# 2012 Committee Report

**COMMITTEE NAME:** Continuing Medical Education Committee

**ROSTER:** (As of 5/9/12)

<table>
<thead>
<tr>
<th>Name</th>
<th>Start Date</th>
<th>End Date</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHN, MARY</td>
<td>11/1/2010</td>
<td>10/27/2013</td>
<td>Member</td>
</tr>
<tr>
<td>BOSTIC, JEFF</td>
<td>12/14/2006</td>
<td>10/27/2013</td>
<td>Co-Chair</td>
</tr>
<tr>
<td>DANIELYAN, ARMAN</td>
<td>11/1/2009</td>
<td>10/27/2013</td>
<td>Trainee/Resident</td>
</tr>
<tr>
<td>DEAS, DEBORAH</td>
<td>10/23/2011</td>
<td>10/26/2014</td>
<td>Cluster Facilitator</td>
</tr>
<tr>
<td>FREY, KORY</td>
<td>10/22/2005</td>
<td>10/28/2012</td>
<td>Early Career Psychiatrist</td>
</tr>
<tr>
<td>GORRINDO, TRISTAN</td>
<td>11/1/2010</td>
<td>10/27/2013</td>
<td>Co-Chair</td>
</tr>
<tr>
<td>GUPPENBERGER, MICHAEL</td>
<td>11/1/2010</td>
<td>10/28/2012</td>
<td>Trainee/Resident</td>
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<tr>
<td>HARPER, R.</td>
<td>11/1/2010</td>
<td>10/27/2013</td>
<td>Member</td>
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<tr>
<td>HUGHES, ELIZABETH</td>
<td></td>
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<td>Staff Liaison</td>
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<tr>
<td>KAYE, DAVID</td>
<td>11/1/2009</td>
<td>11/15/2012</td>
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<tr>
<td>KRUESI, MARKUS</td>
<td>10/28/2007</td>
<td>10/27/2013</td>
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<tr>
<td>LAKE, MARYBETH</td>
<td>11/1/2009</td>
<td>11/15/2012</td>
<td>Member</td>
</tr>
<tr>
<td>STOCK, SAUNDRA</td>
<td>11/1/2008</td>
<td>10/27/2013</td>
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**CHARGE:**

1. To be informed and knowledgeable about the standards, requirements as outlined by the Accreditation Council on Continuing Medical Education (ACCME), and conditions and issues associated with the continuing medical education of child and adolescent psychiatrists on national, regional, and local levels. To be actively involved in the ACCME reaccreditation process.

2. To respond to the above information and develop appropriate plans and recommendations to address these issues.

3. To collaborate with the Program Committee in the review of AACAP sponsored
continuing medical education meetings and to ensure that all educational programs meet the appropriate needs and standards.

4. To be responsible for writing self-assessment activity questions for journal CME, select Annual Meeting Institutes, as well as reviewing meeting evaluations to determine additional practice gaps and needs assessments; to address the potential conflicts of interests and resolve issues that arise, among other specific CME compliance issues that arise.

5. To collaborate with the CME Collaboration Network (made up of representatives from the CME Committee, *JAACAP*, Lifelong Learning Committee, Program Committee, and Quality Issues Committee; chaired by the President-Elect), and the Lifelong Learning Committee in the production of the Lifelong Learning Modules, online CME, and other forms of enduring materials.

6. To review for approval other educationally relevant AACAP proposals requesting CME credit, as designated by the Executive Committee or Council.

7. To serve as the representative of the AACAP Council in working on continuing medical education matters with national, regional, and local bodies concerned with continuing medical education and certification.

September 2011

Status of projects and deliverables:

**Live (meeting) CME**

1. Live events providing CME to members were reviewed, including the Annual Meeting, the Psychopharmacology Update Institute, the Annual Review Course, and the Lifelong Learning Institute. Quality has remained very high.

   1. Annual Meeting evaluations were reviewed, and instances of potential conflict of interest and/or bias were addressed with individual presenters. 79 presenters were contacted to resolve any allegations of bias by attendees, although these were almost invariably comments about presenters failing to disclose conflicts when the presenter had none to disclose. The CME Committee continues to educate presenters about the specific requirements for disclosures. At the 2011 Annual Meeting one presenter who had been identified more than once with potential bias and conflict of interest was observed by members of the CME Committee, and found to adhere to appropriate disclosure polices and presented an objective presentation of data. This observation was consistent with other information such as listening to audiotapes when available, and personal contacts with the presenters, providing additional layers of support for our presenters to ensure they are adhering to guidelines and that their presentations indeed do not show bias.

   2. Three Institutes from the 58th Annual Meeting (2011) were selected for a pre/post/follow up test as part of a CME initiative on capturing knowledge and practice improvement. The results of the follow up survey, conducted in March 2012, were reviewed. CME committee members wrote the learning objectives and pre-, post-, and follow-up questions (as is now done with JAACAP). Institutes included in this initiative are:
      - Institute 1: Advances in Treatment: Implications for Clinical Practice
      - Institute 4: Lifelong Learning Institute
      - Institute 8: Practical Pediatric psychopharmacology for Primary Care Clinicians

   3. Three Institutes from the AACAP Annual Meeting (2012) will be selected to participate in the CME
initiative of pre/post/follow up tests. As above, the CME Committee will write the learning objectives and test questions rather than the presenters, to ensure quality, properly-written questions.

4. The Lifelong Learning Module 8 was approved for CME credit, and published in October 2011. Lifelong Learning Module 6 will be expiring on October 1, 2012.

5. Small modifications have been made to the annual meeting evaluation form which will allow for a more clear assessment of changes in practice and intent to change. These changes were made in conjunction with the Subcommittee on Evaluations and the Program Committee. These changes will be implemented at the October 2012 meeting.

**Journal CME**

6. We have continued to meet with Mary Billingsley, JAACAP Editorial Manager, regarding the implementation of CME credit. Our process now includes CME Committee members in reviewing and selecting proposed articles for CME in that issue, editing of author provided learning objectives, and writing of CME questions.

7. Articles are selected for journal CME using expressed needs assessments completed by previous Journal CME evaluations.

8. Five JAACAP CME activities have expired this year. Total certificates issued in 2011 were 1,524, and to date for 2012, 172 certificates issued.

**Online CME**

9. A new online CME activity on ADHD, titled “Challenges and Opportunities in ADHD: A Conversation with the Experts” was launched September 1, 2011. This roundtable discussion, chaired by Laurence Greenhill, M.D., provides 2 hours of CME credit. It expires in one year. Educational grants from Eli Lilly and Company and Shire Pharmaceuticals were obtained to produce the program, and this is indicated on AACAP’s CME website page describing the activity. Expected audience reach is 3,000 CAPS and allied health professionals. Currently, it has 1,490 unique viewers and 497 certificates issued.

**ACCME Reaccreditation**

10. We are in the midst of the ACCME reaccreditation process, whereby we report on the last 6 years of CME activities, providing documentation of the 22 accreditation criteria. The reaccreditation process runs through November 2012. The ACCME self-study was submitted in April 2012, the interview with ACCME is in July 2012, and the final decision is anticipated in November 2012.

**Subcommittee Activities and Committee Infrastructure**

11. Markus Kruesi, M.D. was part of the Evaluation Subcommittee with 3 members of the Program Committee, to review our current evaluations and make changes based on ACCME criteria. The purpose of the subcommittee is to assess how useful the evaluation data collected is to the Program and CME committees in order to make decisions on future programming, and how useful the data is to the presenters. The subcommittee agreed to adding questions about time adherence for the speakers, revised and increased verbiage around applying new knowledge in practice, and barriers to change.

12. A new Subcommittee on Comment Review and its charge is described in the May 2012 document entitled “Updated Process on Addressing Potential Conflict of Interest and/or Bias from Meeting Evaluations.”

13. The CME committee is coordinating the development of an App to assist with annual meeting evaluation completion using mobile devices.
### Subcommittees within Committee (if applicable):

1. **Subcommittee on Comment Review (Reviews complaints of bias and conflict on interest)**  
   After CME Committee discussion, we agreed to create a subcommittee to review any allegations of bias that warrant direct follow-up. Educative efforts regarding appropriate procedures usually do not require this type review unless repeated concerns emerge. Specific allegations of bias (e.g., “Dr. ______ was biased and favored ______ medication over other treatments.”) will be addressed and reviewed by this Subcommittee. Having now addressed this very small number of allegations over recent years, the CME Committee has identified procedures for responding to these allegations, and we have refined our methods to follow up regarding allegations while trying to support, rather than traumatize, our presenters when such allegations arise. Very rarely have any of these allegations had any foundation, yet presenters are invariably distressed to hear of any perceptions of bias. The current member survey remains anonymous, and indeed allegations of bias have been made against institutions rather than individual presenters, etc. The CME Committee has strived to disentangle inappropriate allegations toward presenters from any components that could compromise the quality and integrity of our programs, though this clearly remains an evolving process. The Subcommittee should provide greater support and precision in considering the multiple facets of any allegations of bias.

2. **Subcommittee on Evaluations (Examines evaluations of CME events)**

### Are you collaborating with other AACAP committees? If so, how?:

**Yes.**

1. Lifelong learning
2. Program committee
3. CME Collaboration Network

### How many face-to-face meetings have you had in Current Year? When?

**Two.**

2. CME Committee, Mid-year meeting, Washington DC. April 20, 2012

### How many conference calls have you had in Current Year? When?

**None.**
<table>
<thead>
<tr>
<th>Submitted By:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Jeff Q Bostic, MD Co-Chair</td>
<td>5/25/12</td>
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<tr>
<td>Tristan Gorrindo, MD Co-Chair</td>
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