

## Helpful steps to plan your CME Activity

### Step 1: Defining and Identifying Professional Practice Gaps (PPG)

Educational activities should be designed to identify professional practice gaps that underlie the need for the activity and its intended target audience.

The professional practice gap is best defined as the difference between the **current state** of knowledge, skills, competence, practice, performance or patient outcomes and the **ideal or desirable** state. Several examples are provided below.

The PPG must explicitly contain the following components in order to adhere to ACCME/ACPE standards:

1. A statement of the problem the activity is addressing.
2. Cite the source (from Sharp's data or from evidence-based literature) that proves the gap exists.
3. How the course will fill the gap.

#### Example 1:

Current State		Desired State
44 neonatal deaths have occurred at Sharp Mary Birch Hospital for Women and Newborns from Jan. 2011 to Nov. 2011 according to Sharp HealthCare's Clinical Effectiveness Division. Many American health care providers find it difficult to revise treatment goals to palliative care goals, sometimes due to lack of formal palliative care education (Catlin & Carter, Journal of Perinatology, 2002).	Educational Gap  →	Formal palliative care education is necessary because it can help create a more peaceful and family-oriented outcome for dying newborns.

**Example 2:**

Current State		Desired State
<p>Transfusion-related acute gut injury (TRAGI) is when necrotizing enterocolitis (NEC) occurs after the transfusion of red blood cells. Pediatrics published a study of infants who had a birth weight &lt;1500g, received packed red blood cell transfusions and developed NEC. Scientists found that “infants who received a transfusion had increased adjusted odds of developing NEC compared with infants who did not receive a transfusion.” (Paul, D.A., Mackley, A., Novitsky, A., et al, 2011).</p>	<p>Educational Gap</p> <p>→</p>	<p>Discussion about TRAGI is occurring at Sharp Mary Birch Hospital NICU. Sharp physicians need to explore the cause of TRAGI and develop a way to prevent it.</p>

**Acceptable Sources of information/Data on Professional Practice Gaps:**

- Notes and/or communications from planning/steering committee or faculty
- Literature review/search
- Peer-reviewed scientific/clinical publications
- Survey data
- Epidemiologic data
- Clinical practice guidelines/treatment algorithms
- Evaluation data/participant suggestions from CME activities
- Exam performance analysis (e.g. ESAP or ABIM Board Review performance analysis)
- Quality improvement guidelines
- Public health data (national, regional, state)
- Government mandates/legislation
- Clinical surveys or chart audits
- Expert input (must identify expert[s] and other support gaps identified with information from another source)

## **Identifying and Addressing Barriers to Ideal Practice**

Below are examples of factors that may impede changes in physician practice and/or impact patient care. Whenever possible, topic-specific barriers to ideal practice should be identified in developing CME content. Identified barriers should be included as part of the content, along with information and practical strategies for overcoming the barriers.

### **Physician Factors**

Various patient factors may present barriers to change. Physicians and other healthcare professionals may be able to help patients overcome these barriers. Education that includes practical strategies for addressing such barriers can be helpful to physicians.

#### **Examples of patient-level barriers include:**

- Poor health literacy
- Socioeconomic status
- Limited or no health insurance coverage
- Resistance to change
- Inaccurate perceptions/beliefs or fears about treatments (eg, fear of vaccines or fear of self-injection)
- Cultural differences
- Noncompliance with treatment

### **Institutional Factors**

Often barriers to change are systemic and as such, may be more difficult to address with education alone.

- Time constraints
- Reimbursement challenges
- Lack of resources
- Hospital restrictions (treatment not on formulary)