



Commissions on Continuing Professional Development 2023 Annual Report

Commissions on Continuing Professional Development

Resident

Mikita Patel, MD
McLaren Health Care
Pontiac, MI
Class of 2023

Student

Sumayya Vawda
Northeast Ohio Medical University
Rootstown, OH
Class of 2024

Purpose & Scope of Work

The COCPD works to support the lifelong learning of family physician members and other healthcare professionals by guiding the AAFP's Credit System and AAFP's provision of continuing medical education. Members partake in periodic review of AAFP credit requirements to evaluate whether the application for credit should be approved or denied. Below are the five main areas the COCPD holds responsibility for:

- AAFP CME Accreditation and Certification (of various credit categories)
- Development, presentation, maintenance, and refinement of existing and novel CME / CPD delivery methods and modalities
- CME / CPD aspects of Board Certification and State Licensure
- AAFP CME / CPD Educational Strategy and Plan
- Oversight, planning and evaluation of all AAFP-provided CME Activities

Activities & Achievements

During the 2023 Winter Cluster Meeting, we received some important updates from Dr. Newton from the ABFM.

- 1) The Family Medicine review committee's new standards dropped the requirement of 1650 continuity patients for residents and many of the specific requirements for number of hours for specific aspects of curriculum- this is happening across many specialties. The review committee, ABFM and all of the organizations are working on responding to the new requirement and supporting residencies with this transition.
- 2) ABFM has created a working blueprint which serves as a "recipe" for high stakes exam like the longitudinal assessment (FMCLA) and the Intraining Exam for residents and the continuous knowledge self-assessment (CKSA). This is the third blueprint the ABFM has had in 50 years, and it hopes to link more closely to the clinical activities of family physicians, to incorporate weighting for the risk of harm in clinical activities, and to

facilitate education. They anticipate the first examination with the new blueprint will take place with the Intraining examination in the fall of 2024.

- 3) Other ABFM updates include the continuing popularity of the FMCLA with about $\frac{3}{4}$ of eligible participants signing up each year. The failure rate of which is the same as the single one-day exam. KSAs, CKSA and Journal club are all doing well and have noticed an increase in participants and diversity in interests of participating physicians.

Some other resolutions that the COCPD discussed involved the reinstating of 25 hours of live CME. There are many reasons, including the pandemic, learner format preferences and availability that are causing significant changes in physicians' choice of continuing medical education and affecting physician attendance at AAFP live meetings. Despite the financial impact that the decrease in attendance at live meetings will have, the COCPD has decided to eliminate the requirement of a minimum of 25 credits to be obtained from learning activities. We also eliminated the list of grandfathered courses, added an informal credit category for life support courses and direct staff to provide a recommendation.

The last discussion item for the COCPD included evidence-based and customary and generally accepted CME. Clinical educational topics submitted for CME credit are assessed using the AAFP Credit System's Clinical Eligibility Requirements in one of two ways- whether the content is evidence-based and/or customary and generally accepted. The term "evidence based" is not always viewed consistently so as a general guideline, staff will continue to apply the following when assessing a topic to be evidence based:

- Use of PubMed or Cochrane as sources and filtering by systematic reviews within the last 5 years
- One article by one author is not sufficient.
- Referencing the Evidence Pyramid to help define where a topic falls.

If staff escalate a topic to physician review for clinical expertise, a list of references from the CME provider will be requested effective January 2023 and physicians will use their expert opinion to determine eligibility of the CME.

Subcommittee Work

The COCPD also works with the CMMS and both parties determined it is appropriate to conduct a study of the AAFP's CME requirement for membership. The study should include a review of the current landscape of CME requirements impacting members, lifelong learning trends and considering the alternative means and methods to support and encourage members lifelong learning as well as any implications for the AAFP.

Lessons Learned and the Value of Serving on the COCPD

There was a substantial amount of time dedicated to learning about and participating in the AAFP CME application reviews and the considerable amount of effort that staff repeatedly put in to ensure a comprehensive and just assessment of the educational material is admirable. Members of the COCPD were called upon to address the more challenging applications and this required use of the flowchart that was provided to us. This process, though seems simple, proved to be quite contentious at times and forced us to look at the objectives and deliberate accordingly. Being a part of this commission has shown me the importance of getting involved in the process of continuing medical education from the

earliest stage in my medical career as a student. Being part of this committee has given me the opportunity to network with incredible physicians, expand my knowledge base and learn about the many career opportunities that exist within family medicine. I would highly recommend current/future medical students to partake in this commission.

Note: This report was prepared by the resident or student representative(s) listed and includes their account(s) of the business conducted during their term. This is not an official record of business proceedings from the AAFP or any other entity. To find out more about the business of the AAFP, its congresses, commissions, and current policies visit aafp.org.