



# Commission on Continuing Professional Development 2021 Annual Report

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## COMMISSION ON CONTINUING PROFESSIONAL DEVELOPMENT (COCPD)

### **Resident**

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Class of 2022

### **Student**

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## **2021 Scope of Work**

### **Commission on Continuing Professional Development**

- 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 Curricular Framework
- Oversight, planning and evaluation of all AAFP-provided CME Activities (B2017)

Serving as the 2021 Student and Resident Representatives to the COCPD has been an exciting and illuminating experience. During our most recent cluster meeting, both of us discussed our new-found appreciation for the broad scope and significance of Continuing Professional Development. For those who may be less familiar with the roles and responsibilities of our Commission, the COCPD works to promote lifelong learning among physicians and members, most notably through the AAFP CME accreditation process but also through other education-related initiatives. These include maintaining an expansive library of learning resources, brainstorming new educational opportunity areas and interfacing with sister organizations and groups also working to sustain physician education.

During our time on the COCPD, we had the privilege to be involved with many exciting discussions in these topic areas. We met twice with Warren Newton, CEO of the American Board of Family Medicine, who discussed several items but one of the most interesting initiatives to trainees is the ABFM National Journal Club, a new project that will identify key

articles and provide assessment questions and critiques. Especially relevant for residents is that this activity will provide KSA points for progressing towards Board certification. We also heard from related organizations including the American Board of Medical Specialties and the Federation of State Medical Boards. Discussions focused on the pandemic-induced imperative to quickly transition many previously in-person events and services to the virtual setting – notably for trainees this included board examinations, medical education opportunities and telehealth provision. We also had the opportunity to participate in new ‘Work Groups’ within the COCPD. These smaller breakout sessions focused on Taxonomy, New Activity Concepts, Portfolio Review and Education Priorities – all of which were meant to better focus the broader Commission on specific ways to improve the breadth, quality and accessibility of AAFP CPD material.

A major component of our time on the Commission went to participating in AAFP CME application reviews. This process entails COCPD members and their supporting staff thoroughly vetting every application for AAFP CME credit to ensure that any material bearing AAFP’s stamp of approval meet a consistent standard of relevance, quality and evidence-base. Because the staff typically sends only the most complex application issues up for physician review, the application reviews we participated in were consistently thought provoking. This process repeatedly required us to wade into thorny, gray areas such as how evidence is utilized to support medical claims or whether an individual or organization had a conflict of interest regarding the information they wanted to present.

Being involved in such a diverse range of discussions and opportunities has been an eye-opening experience for us both. In the course of our service, we’ve learned that Continuing Professional Development, like other areas of medical education, is in the midst of a significant transition period. The continued improvement of online databases and resources, as well as the increasing familiarity of the public with on demand subscription services like Netflix, was already pushing CME towards a more tech-oriented future, but the disruptions caused by the pandemic have significantly accelerated that transition. Thankfully, the staff and leadership of the COCPD was already heavily invested in this evolution and getting to see all the time and energy they’ve devoted to thinking creatively about how to make CME more accessible and engaging was extremely encouraging – especially given that we’ve only just had to start thinking about that part of our life as a physician. Because of how significantly any changes to the CME/CPD paradigm will affect us as young trainees, our viewpoints were frequently sought out from the very beginning, and we felt our voices were genuinely valued in every conversation that was had. We expect that future resident and student leaders selected to fill these roles will find the environment no less welcoming and rewarding.

*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](http://aafp.org).*