (an admittedly large amalgam of individual indicators, but survey space is always limited) 75% rated the Nashville experience as “excellent” or “good”, while 23% had no opinion. Those results for each channel were as follows, and reviewed in tandem with opinions on the adequate information question suggest that we need to increase our education efforts around their use:



Should we do it again? 62% either agreed or strongly agreed that the HyFlex structure is an effective educational format and should be repeated in future years. 13% of respondents agreed somewhat with this statement, 17% had no opinion and 8.5% somewhat disagreed or disagreed. Overall, the eyes have it, but there's work to be done to win everyone over.

Teaching and Learning Methods

Plenaries were the most popular [as in deemed most effective] 85% of respondents deeming these to be effective; 75% rated in-person panel discussions as effective, and 51% deemed oral presentations the same way. 15% of respondents said on-demand poster presentations were “most effective”. When asked which teaching and learning formats are preferable, 57% respondents indicated they're ok with a traditional presentation plus discussion format; 76% favor panel discussion; and 73% selected small group workshops. 37% of respondents selected on-demand lecture for self-learning, again indicating that we're a little unsure of changes to our well-worn structures. Formats that seem to be not so popular include workshops (26%) and virtual longitudinal programs (22%). 20% of respondents selected all of the above.

Did we practice what we preach? 89% of respondents agreed that most sessions incorporated adult learning principles with an interactive format.

What did you learn?

The CE Toolkit was a standout for new learning, 12 of 65 respondents mentioned the toolkit as a highlight. Presentations on communicating the value of continuing education were well received (6), and respondents also cited the value of learning how to incorporate the patient voice into education (5). And it needs to be said again, 9 respondents found that repetition is also a valuable concept to keep in mind.

What should the planning committee consider to improve your learning experience at future meetings?

This question was seeded with these topics: curriculum structure, duration of meeting, teaching formats, engagement strategies, and social amenities. 25 of 63 people mentioned structure in some shape or form. Five people would like shorter days; two people liked the extended break time but one person thought they were too long; one person thought we should stick to virtual events only, one thought we should do in-person only, and a third said we need to pick one or the other but didn't specify.

17 respondents alluded to teaching and learning format in some way, shape, or form, but poster presentations were the most mentioned topic (10). Although two individuals mentioned the rapid-fire style of the poster presentations as enjoyable, six people did not enjoy this approach. Other suggestions included more debate panels, small-group breakout sessions, and workshops.

Curiously, just one person mentioned attendee preparation, a big concern raised in the question related to adequate preparation. Overall, there was enough conflicting opinion to leave the planning committee feeling a little bit like Rick Nelson at a garden party, but that's why they get paid the big bucks.

Topics of Interest for Future Meetings and Webinars

Respondents provided ample feedback on the topics and categories of most educational interest to them for future SACME meetings and webinars. Here are just a few:

11 of 46 respondents want to learn more about issues of diversity, equity and inclusions, while 7 respondents cited burnout as a topic they'd like to learn more about. Other topics mentioned include the toolkit (3), use of artificial intelligence (3), how to incorporate patients into CE (3), faculty development (2), and simulation (2).

There's No Time Like the First Time: *A Commentary on the SACME 2023 Annual Meeting*

By Sophie Soklaridis, PhD, Column Editor

Have you heard? The COVID-19 pandemic has led to significant changes and disruptions to continuing professional development around the world. Among the lingering questions for the CPD community are: 'Is this the new normal?', 'Are we there yet?', and 'What on earth is a Hy-flex meeting?' As a good reporter, I solicited the reflections of several colleagues in attendance at the SACME Annual meeting, held in a hybrid form in Nashville, Tennessee, March 15-17, 2023.

Rowen:

My experience at the recent SACME 2023 Annual Meeting was highly rewarding. The conference provided an opportunity to engage with emerging topics in CPD/CME and an avenue for engagement with colleagues worldwide. The implementation of the multichannel

virtual conference platform provided a useful tool for building connections with both in-person and virtual attendees, while also providing attendees access to up-to-date information on conference developments. In particular, I found the event design of incorporating small-group activities to be especially valuable in fostering a sense of community and facilitating the sharing of knowledge among attendees. As hybrid delivery continues to evolve, I look forward to the development of innovative methods that will enable both in-person and virtual attendees to engage together in small-group work. Lastly, I greatly appreciated the thoughtfully designed event schedule. The manner in which sessions were spaced out and breaks were scheduled allowed for ample time to network and connect with colleagues.

What advice do you have for other first time SACME members? For future first-time attendees, I suggest leveraging *all* available opportunities to network and establish connections. For instance, utilize conference badge ribbons as ice breakers or conversation starters. Engage in break activities and online competitions to enhance your conference experience and facilitate relationship building. Finally, should the occasion arise, seize the opportunity to present at the Annual Meeting. The endeavor will not only increase your professional profile, but also motivate attendees to initiate contact with you.

Georgia:

My first time attending the SACME Annual Meeting was overwhelmingly positive. I found the conference to be a welcoming space and was impressed with the thought put into the planning of each day, especially the inclusion of activities that provided a platform for attendees to connect with one another. The conference provided valuable insight into current issues in the field of CPD and the range of topics covered along with the variety of smaller and larger group activities sparked new ideas that I could apply to my area of research. In addition to the breadth of diverse conference content available, the keynote and plenary presentations were really effective at solidifying some of the overarching themes discussed across sessions. If you are attending the SACME conference for the first time, my number one piece of advice is: get involved! Attend different types of sessions (including those that feature topics that are not in your immediate portfolio), take time to participate in the wellness activities, and make connections with the other conference delegates.

What advice do you have for other first time SACME members? As an early career researcher it can be intimidating to network with scientists further along in their career, especially those in senior positions. However, I found the attendees and presenters were more than happy to chat with you and answer questions you may have. Don't be afraid to make those connections!

Holly:

Last month, I had the opportunity to attend my first SACME Annual Meeting in Nashville. As an early career health researcher, this conference was a wonderful opportunity to learn, network, and share my work. Specifically, I appreciated the opportunity to connect with new colleagues from around the world and expand my understanding of approaches to CPD, learning theories, innovative initiatives, conceptual frameworks, tools, and resources. I found the conference stimulating and engaging as it highlighted diverse perspectives through a

variety of presentation formats. From engaging keynotes and panels to practical workshops and lighting round poster presentations, I was amazed by how quickly the days went by.

I was honored to be a part of a panel presentation that stimulated meaningful discussion and thoughtful questions. This was a great professional opportunity for me to share my work and perspectives with a large and diverse audience. My notebook is full of new learnings and big ideas that I am excited to integrate into my work. In addition to these rich learning opportunities, the days were interspersed with fun activities that made making connections easy. I enjoyed connecting with new friends over breakfast, through the conference app, line dancing, yoga, and more.

What advice do you have for other first time SACME members? If you are heading to the SACME conference for the first time, grab a notebook and a cup of coffee and get excited to meet wonderful people and be inspired with big ideas.

Kayle:

I've used the words "inspiring" and "enriching" several times now in describing my first SACME conference experience to friends and colleagues, and I have absolutely meant them. What struck me most was the feeling of a shared commitment to positioning continuing professional development as a site of system-level improvements in health care quality, rather than just being about keeping practitioners' knowledge and skills up to date. It was reassuring to see that so many of the issues I think about every day are central concerns for people whose health care education careers are far more established than my own, particularly when it comes to ensuring education, evaluation, and public engagement are done in a genuinely meaningful way.

What advice do you have for other first time SACME members? For anyone attending SACME for the first time, don't be afraid to speak up! Whether I was asking questions to presenters or just making conversation during breaks, everyone I interacted with was genuinely welcoming, kind, and respectful. I would also strongly recommend participating in some of the social activities scheduled between presentations and talks. They were a great way to recharge my brain, meet new people, and just have a lot of fun.

I sincerely hope everyone reading these excerpts will be inspired and hopeful with our journey towards a 'new normal'. It's looking pretty good to me from where I am sitting.

SACME Team to Lead ACCME Work Group on Funding Issues in CPD

SACME Team to Lead ACCME Work Group on Funding Issues in CPD

The onset of the Covid-19 pandemic might look a little hazy in the rearview mirror, but I think most of us will remember feeling unsettled and uncertain about switching CME activities to virtual environments. Lea Mabry at the University of Arkansas for Medical Sciences popped a question into the SACME listserv about how to handle negotiations with exhibitors. Annette Donawa at Thomas Jefferson University was mulling the same problem and jumped in to form a work group to discuss strategies for funding CPD activities, and a movement was born – or, more precisely, the SACME CPD funding work group.

As many of us are aware, Annette has never met a research question she didn't like, so she organized the group to examine a couple of specific questions: (1) how had Covid-19 changed the economics of CPD activity, particularly in relation to pricing and funding support; (2) what tools and methods could be applied to make virtual environments appealing to learners (after all, you have to have participants to make any support pitch attractive); (3) how would these huge changes affect the value proposition of CPD. The group addressed how to develop virtual programs that would attract funders and exhibitors, in addition to creating tier levels that would be reasonable and acceptable for funders' budgets, pricing levels and trends, and audience engagement through input from 35 people representing 24 distinct institutions. Thomas Jefferson University also surveyed previous exhibitors to gain insight on price points and modes of meeting and interacting with attendees outside of the educational programs.

The outgrowth of this effort was a pitch at ACCME's Learn to Thrive event in May to create a formal working group titled *Using Innovation and Creativity to fund your CME/CPD Activities*. Delivered by Annette, Rick Wiggins, Rachel Kolb and Letti Bresnahan, the fundamental idea is to generate resources we can all access and use for the betterment of our community. Although many of us are competitors in the struggle to generate support from limited available funding, a little co-optation to create a reference guide or tool set for understanding the general funding landscape, how to identify sources, and

make funding decisions can be a tide to help lift all boats.

The pitch worked. This group will convene its first meeting on Wednesday, July 12th at 3 pm EDT to organize around its mandate. The full slate of meeting dates and times is listed below. All SACME members are welcome to participate. If you're interested in participating please [contact Annette](#) to sign up by Friday June 30th.

Membership sign up deadline: 6/30/2023

Meeting Dates:

- Wednesday July 12th, 2023: 3p-4p EDT
- Wednesday August 16th, 2023: 3p-4p EDT
- Wednesday September 20th, 2023: 3p-4p EDT
- Wednesday October 4th, 2023: 3p-4p EDT

Members are asked to attend at least one of these four meetings and find a way to contribute. We're all busy professionals, but if you feel like you can add to the store of knowledge, please jump in, we'll all be better off for it. As Annette puts it, "the idea is to tap into other peoples' creativity, talk about what we're doing, what works and what doesn't. We want to create a resource that is a benefit to the SACME community, one that can offer aid in strategic planning as well as the nuts and bolts of generating support for individual programs."

Again, contact [Annette Donawa](#) by Friday, June 30th if you're interested in participating.



WELCOME

SACME Board: Meet our New Board Members

The SACME board is responsible for creating policies and managing the affairs of the association. Nominations are typically collected towards the end of the calendar year and voting is concluded prior to the organization's annual meeting in the early months of the following year when new board members are announced. The 2023 meeting sees a slate of new officers who have been "voluntold" to jump in and help our organization keep humming along. Below are some details about our newest additions to the cast of characters.

If you're interested in participating on any of these or other committees, please contact us at info@sacme.org.

Vice President: Linda Caples, PhD

Linda is Director of Continuing Professional Development at the Medical College of Wisconsin (MCW) where she oversees the administration of the ABMS Multi-Specialty MOC Portfolio Program, the continuing medical education program, and the interprofessional education program. She has 20 years of experience in peer-to-peer teaching and learning within accredited continuing education. Prior to joining MCW, she served as the Director of Education for the International Parkinson's and Movement Disorder Society and traveled throughout the United States, Europe and Sub-Saharan Africa working with physicians to provide high quality education to clinicians and researchers.

Membership Chair: Natalie Sanfratello, MPH, CHCP

Natalie is the Senior Program Manager of Quality Improvement, Educational Programs, and Contracts in the Boston University Chobanian & Avedisian Center for Continuing Education (BU CCE). She began her tenure in 2015 as an Office Administrator and after several years of growth she now manages quality improvement initiatives and other large scale national continuing education programs. She provides consultative and technical assistance to members of the BMC community on their quality improvement projects. She completed quality improvement training through the Institute for Healthcare Improvement's Model for Improvement. Natalie earned her master of public health degree from Boston University School of Public Health in 2016.

IDEA Task Force Chair: Edeline Mitton, MEd, MPH

Edeline is the Director of Continuing Medical Education at SUNY Downstate Health Sciences University. Her professional background encompasses a diverse range of disciplines in both educational and clinical settings, including hospital management, adult education, and instructional design. One of her greatest passions is promoting patient engagement and advocating for Equity, Diversity, and Inclusion (EDI), being involved in SACME as the Chair of the EDIA Task Force and as a PCORI Ambassador promoting Patient Engagement. She is also a member of the AGING Initiative Patient/

Caregiver Advisory Council (APCAC), which aims to minimize health disparities in vulnerable communities, and an ardent supporter of yoga and mindfulness practices in healthcare.

Communications Chair:

Cynthia Juarez, BA, MA, MSc.

Cindy is the Senior Director for the Office of Continuing Medical Education (CME) at Texas Tech University Health Sciences Center El Paso (TTUHSC El Paso). Cindy has 20 years of experience in higher education administration and/or educational outreach at several institutions including the University of Texas at El Paso (UTEP), Michigan State University, and the University of California Santa Cruz. She has a Bachelor's of Arts from the University of Texas at El Paso (UTEP), a Master of Arts from Michigan State University, and a Master of Science from Queen Mary University of London.

While working at UTEP she made the transition into professional and continuing education (CE) and directly oversaw professional training and development within the university's continuing education unit and has developed and maintained a cadre of CE courses for people from various professional backgrounds including Engineering, Human Resources, Education, Accounting, Counseling, among others, helping professionals across the city to maintain their licensures and learn new skills within their respective fields.

Scholarship Chair: Martin Tremblay, PhD

Martin obtained a PhD in medicinal chemistry in 2004 at the Université de Montréal before pursuing a two-year fellowship at the Max-Planck-Institut für Kohlenforschung in Germany. After 6 years in the field of drug discovery at Boehringer Ingelheim, he transitioned to continuing professional development (CPD) by accepting a position as Director of Medical Communications at a medical communication agency in Montreal, Canada. In 2018, he joined the Federation of Medical Specialists of Quebec (FMSQ) as a Senior Research and Innovation Advisor. In his current role, Martin supports CPD initiatives through his role as the primary liaison point of contact for the 35 medical associations affiliated with the FMSQ, providing support for affiliated medical associations and other stakeholders for the development, implementation and evaluation of activities, leading research and development of CPD innovations, and overseeing the

accreditation processes of the FMSQ and its affiliates. Martin also plays an active role at the *Conseil québécois de développement professionnel continu des médecins*, at the Coalition for Physician Learning and Practice Improvement. His research interests include assessment and simulation as a means of CPD.

Assistant Treasurer: Jennifer Reino

Jennifer started her career at the University of British Columbia in Vancouver, BC, Canada. During this time, she was a Business Analyst with the Faculty of Medicine and had the opportunity to work with UME, GME and CPD. In 2013, Jennifer moved to California and knew that she wanted to stay in the academic environment. That year she joined the Office of Continuing Medical Education at the University of California, Irvine School of Medicine and became Director in 2021. Jennifer joined SACME in 2014 and is on the Communications Committee, Finance Committee and most recently became a member of the Board of Directors in 2023.

Western Regional Rep: Jessica Walter, EdD, MA

Jessica is an Assistant Professor and the Director of the Division of Management at Oregon Health & Science University. Jessica has more than twenty years of experience in student development, higher education management, and teaching. Originally trained as a behavior change researcher, she approaches leadership as a quest for continuous improvement, bringing together teams to create purpose-driven cultures of excellence. She joined the Division of Management in 2011 and teaches graduate courses, develops and offers professional and career development workshops, and directs the capstone program. She collaborates with local and international organizations to create customized executive education and offers organizational assessments and meeting facilitation. She also serves as a new manager mentor and conflict coach for the University.

SACME Membership Committee Report

By Natalie Sanfratello, Boston University Chobanian & Avedisian School of Medicine

I am not sure about the rest of you, but I am still running on the excitement from this year's annual meeting. It was a great opportunity to reconnect with folks in person that we had not seen for a few years, and the virtual option brought together even more colleagues who could not make the trek to Nashville. I am pleased to share that 27 people took advantage of our registration and membership bundle adding to our growth. Furthermore, we aimed to connect people ahead of time and throughout the meeting with their regional representatives, and we will continue to utilize our great reps as a trusted source of information about the happenings of SACME throughout the year.

Since the annual meeting in March, the membership committee has hit the ground running on our recruitment and retention efforts. I personally reached out to all of the annual meeting attendees who were eligible, but had not yet applied to membership in SACME, to chat with them about the benefits of a membership and why they should join our community. Striking while the iron is hot has shown to be fruitful in recruiting new members! As a committee, we have also embarked on our recruitment campaign for the Spring/Summer. I have identified eligible accredited organizations who have ACCME accreditation with commendation, Joint Accreditation, or Joint Accreditation with Commendation who do not yet have a member in SACME. Last year we reached out to medical schools who are accredited providers of CE and do not have a member on SACME, but this year, we have expanded to include other non-profit organizations working in our scholarship space. Each of our committee members has been tasked with reaching out to five of these organizations per month until we have exhausted the list in hopes we will spark some conversations with those organizations about who we are and what we offer.

Now back to our regional reps! All of our regional reps (except Canadian/International) host regularly recurring coffee chats offering an opportunity to talk through the day-to-day obstacles of working in this field with colleagues. I have often heard them referred to as a safe space and even a support group for us CE/CPD professionals. Since new members may be hesitant about joining the regional groups, we want to give them a taste of the top-

ics covered in the coffee chats with a quarterly series of national coffee chats. Our first inaugural national coffee chat took place on June 8th, titled RSS: Pains, Perils, and Pitfalls. We split it up into three sections: a panel discussion with colleagues representing diverse RSS programs, a presentation on RSS research, and an open Q&A section. Registrants were asked to submit their questions for the panel ahead of time to begin the discussion, but there were also opportunities for questions on the day of. I will let you in on a secret - I am writing this before it happens, so I am hoping it has gone as well as I think it will! We have found the coffee chats to be a venue where people speak about the practical day-to-day logistics of a CE/CPD office not always covered in other SACME programming. As such, we felt that the national coffee chat would be a great addition to the ongoing SACME programming throughout the year and will hopefully drive more engagement towards the regional coffee chats as well as other opportunities offered. The regional coffee chats themselves, posts to the listserv, and ideas from committee members will serve as the basis for topic selection, and if you have suggestions for future quarterly coffee chats or any feedback, please reach out to me!

As a membership committee, we are always looking for opportunities to better engage the existing membership as well as recruit new members. Some additional ideas we have thrown around this year are a referral program, since most of our new members hear about SACME from other colleagues, and more widespread communication about what SACME offers through the regional representatives. I encourage you all to reach out to me with any other ideas about how we can improve your experience as a member in SACME or recruit new members. We have open positions on the membership committee (and many other committees) if you would like to get more involved. I have found that volunteering on a committee has only enhanced my SACME experience and connected me to more colleagues. I am always happy to connect you with your regional rep who can speak about the volunteer opportunities in SACME and which one may be the best fit for you. Hope to hear from you soon!

Updates from the AAMC

By Lisa Howley, MEd, PhD, Senior Transforming Medical Education,
lhowley@aamc.org, [@LisaDHowley](https://twitter.com/LisaDHowley)



I am pleased to share updates and announcements with the SACME community. The AAMC (Association of American Medical Colleges) is a nonprofit association dedicated to improving the health of people everywhere through medical education, health care, medical research, and community collaborations. Its members are all 157 U.S. medical schools accredited by the [Liaison Committee on Medical Education](#); 13 accredited Canadian medical schools; approximately 400 teaching hospitals and health systems. Following a 2022 merger, the Alliance of Academic Health Centers and the Alliance of Academic Health Centers International broadened the AAMC's U.S. membership and expanded its reach to international academic health centers.

Below are several updates that are relevant to our colleagues in continuing medical education and continuing professional development. Feel free to reach out with questions or suggestions to cme@aamc.org or lhowley@aamc.org

Select AAMC Announcements and Initiatives

Academic Medicine/MedEdPORTAL Scholarly Publishing Webinar Series

This free monthly webinar series, co-sponsored by Academic Medicine and MedEdPORTAL, will cover the importance of publishing your education scholarship and practical suggestions for how to do so successfully, including how to improve your writing and navigate the peer-review and publication processes. Sessions will include interactive exercises to practice what you have learned and time for Q&A with the featured panelists. Learn more and register [here](#).

Teaching for Quality (Te4Q) 2.0, the AAMC faculty development program has been re-designed and launched as an annual virtual longitudinal offering. *Teaching for Quality* was originally designed in 2012 by a team of QIPS education experts and is available to anyone who wants to improve skills at educational design, competency-based education, and evaluation of effective learning interventions that improve quality and safety. The new design includes eight (8), 90-minute virtual sessions, a private learning platform, and coaching for individual local educational activities or curricula. A final capstone session is also included where course participants and faculty review and celebrate progress. The 2023 offering

is underway but registration will open in the fall for the 2024 offering. More information can be [found here](#).

Save the date for Learn Serve Lead 2023: The AAMC Annual Meeting

Learn Serve Lead 2023: The AAMC Annual Meeting will take place Nov. 3-7 in Seattle, bringing together colleagues, educators, students, resident physicians, researchers, clinicians, administrators, and health system leaders to discuss the most pressing issues facing health care, biomedical research, and medical education. [Registration](#) is now open.

AAMC Collection of Resources: Race-Conscious Admissions in Medical Education

The AAMC is actively working to support its members ahead of two cases under consideration by the U.S. Supreme Court — Students for Fair Admissions v. Harvard and Students for Fair Admissions v. University of North Carolina— which seek to prohibit the limited consideration of an applicant's racial or ethnic background in the higher education admissions process. The AAMC has developed an online collection of information and resources for constituents, which we will continue to update ahead of the Court's decision: www.aamc.org/scotusadmissions.

Inclusion, Diversity, Equity, and Anti-racism (IDEAS) Learning Series

The IDEAS Learning Series channels experts and resources from within the AAMC and across academic medicine into webinars designed to help busy professionals cut through the noise and find ways to take action on relevant initiatives. Improving inclusion, diversity, equity, and anti-racism is a critical priority for the academic medicine community. Many institutions are engaging in multiple diversity, equity, and inclusion (DEI) initiatives. Academic health professionals may be experiencing information overload or feeling unsure about where to get the comprehensive, reliable information they need to take action. This series is designed to help. Learn more and register [here](#). Learn about additional [AAMC resources, initiatives and publications](#) supporting increased equity, diversity and inclusion.

Fellows Academy Report

By Betsy Williams, Professional Renewal Center, Kansas

Members of the SACME Academy of Fellows were actively involved in the recent 2023 SACME Annual Meeting. Several Fellows were on the Program Committee and/or agreed to review abstracts for the meeting. Three Fellows presented posters (Mary Turco, Bill Rayburn, and David Price). David delivered the Barbara Barnes lecture, titled *If You Do What You've Always Done, You'll Always Get What You've Always Got: Toward More Purposeful, Intentional and Collaborative Alignment of CPD in Health Care Enterprises*, and as part of his lecture serenaded us with an updated CPD version of Johnny Cash's Ring of Fire. Congratulations to Mary Turco whose poster, "The Dartmouth Scholarship Enhancement in Academic Medicine (SEAM Awards: Igniting Health Professionals' Engagement and Professional Development through Investment in Academic 'Dreams'") won the award for best poster presentation.

During the Annual Meeting we held our quarterly Academy of Fellows meeting. It was suggested that at future annual meetings, the membership, particularly new members, be invited to join Academy Fellows for lunch. Other suggestions included encouraging Fellows to participate in the various SACME committees in an advisory role.

Academy Fellow Gabrielle Kane was awarded the Distinguished Service in Continuing Medical Education Award. Gabe has demonstrated a long history of service to, and leadership in, the field of continuing professional development and SACME. She chaired SACME's Research Committee (now Scholarship Committee) for two years and served as Vice President, President-Elect, President, and Immediate Past-President of SACME from 2009 to 2013. She has consistently participated in our annual meetings as a reviewer and presenter. She has also been involved with *the Journal of Continuing Education in the Health Professions* as an author, reviewer, and member of the Advisory Panel. She chaired the SACME Endowment Council, the Fox Award Selection Committee, the JCEHP Award for Excellence in Research Selection Committee, and the Nominating and Awards Committee. She was a member of SACME's Strategic Affairs Work Group. In addition, from 2008 to 2013, she represented SACME in the **Mayo National CME**

Consensus Group. Along with the leader of the Strategy Stream, this group of CME experts examined the integrity and effectiveness of CME/CPD and developed a national research agenda. Most recently, Dr. Kane served as one of the authors of the CE Educator's Toolkit. She has been a leader of many other initiatives involving scholarship including the Pfizer Grant, publications, and co-chair of CME Congress. Congratulations to Gabrielle.

Recognition was paid to the two newest inductees into the Academy of Fellows, Kevin Eva, PhD, Hon. FAcadMED and Julie L. White, MS, CHCP. Both have had long and distinguished careers in medical education. Dr. Eva is Associate Director and Scientist in the Centre for Health Education Scholarship and Professor and Director of Educational Research and Scholarship in the Department of Medicine at the University of British Columbia. He earned his PhD in Cognitive Psychology at McMaster University in 2001 and became Editor-in-Chief of the journal *Medical Education* in 2008. He holds a number of international appointments, has consulted broadly around the globe, and co-founded the Maastricht-Canada Master of Health Professions Education program. He works extensively with the Medical Council of Canada and College of Physicians and Surgeons of British Columbia. Julie has been the Director of the Barry M. Manuel Center for Continuing Education (CCE) since 1995 where she directs the day-to-day operations of the office including overseeing all accreditation, financial, and personnel areas of operations. She has given numerous presentations on performance improvement, reaccreditation, small group learning, and the interface of quality improvement and continuing medical education. Under her direction, the CME team is nationally known for its Safer/Competent Opioid Prescribing Education (SCOPE of Pain) program. She serves on the Board of the Society for Academic Continuing Medical Education (SACME) as the Northeast Regional Representative. She received the 2019 Distinguished Service Award from SACME.



During the 2022-2023 academic year the Academy's Mentorship Program facilitated seven mentor-mentee pairs. Many thanks to Christine Flores, Jack Kues, David Price, and Mary Turco for the work they have done this past year in continuing to improve this initiative. Several mentor-mentee pairs responded to a request for an update. Mentee groups indicated that they met approximately monthly. There was consensus that time constraints sometimes created challenges, but the groups kept in regular contact. The topics discussed at meetings covered a broad range but typically included becoming more familiar with the field, special projects, challenging situations mentees experienced in their institutions, and opportunities for wider participation in SACME and other national organizations. Reported benefits included spending time with someone experienced in the field, the ability to bounce ideas off of another

person with expertise in CPD, brainstorming research ideas and other projects, and connections and networking. Congratulations to Helen Maudsley who had a paper accepted at this year's SACME annual meeting. The work was presented by her mentors. Sadly, Helen could not attend the meeting due to a change in her job status and personal reasons.

A facilitated discussion was held about the Mentorship Program. Attendees provided several suggestions of ways to grow and improve the program. Mentorship Committee members will discuss the feedback and work on ways to incorporate the suggestions into future programming opportunities. Please send any thoughts or suggestions about the Mentorship Program to me bwiliams@prckansas.org.

The CE Educator's Toolkit at Learn to Thrive 2023 & More Updates from ACCME

Last month, ACCME welcomed more than 600 members of the continuing education (CE) community to Chicago for Learn to Thrive 2023, ACCME's annual meeting. Together, attendees and faculty learned collaboratively, challenged one another, and strategized in new ways.

ACCME and SACME led a collaborative mini-plenary to guide education providers in developing practical strategies to utilize the CE Educator's Toolkit in their programs. The CE Educator's Toolkit is a resource designed to equip educators with best practices and guidelines to deliver effective CE. The toolkit was developed by SACME through an [ACCME research grant](#) in fulfillment of ACCME's strategic goal to advocate for research and scholarship in continuing education. ACCME is currently developing a companion education course, which will be available on ACCME Academy, to help continuing professional development teams collaborate around using the Toolkit to improve their education's effectiveness and create better learning outcomes.

MATE Act FAQs and Resources

The Drug Enforcement Administration (DEA) and the Substance Abuse and Mental Health Services Admin-

istration (SAMHSA) released [materials](#) in March 2023 related to the new [Medication Access and Training Expansion \(MATE\) Act](#). The Act requires new or renewing DEA licensees, as of June 27, 2023, to have completed a total of at least eight hours of training on opioid or other substance use disorders and the appropriate treatment of pain.

ACCME developed a variety of [frequently asked questions](#) to address potential inquiries related to the MATE Act and accredited CE.

Join the Upcoming ACCME 2023 Accreditation Workshop

New to accredited CE? The ACCME 2023 Accreditation Workshop is for you! Join ACCME in Chicago on August 3-4 for an in-person workshop to learn more about the ACCME's requirements and expectations for accreditation. Attendees will explore strategies for planning effective CE to support your learners, your organization, and the community you serve. Register [here](#).

Top Ten Things I Learned at the 2023 SACME Spring Meeting

By Ginny Jacobs, PhD, CHCP, FSACME



The theme for SACME’s 2023 annual meeting was “*Inspiring and Igniting the CPD Imagination*”. In addition to fond memories generated by reconnecting with colleagues, here are the key takeaways I packed in my bag when I left Music City (aka Nashville, Tennessee) at the end of SACME’s meeting:

10) **The field of healthcare is complex. Why should we expect simple solutions when it comes to healthcare education?** Changing practice and improving outcomes is hard and calls for “purposeful, intentional and collaborative alignment of CPD in Healthcare enterprises”, as highlighted by David Price in his keynote presentation. To expect anything different (or to strive for robust outcomes) requires we creatively retool and strategically reposition our work in accordance with the big picture of the healthcare system. Throughout the 3-1/2 day SACME program, I was consistently reminded that effective CPD requires **strategic alignment, innovation, collaboration, and persistence**. And, as was said more than once, the key to learning is repetition.

9) **We need to demonstrate the power of CPD to address identified institutional care gaps AND promote the value of CPD by using language that speaks to the broader organization’s needs.** We are reminded to look through the lens of our CEO/CMO/CQO/Medical Director when considering how education can address institutional needs. First, it is imperative that we actively listen to the leaders’ concerns so that we can seek to more clearly understand the overarching organizational priorities. That perspective and those conversations are critical to our ability to effectively use their language (i.e., incorporate their taxonomy into our vernacular) as we strive to better align our resources and address the system’s educational priorities. To accomplish this, the CME/CPD unit must be integrated into the leadership structure, as we cannot afford to be viewed as an isolated (or tangential) function.

I recognized an echo from the past when Todd Dorman shared an updated version of a critical message related to the indispensable value of CPD. The concept of repetition applies to our need to routinely promote CPD’s value

proposition by emphasizing how we help leaders within our organizations learn how to describe and feature CPD as a “force for improvement”.

8) **Patients need to be seen AND heard.** There are many ways to incorporate patients’ stories through their involvement and voice in educational planning. Increasingly, CPD teams are taking steps to ensure that patients’ concerns are incorporated in the discussion of educational needs. However, it is important that this element be viewed in a manner that does not resemble a “one and done” approach to educational planning. It should be deliberate and ongoing and not episodic in nature. Hats off to the groups that were featured in the panel discussion on the final day of the SACME meeting. And thanks to those patients who had the courage to share their stories and who have made time to actively engage in making the educational planning process more meaningful and relevant.

7) **Right turn on red is allowed (in most settings)** – There were many sessions that spoke to on-going efforts to apply our educational/assessment expertise to the intersection of Quality Improvement (QI) and CPD. My take-away: Rather than wait for a green light to appear indicating all traffic will stop and politely accommodate CPD’s turn into the QI lane, I interpret these discussions to suggest it is wise to look both ways and proceed (with caution, of course). QI and Performance Improvement (PI) efforts can be beautifully combined with education and several sessions pointed out the benefits of combining educational initiatives with other requirements associated with healthcare professional’s continued certification.

6) **There is a science to learning and that should inform (and inspire) our educational design strategies** - Drawing from their JCEHP learning strategy series, Tom Van Hoof and Simon Kitto discussed how the science of learning impacts how we think about (and practice) CPD. There are learning science strategies with real application to educational meeting design pertaining to distributed practice, retrieval practice, and interleaving. And, let’s not forget that the key to learning is repetition.

5) Hybrid meeting format – Think of two meetings in one? - With proper planning and dedicated resources, you can effectively run a hybrid, multi-channel meeting designed to engage all participants (attendees joining live and remote). Congratulations to Tym Peters and all members of the SACME planning and IT support groups who were able to achieve this lofty goal. No one said this would be easy or, for that matter, inexpensive, as catering to both formats requires extra attention to ensure delivery of a streamlined program for each group (i.e., one whereby neither group will be distracted by the presence of the other). When planning, there is no denying the need for additional staffing resources that will be required (e.g., dedicated staff to - monitor online questions, generate prompts, circulate roving microphones, etc.) to help the meeting, to include the audio-visual components, run smoothly.

4) If you build it, they will come...provided you make sure they know it exists – I suspect we have all been involved in projects that require a significant investment of time and energy (e.g., development of course materials, tools and/or resources). The success of those efforts is measured, only partially, by their reach. More importantly, their true success will rest in the impact of their adoption. I commend the team who developed the CE Educator’s toolkit, which is a collection of resources and tools for CPD planners. Attempts were made during the meeting to find ways to help individuals get acquainted with these materials and to develop strategies for incorporating them into practice. The true measure of the initiative’s success will be measured by the extent to which those tools help raise the CPD programming skill level for our planners. It is incumbent upon all of us to ensure those tools are creatively incorporated into practice by our CPD planning teams (to include faculty). This may be an appropriate time to give a nod to Gary Smith, whose session highlighted the manner in which his organization has utilized resources (and not always courses) to effectively support learning.

3) Line Dancing is a Team Sport - I know we traditionally build breaks into our meeting schedules and label those unstructured blocks of time as networking opportunities. At initial glance, I will admit I had the impression the SACME meeting breaks were too long. However, it was impressive (and fun) to see how the break times were utilized to strengthen the sense of community among the meeting participants. Optional activities were arranged and offered to include: board games, a line dancing lesson, and pre-arranged dinner reservations. This was one

element of the program where those connected via Zoom, undoubtedly, felt left out. For those who attended the live meeting, it was beneficial not to leave the possibility of connections with colleagues during those blocks of time to mere chance.

2) The time for change is now (and no, not back to our old ways). David Price noted that “if you do what you have always done, you will get what you have always got” which points to our collective need to think differently about how we position and practice CPD. This theme resonated throughout the meeting, as many sessions featured new design, development and delivery strategies.

With respect to the underlying call to action inherent in the meeting’s title, did you notice in Item #10, I did not include ‘patience’ on the list of what is required for successful CPD? That was intentional, since I don’t believe we can afford to be patient in our drive for sustainable positive change. Instead, we need to step on the gas to dramatically enhance the quality of CPD offerings and accelerate our ability to explicitly link those initiatives with change in practice and improved health outcomes.

1) We are not alone - While not a new thought, I found it comforting to again be reminded of the power that rests in making connections with my SACME colleagues. We all face various challenges in our work, and yet we have a common sense of purpose coupled with a generous spirit and willingness to share our lessons learned. This meeting highlighted that, when done well, CPD planning can result in engaging educational initiatives that build clinical decision-making skills, enhance outcomes, and improve the quality of care that patients receive. Let’s continue to find ways to collectively build, inspire, and ignite the CME-CPD imagination, shall we?

Notice from the Department of Redundancy Department: Did I already mention the key to learning is repetition? In the spirit of that theme, it is our hope that you will take the opportunity to review the summary of the SACME Annual meeting proceedings which will be sent out shortly to SACME members. It is intended to be a valuable prompt and a helpful reminder of the incredible sessions that were part of the SACME annual meeting. Thank you to all those who shared your experience and engaged in the discussions.

Communications Committee Report

By Cindy Juarez, Paul L. Foster School of Medicine,
Texas Tech University Health Sciences Center El Paso

Another annual meeting has come and gone, and we received a substantial amount of feedback on this year's multi-channel approach. Survey results are detailed elsewhere in this issue, but the overarching takeaway from our perspective is the level of member engagement in the event evaluation process, with almost half of the attendees providing feedback for us to work on over the next few months. With approximately one quarter of respondents being virtual attendees, we collected some valuable data on what the experience was like from that side of the hybrid environment. In a curious coincidence, its 20 years since an Intercom article by Dave Davis analyzed the impact of an alarming healthcare development (severe acute respiratory syndrome, or SARS) on conducting live events in Toronto and set him to musing about potential future directions of CME events, including "the use of teleconferencing technologies to "bring in" speakers unable to travel to Toronto", and the possibility that continuing education events might "move... from a conference-based, passive and reactive non-system, to a multi-modal, active and systematic medium by which to ensure appropriate and timely clinical practice". So it seems like we have all been slow to figure this out, but certainly now is the time. By the way, if you're looking for something tangentially related to work on your lunch break you can find more interesting articles from the BC (before Covid) era [here](#).

Have you been on the SACME website lately? Led by Jennifer Reino and Joyce Fried, we have been updating the website to make sure information is current and easier for our members to find. This reorganization includes the aforementioned publications section and a revamped resources page that highlights the CE Educator's toolkit and updated information on the academy of fellows, governance information, and committee details, among other changes. If you are interested in participating in one of those committees, you'll find more information [here](#). Jump on, take a look around, and [give us some feedback](#). What do you like? Not like so much? What's easier/harder to find? What else should be included?

Don't forget SACME on social media. We're posting on Twitter and Linked-in. We have 401 group members and 87 followers, so there's plenty of room for more - [sign up here](#). Have you got something to post? Any kudos for a SACME member or one of your CME crew? Article publications in CPD, member highlights, updates, awards – we're ready to share. You can [make a request here](#). You'll be asked for your name, email, phone, what the request is related to, and what platform [LinkedIn or twitter] you would like to post it to. Single posts or campaigns can be submitted, just type up your post exactly as you would like to issue it, upload an image if relevant, and tell us when you want it to be publicly viewable.

On the listserv, a post from Kurt Snyder of the Stanford Center for Continuing Medical Education on assessing and communicating the value of continuing education drew a lot of interest from members. A number of individuals pitched in their thoughts on what might be included, and how it might be organized into specific domains for different audiences. It's a very interesting thread and there will be more to come, as this topic seems to be occupying considerable mind space as we all face a tight budget environment. If you don't currently have access to this resource, [sign up here](#).

And finally, many thanks to Robert D'Antuono for developing a very comprehensive 2023 Annual Meeting Proceedings Report. You may have seen that in your inbox on Tuesday, June 6th. If you haven't already got it, you can access that [here](#).

Updates from the ABMS

By Greg Ogrinc, MD, MS

Senior Vice President, Certification Standards and Programs



As the leading organization for physician board certification, the American Board of Medical Specialties (ABMS) provides the expertise, insights, and support to elevate the discipline of specialty medicine. Given that much of our work intersects with continuing medical education and continuing professional development, we are providing the following relevant updates.

ABMS Recognizes New HALM Subspecialty

ABMS approved Health Care Administration, Leadership, and Management (HALM) as a subspecialty at its February 2023 Board of Directors meeting. The American Board of Anesthesiology, American Board of Emergency Medicine (ABEM), American Board of Family Medicine, and American Board of Preventive Medicine co-sponsored the application for the subspecialty certificate, allowing physicians certified by 13 of the 24 ABMS Member Boards to apply for the new certificate. The HALM subspecialty encompasses and integrates experience from clinical medicine and health systems science, including quality improvement, patient safety, health care economics, public health, communication, informatics, and other related disciplines into a singular subspecialty certificate. Board certified physicians will be required to complete HALM training in an Accreditation Council for Graduate Medical Education-accredited fellowship program as well as successfully pass a certification examination. ABEM, the administrative board for HALM, is scheduled to administer the first HALM exam in 2024. [Read more](#). Information regarding eligibility requirements may be found on the [ABEM website](#).

ABMS Releases 2021-2022 Board Certification Report

More than 975,000 physicians in the United States are board certified, according to the latest [ABMS Board Certification Report](#). This record number represents an increase of more than 35,000 physicians over the previous year. The 2021-2022 edition offers a variety of information about the 40 specialty and 89 subspecialty certification programs administered by the 24 Member Boards that comprise ABMS. This 62-page report also includes a snapshot of the active certificates held by ABMS Member

Board certified physicians, also known as *diplomates*.

Colorful charts and infographics break down important data, such as the distribution of board certified diplomates by ABMS Member Board, state, age, and gender.

Dr. Pusic Named New ABMS REF Director

ABMS recently appointed Martin V. Pusic, MD, PhD, to serve as the new Director of its Research and Education Foundation (REF). In this role, he will provide content leadership and guidance for ABMS programs, initiatives, and research aimed at advancing certification as well as offer direct consultation for similar efforts conducted by the Member Boards. Dr. Pusic is an Associate Professor of Pediatrics and Emergency Medicine at Harvard Medical School, serving as Senior Associate Faculty for Boston Children's Hospital and Scholar-in-Residence, Brigham Education Institute, Brigham & Women's Hospital in Boston. He is Faculty Co-Director of the Harvard Medical School Master of Medical Sciences (Medical Education) program. Dr. Pusic previously was an Associate Clinical Professor of Emergency Medicine and Pediatrics at New York University following a series of faculty positions at Columbia University, University of British Columbia, McGill University, and Johns Hopkins Children's Center in Baltimore. In addition to his academic roles, he also held a wide range of clinical appointments in Emergency Medicine at each of these institutions and is board certified in Pediatric Emergency Medicine by the American Board of Pediatrics for whom he serves as a Board Examiner. Throughout his career, Dr. Pusic has been active in a variety of national professional societies and the recipient of grants to support his vast research projects. Founded in 1971, the REF identifies and establishes partnerships with academic health centers, universities, hospitals and health systems, and other health care organizations to develop and promote research programs. [Read more](#).

ABMS Conference 2023 Registration to Open in June

Registration for the [ABMS Conference 2023](#) will open in June. The premier conference on the certification of health care professionals focusing on assessment, improvement, and professionalism will be held Sept. 19-21 at the Loews O'Hare Hotel in Rosemont, Ill.

Speakers for the opening plenary will explore *Providing Health Care in Challenging Times*. Many of today's physicians and specialists are finding it difficult to provide high quality care due to various ethical challenges in the current political and organizational environment. From the pressures of private equity to the legislative and legal interference in the practice of medicine, they are forced to navigate new constraints amidst legal, ethical, and personal moral decisions. The featured panelists, along with moderator Richard E. Hawkins, MD, ABMS President and Chief Executive Officer, will look at this issue from two perspectives: what they as individuals are experiencing and how they are addressing this in their own interactions as well as from an organizational level. The plenary speakers are:

- Matthew Wynia, MD, MPH, FACP, Director of the Center for Bioethics and Humanities at the University of Colorado, Anschutz Medical Campus
- Jesse M. Ehrenfeld, MD, MPH, President-Elect of the American Medical Association

Recent issue of *ABMS Insights* Highlights Formative Assessment

The spring 2023 issue of [ABMS Insights](#) highlights the formative assessments that ABMS Member Boards have incorporated in their continuing certification programs within five years of the Continuing Board Certification: Vision for the Future Commission sharing its [recommendations](#). [Learn how the boards are using them to support physician learning and make summative decisions about a physician or medical specialist's certification status](#). [Discover how the boards have implemented their formative assessments in a phased-in approach that covers their specialties and subspecialties](#). [Read how formative assessment fast tracks medical knowledge, benefiting physicians, and most importantly, their patients](#). [Explore the studies and surveys that show how the boards' formative assessments support physician learning in myriad ways](#).





Phil R. Manning Research Award Presentation

This grant is made in the name of Phil R. Manning, MD, a Paul Ingalls Hoagland Hastings Professor of Continuing Medical Education and Professor of Medicine Emeritus at the Keck School of Medicine, University of Southern California. Dr. Manning was the founding president of the Society for Academic Continuing Medical Education.

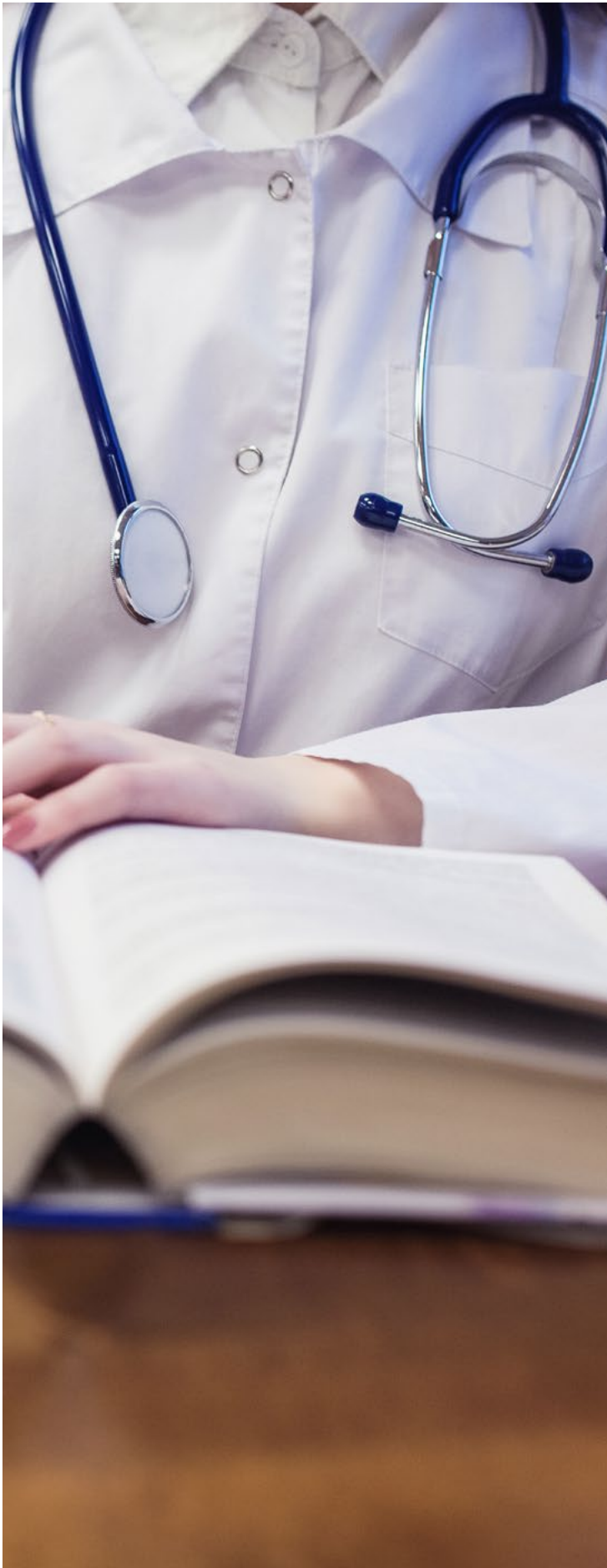
This year's grant is awarded to Joanne Goldman, Brian Wong, and their team at the University of Toronto for their proposal: *Strengthening the position of continuing education as a foundational element of quality improvement*. This topic area is one of acute interest to CPD professionals looking to engage with the quality improvement units in their organizations, and we're excited to see how this project evolves.

The announcement followed an excellent presentation by last year's awardees, Francesca Luconi and Beatriz Lauzon of McGill University, on building resilience and well-being in primary care during and after the Covid-19 pandemic. Their study examined PCP's knowledge of interventions for building resilience on both an individual and team level, and identified barriers and enablers to implementing interventions at the practice level. Their review of 86 studies concluded that PCPs are essential to the introduction and dissemination of resilience/

well-being interventions but need a lot of support in terms of policy development, educational structures, and evaluation of interventions.

Following the announcement, former Manning awardees Fahad Alam (2015-2016), and David Wiljer (2017-2018) provided summary descriptions of advances in the work that they had undertaken, while Sophie Soklaridis gave a powerful discourse on how even a partial award could impact a research trajectory. Both Sophie and David described the value of the award in helping advance research and seed opportunities to pursue additional funding in the areas of leadership diversity and the use of clinical data for practice improvement, respectively.

The Manning grant has a two-stage application process whereby applicants submit a letter of intent which is blindly reviewed by the committee members who then select which LOIs to advance. Full proposals are then reviewed by the committee which then makes its recommendations to the SACME board. The next cycle is expected to begin in Fall 2024, so look out for that announcement if you have an idea for a proposal.



INTERCOM

INTERCOM is published three times a year by the Society for Academic Continuing Medical Education, Executive Director Office, 35 East Wacker, Suite 850, Chicago, Illinois 60601-2106; Telephone (312) 224-2522; Fax (312) 644-8557 Email info@sacme.org.

The views expressed in the INTERCOM are those of the authors and are not intended to represent the views of SACME or its members.

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