

## The President's Perspective

By David Wiljer, PhD

President, Society for Academic Continuing Medical Education

I hope you are all enjoying an amazing fall. I know this is a very busy time for everyone. There is a tremendous amount of work happening at SACME and I wanted to highlight a few things for you in this issue of Intercom, including discussions held at the Board of Directors annual retreat over the summer. The retreat, held virtually over two sessions, gave us time to focus in depth on topics relevant to SACME, especially given the extraordinary changes and challenges that occurred in CPD during the pandemic. The rich and fruitful discussions are being synthesized and the recommendations will be prioritized by the Board in a special session in November. In this column I wanted to provide you with a preview of the topics on which we focused. As always, we would appreciate your feedback and invite you to get involved in initiatives related to these topics in the coming months.

The first topic that we focused on is SACME membership, the shared values that we have and the importance of paying attention to the rapidly changing needs of our members during these turbulent times. This topic was highlighted recently in a CE News column introduced in the Fall 2022 edition. Dr. Sophie Soklaridis jumped on her “Soph box” to urge us to consider what the CPD practitioner of the future will look like, underscoring the critical role that we have in shaping new paradigms of education that will emerge from our ongoing systems-thinking approaches to the ever-evolving education landscape. If you missed it, you can [check it out along with the issue's other interesting articles here](#). During our Board retreat, we focused on what values are unique to our members and how best to support our members in this ever-evolving landscape and complex ecosystem.

Focusing on our members led us to our second topic, Inclusion, Equity, Diversity and Accessibility (IDEA). The discussions were informed by the work of SACME's EDI Task Force. The focus at the Board retreat was to identify priorities for SACME as an organization to sup-

port members as they employ mechanisms for embedding equity, diversity, inclusion, and accessibility principles into their own educational activities. The EDI Task Force conducted a survey of SACME members in the Spring. They have just completed their report and presented it to the Board. The Board will be working hard in the coming months to review the report's recommendations and to prioritize specific tactics for pushing EDI tools out into practice. In parallel, we are in the process of launching a new EDI implementation task force to help members fill the needs that were identified, implement the recommendations, and ensure



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that this important work is embedded in everything that we do as part of an equitable and inclusive SACME organization. I want to thank Edeline Mitton, Mohammad Sahlia, and Joyce Fried for their great work in taking the pulse of SACME members on these issues and drafting findings and recommendations.

The third topic area of focus was the future of our annual meetings and how to navigate the changes that we have seen in large conferences during the pandemic. I'm very excited about the direction our 2023 annual meeting is taking, as Tym Peters and his team construct a multi-channel approach to ensuring everyone can fully participate. Although our 2022 virtual meeting was very successful, we are really look forward to being together in Nashville from March 14 to 17, 2023 as we tackle "Inspiriting and Igniting the CPD Imagination". We thank all of you who have submitted abstracts for the meeting and who have volunteered to review the abstracts so that we can have a high quality, evidence-based event.

One particularly exciting aspect of our annual meeting will be David Price's Barbara Barnes Lecture, "Toward More Purposeful, Intentional, and Collaborative Alignment of CPD in Health Care Enterprises", focusing on systems-integrated CPD as an avenue for sparking imaginative approaches to education development. David's outstanding scholarship has enlightened the field of CPD for many years and I highly encourage you to reflect on the insights that he and his co-authors offer in their seminal paper on aligning health professions education with system needs: <https://nam.edu/systems-integrated-cme-the-implementation-and-outcomes-imperative-for-continuing-medical-education-in-the-learning-health-care-enterprise/>

The Board also had a rich discussion on future meetings beyond 2023. Our leadership team has been focused on determining the purpose, form, and function of our annual meeting as we enter a new era of enhanced personal connectivity and engagement. This conversation allows us to fundamentally rethink what we're trying to achieve. What is the nature of our annual meeting? How do we define its success and how do we conduct it going forward? Is it multi-channel? Should it be virtual? In person? Do we alternate between formats? There are a lot of questions to be answered. The multi-channel approach is resource-intensive, so the tasks for our leadership are to determine what our model should be moving forward, gather some evidence, look at best practices, and reach out to members for their perspectives.

The final key topic area of the Board retreat was the role of technology in the rapidly changing landscape of CPD. Promoting the use of technology in an evidence-based

way remains a central focus of SACME leadership. At the retreat, we were joined by Olivier Petinaux, Vjekoslav Hlede, and Heather MacNeill who highlighted the evolving role of technology in CPD and led us through a process of identifying priorities for the CPD community and our members. We are also thrilled to see the progress of the new Technology-Enhanced CPD Committee under Olivier and Vjeko's leadership and its rapidly growing membership. The priorities emerging from the Board retreat and the work of the committee will help us become better equipped to use the most recent evidence and practices and ensure that we can support our members as they become more reliant on technology in their CPD activities.

As we tackle these important topics for SACME, we need your thoughts and ideas. One of the unique ways to share your ideas is to submit a paper for the upcoming SACME special themed Supplement to the Journal of Continuing Education in the Health Professions (JCEHP). Dr. Walter Tavares is our lead Guest Editor for this Supplement that will focus on new and emerging conceptual frameworks. The deadline for abstracts has been extended to February 28, 2023. This is an opportunity to inspire thinking about frameworks, tools, and ideas from other disciplines that can inform CPD and help us advance our work. More information on the Supplement is available [here](#).

Finally, I want to address one more important topic that the Board is monitoring closely – emerging financial challenges. Always prominent in the evolving landscape is the fiscal environment each of us faces as individual practitioners and as organizations. As such, we keep a vigilant eye on what that means for SACME as we develop the tools, resources, and programs that help you stay current in the field. Today's uncertainty, evident in rising inflation and turbulent markets, can filter down to impact us at a granular level. We continue, through the excellent guidance of our finance team under the leadership of our Treasurer, Leticia Bresnahan, our Vice-Treasurer, Asha Maharaj, and our Finance Committee, to make sure that we are paying attention to those issues and have the appropriate policies and approaches in place for our organization.

I have covered a lot of ground in these few paragraphs, so I'll sign off here. If all of this information is entirely new to you, you might consider signing up for [one of our committees](#). It's a great way to stay current on the inner workings of the organization and on the external factors that affect us all as members and practitioners of CPD.

Have a great fall and I look forward to speaking with you soon.



# SACME 2023: Inspiring and Igniting the CPD Imagination

By Tym Peters, University of California, San Francisco

## What is “Multi-Channel”?

The SACME Annual Meeting is currently in an evolutionary state. Asha Maharaj led a heroic effort to successfully get the conference completely online in 2021, and in 2022 we focused on a theme that was – and is still – centered on our members, our learners, their learners, and their patients, and introduced some experimental features and scheduling. So far, the evolution has worked, so we continue to add to the mix. Behind all this is an effort to move away from a one-and-done annual event to something that engages members, and the whole CPD community, consistently and constantly. For me, the coming year has two goals: (1) stretch the traditional annual meeting format, and (2) keep everyone connected, and create the sense of collegiality and intimacy that we were able to generate online(!) during the last two meetings.

Much of the format for the 2023 meeting was inspired by the work of Alvaro Margolis and many others, which has been presented as the “Extended Congress.” The concept really appeals to me; I just haven’t figured out how to pull it off - yet. For the coming year, a good place to begin in this space was thinking about the modalities available to us. We landed on planning a digital meeting that just happens to occur on-site and in-person. More on that in a minute.... There’s also the age-old concept of “sequential learning” at play here, where important components, or “tasks,” of CPD are learned before other tasks. Those are used to build on each other toward a hopefully positive outcome. The grand experiment in 2023 will be to integrate these concepts in a way that

is meaningful and useful for our members while also making them feel connected and inspired.

So, about the “multi-channel” meeting: I really wanted to get away from the word “hybrid.” It has become a word as overused as some of my other not-so-favorite words, like “pivot,” “virtual,” and “unprecedented.” Instead, we’ve decided to *pivot* in an *unprecedented* way away from *virtual* and the connotations of *hybrid*. And by that, I mean the immediate thought one has of an in-person meeting that has a live-stream component and two separate audiences participating through different modalities which are semi-integrated. While this has value, it seems we have an opportunity to try something different – adjust the connotation, make the concept more appealing, and more effective.

The CME/CE/CPD community has learned a lot during the last two years, experimenting with the best ways to deliver education online, returning to gathering in-person safely, and combining both modalities together more effectively. With our colleagues at the Alliance, ACCME, ANCC, ACPE, AHME, ABMS, AAMC, University of Toronto, among others, we’ve seen quite a few different models, and each seems to have its pros and cons. Right now, I feel a real openness in the CPD community to figuring out what’s next. The current connectedness in purpose is really comforting for me; it’s nice to know you’re not alone.

For SACME 2023, ideally, we’d like to see everyone participating in the same meeting – whether it’s a couple of days on-site or online or through a year-long longitudinal program.

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dinal path of extended or sequential education. And they should be able to participate in multiple ways, through multiple “channels,” if you will, hence “multichannel.” These modalities could be synchronous face-to-face, asynchronous online, synchronous online, remote audience members engaging with on-site audience members and vice-versa, chat, discussion forums, webinars, enduring content, discussions online and offline – a whole package of modalities from which people can choose to participate when and where they are at a particular time. Some modalities will probably gain more traction with participants than others, but I think choice is important and equal access is important, especially as our community engagement grows globally. As an example, ten o’clock AM Central Time in North America seems doable everywhere, but it’s really not for our colleagues in Buenos Aires, Dubai, Melbourne, or Tokyo. In addition, individuals and organizations are still grappling with disparate policies and various levels of restrictions, and even perhaps some personal anxiety in the nearing post-COVID era. That is what makes choice important. Sure, it would be great to have all 300 of us meet up in-person, but the reality is we are not there yet, and we may not need to be even though I am really looking forward to seeing colleagues again in three dimensions, face-to-face in Nashville next March.

## The Theme

The theme was inspired by an editorial by Dr. Simon Kitto in JCEHP, called “Opening up the CPD Imagination.” “The central themes … were (1) to examine the challenge of “seeing” things differently in CPD, (2) to explore the relationships between continuing education (CE), knowledge translation (KT), patient safety (PS), faculty development (FD), and quality improvement (QI), and (3) to stimulate the imagination of CPD practitioners to create new forms of effective CPD.”

If it hasn’t occurred to you at this point, this is not a small topic. Fortunately, I have a crack team working on it! Chairing the Program Committee this year has again been a real honor; the committee is such a great group, and every meeting always leads to a rich discussion and the emergence of super ideas. I wish I could put them in a large room with a bunch of whiteboards and let them get all the ideas out at once. Paired with a wine tasting, I’m sure they would be more creative than ever.

The Program Committee grappled with the theme for some time before distilling it down to some key components that seem relevant and important to the future of

CPD. Our “pillars” around which we are basing content are (1) the value proposition for CPD from many perspectives – organizational goals, communicating with stakeholders, interprofessional collaborations, the CPD unit’s business model, patient care, clinician-learner well-being, data-driven and technology-enhanced CPD, among others; (2) the intersection of education and quality improvement, (3) the intersection of care delivery, and (4) partnering with patients and patient safety stakeholders. That’s probably all I can say without providing too many spoilers. (Note that things are still a bit fluid at this point.) We’re also currently receiving so many terrific abstracts that may bring to light other initiatives we haven’t even thought of yet.

One thing that seems to fit the theme but is less explicit in it is the ACCME Education Toolkit developed by SACME. Part of the plan for the Annual Meeting is to have workshops, mini-plenaries, seminars, and informational meetings around the Toolkit (and other topics) leading up to the “main event,” and continuing afterward. The longitudinal approach we started in 2021 gets more longitudinal this year. The two to three days we have for an annual event are just not enough to showcase everything SACME, its members, and our colleagues in the community can do. So much to learn, so little time.... It’s time to take advantage of the rest of the year between meetings.

## Will It Work?

I’m actually not sure how this will work out. If we get 2/3 of what we set out to do accomplished, I would say it’s a success. I think anything that raises the bar, stretches the imagination, and inspires others to stretch their “normal” way of being is a positive outcome. Once the program structure comes together a bit more, the plan is to further engage the Scholarship Committee to develop metrics for success that will give SACME the opportunity to provide the entire CPD community a better understanding of what works and what doesn’t as we travel down this “What’s Next?” path together. I look forward to sharing that with others. In alignment with the 2023 theme, however, this would not be accomplished just to find ourselves sitting in a “new normal,” but continuing to stretch out to the next best practice, the next most impactful intervention, the next best way to measure our impact on learner competence and performance, and on patient and population health. We must keep the end goal in mind, despite all the sometimes distracting experimental techniques used to get there.

# Fellows Academy Report

By Betsy Williams, Professional Renewal Center, Kansas

The Academy of Fellows continues to pursue its mission to create a supportive environment for members to engage them in the field of academic continuing professional development. The Steering Committee of the Academy met in May and September of 2022 to review and discuss previous Academy projects and identify ways to bring forth new programs and engage members of the Academy.

I'd like to extend a big thank you to committee members Joyce Fried, Ajit Sachdeva, Linda Caples, Deborah

Samuels, William Rayburn and David Wiljer; along with Chair Jack Kues and the mentorship committee members (David Price, Christine Flores, and Mary Turco) for their work with the new cohort of mentees which launched in July of 2022.



There are 7 mentor mentee pairs:

Mentees	Institution	Mentors	Institution
John King	U. of Vermont	Ruth Adewuya	Stanford U.
Helen Mawdsley	U. of Manitoba	Jack Kues, Helen Filipe	U. of Cincinnati
Trisha Veenema	U. of Utah	Ginny Jacobs	AXDEV
Lori Deitte	Vanderbilt U.	Bill Rayburn	
Melissa George	Penn State U.	Susan Tyler	U. of Cincinnati
Thomasine Gorry	U. of Pennsylvania	Craig Campbell	U. of Ottawa
Ann Perch	MD Anderson	Monica Bourke	Dignity Health

There have been two meetings with the mentor mentee pairs to share experiences, ideas and suggestions and identify fruitful avenues for scholarly activity. These meetings typically deal with program standards and expectations, and the anticipated next steps for both the mentees and the mentors.

We are also in the process of putting together the Faculty Development Committee to build on SACME's long-standing commitment to improving the design, development, and delivery of professional instruction. Chair Gary A. Smith, PhD, and vice Chair Sue Lawler, PhD, CPA, MBA will spearhead this effort with guidance from the irrepressible Joyce Fried. Gary has been directing educational development and professional development programs at the University of New Mexico (UNM) since 2006 and has been on the UNM faculty in Earth & Planetary Sciences (1987-2015) and Organization, Information & Learning Sciences (2015 to present). He was the founding director of the UNM Office of Support for Effective Teaching (2006-2013) and the founding director and assistant dean of the Office for Medical Educator Development (2013-2019) in the School of Medicine. In

2019, he oversaw the combination of the medical faculty development and CME/CPD programs to form the Office for Continuous Professional Learning, where he is the associate dean.

Sue is the Assistant Director, Comprehensive and Innovative Faculty Development Programs, American College of Surgeons. She came to ACS from Rush University, where she was Leadership Academy Director. The Academy provides leadership training and development for administrators and clinicians. Sue holds a BS in Accounting from the University of Illinois, an MBA from Northwestern University, and a PhD in Organizational Development from Benedictine University. Her research explored how coaches help their clients achieve sustained change.

The committee was established to address faculty development in the continuing professional development (CPD) sphere. The committee will be looking to define what faculty development in CPD looks like, determine the needs of our SACME members and work to develop programming and resources to meet those needs.

# Updates from the AAMC

By Lisa Howley, MEd, PhD, Senior Director of Strategic Initiatives and Partnerships, [lhowley@aamc.org](mailto:lhowley@aamc.org), [@LisaDHowley](https://twitter.com/LisaDHowley)

It is an honor to share these timely updates and announcements with SACME. I want to begin by extending my best wishes for those enduring the aftermath of hurricanes Fiona and Ian. Health care professionals are, once again, being called upon to work and serve under extremely challenging circumstances. I know that SACME agrees that their wellbeing and protection is vital to health care and healthy communities. Two recent and relevant updates I want to call your attention to are the first two listed below, the *National Plan for Health Workforce Wellbeing* and the proposed *Safety from Violence for Healthcare Employees (SAVE) Act*. Clinician burnout and depression continue to increase and all of us have a role to play to improve and ensure our systems are structured in a way that fosters wellbeing. Unfortunately, violence and attacks against physicians and other health professionals are becoming more common and likely contributory to increased levels of burnout. If you are not already familiar with the unsettling research in this area and the proposed legislation to protect our health care professionals, [please learn more](#) and consider ways we can all support greater civility in our interactions.

Below are 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](mailto:cme@aamc.org) or [lhowley@aamc.org](mailto:lhowley@aamc.org)

## Select AAMC Announcements and Initiatives

**Joint statement on violence against health care workers** by AAMC (Association of American Medical Colleges) President and CEO David J. Skorton, MD and National Academy of Medicine President Victor J. Dzau, MD (Sept 30, 2022). “Our organizations call on leaders to safeguard health professionals and others in health care settings from such risks. We urge Congress to pass the bipartisan [Safety from Violence for Healthcare Employees \(SAVE\) Act](#), which would offer statutory protections against violence and intimidation for health care workers and provide grants for hospital programs aimed at preventing violence in health care settings. Leaders across sectors should take care to prevent irresponsible

commentary that jeopardizes the lives of health professionals – and the patients they treat – simply for doing their jobs.” This statement is available online [here](#).



## National Plan for Health Workforce Well-Being Released

The National Academy of Medicine’s (NAM) Clinician Well-Being Collaborative will publish its National Plan for Health Workforce Well-Being on Oct. 3. The plan builds on six years of collaboration among a network of more than 200 organizations, a related 2019 NAM report, the May 2022 Surgeon General’s Advisory, and almost 2,000 comments received during a public input opportunity. The launch event will be hosted at the AAMC’s Washington, D.C., headquarters. The AAMC is one of the founding organizations of the collaborative. [Read More](#)

## Health Misinformation and the Role of Medical Educators: New Cooperative Program between CDC and AAMC

Health care professionals have a unique and important role in addressing health misinformation. The AAMC has awarded curricular innovations grants to five project teams from AAMC-member medical schools. The grants will support the initial development of competency-based, interprofessional strategies for preparing learners to address health misinformation and the integration of these strategies into new or existing curricula. These awards are supported through a cooperative agreement with the Centers for Disease Control and Prevention to build confidence in the COVID-19 vaccines. [Click here](#) for details on grantees. [Read More](#)

## Select AAMC Resources

### AAMC publishes medical education competencies for diversity, equity, and inclusion

The AAMC has developed the *New and Emerging Areas in Medicine Series* as a guide for everyone who devel-

ops curricula within the field of medicine and for people learning to practice or continuing their professional development. This third report in the series focuses on competencies for diversity, equity, and inclusion (DEI). [Read More](#)

## Clinician Educator Milestones provide pathways for professional development and framework for assessment

The Accreditation Council for Graduate Medical Education — in collaboration with the AAMC, the Accreditation Council for Continuing Medical Education, and the American Association of Colleges of Osteopathic Medicine — has published the first-ever [Clinician Educator Milestones](#), designed to support development and improvement of teaching and learning skills across the continuum of medical education. This new framework was developed to track key teaching and educational activities for clinician educators, educational leaders, and educational scholars. [Read More](#)

## New Competency Framework for Unhealthy Substance Use

A new framework from the National Academy of Medicine's [Action Collaborative on Countering the U.S. Opioid Epidemic](#) outlines minimum core competencies for all health care professionals who encounter patients experiencing pain or unhealthy substance use. This framework can be used to refine existing competencies or create new competencies where needed. The AAMC is a member of the Action Collaborative. [Read More](#)

## AAMC Diagnostic Safety Toolkit now available

The AAMC, with the guidance of the [Chief Medical Officers' Group](#) and the [Integrating Quality Initiative](#), has developed a [toolkit](#) focused on the reliable communication of diagnostic testing results during care transitions. The toolkit provides the resources to catalyze and facilitate discussion among clinicians, educators, and leadership to identify an institution's process and discover opportunities for improvement and standardization. Questions about the toolkit can be directed to Jennifer Faerberg ([jfaerberg@aamc.org](mailto:jfaerberg@aamc.org)).

## AAMC data snapshot details transgender and genderqueer adults' health care access and satisfaction

The AAMC has published an interactive data snapshot that details health care access and satisfaction for transgender and genderqueer people. Results show that a dis-

portionate percentage of transgender or genderqueer adults in the United States report adverse experiences when trying to access health care and when interacting with their providers. [Read More](#)

## Data explores the experiences of birthing people in the United States

The AAMC Center for Health Justice recently polled a nationally representative sample of people who gave birth in the past five years to learn about their experiences. A new data brief highlights findings from the poll and provides insights about the complications and discrimination individuals have faced during pregnancy and childbirth and following childbirth. [Read More](#)

## Select AAMC Opportunities

### Register now for Learn Serve Lead 2022: The AAMC Annual Meeting

Registration is now open for Learn Serve Lead 2022: The AAMC Annual Meeting, taking place in Nashville, Tennessee, Nov. 11-15. [Register Now](#) **Celebrating the Role of Arts and Humanities in Medical Education**

As part of its [Fundamental Role of Arts and Humanities in Medical Education \(FRAHME\)](#) Initiative, the AAMC will host a free unique virtual celebratory event on Oct. 28 from 1-2:30 p.m. ET during National Arts and Humanities Month. [Register Here](#)

### Save the Date: GDI and GFA Joint Professional Development Conference

The 2023 AAMC Group on Diversity and Inclusion (GDI) and Group on Faculty Affairs (GFA) Joint Professional Development Conference will be held June 12 - 14, 2023, at the Renaissance Esmeralda Resort and Spa in Indian Wells, CA. For more information on this event and other upcoming AAMC professional development opportunities, follow @AAMCProfDev on [Twitter](#) and [LinkedIn](#).



# EDI Task Force Review

By Edeline Mitton, State University of NY, Downstate Health Sciences University

Our 2022 meeting focus on wellness and well-being highlighted the importance of inclusiveness as a key element in optimizing our efforts for the betterment of all people who might be touched by our educational efforts – our learners, those that direct them, learn from them, and those that benefit from their care. The additional social controversies of the last few years have also spurred an awakening, and a burgeoning focus on issues of equity, diversity, and inclusion.

This also brought us the realization that members were interested in the field and hungry for information and faced a simple question with many complex answers – what else can we do to ensure we address concepts of equity, diversity, and inclusion in our daily practice? Further, this emergence prompted SACME leadership to ask: What can we do as an organization to assist our members who are grappling with this topic area as they plan their events and activities? It was at this point that the Board decided these were questions worth investigating and the task force was set up to find out just how we were positioned as a society to address these issues, examine our potential to create some resources, and flesh out guidelines to provide a road map for our members.

As Chair and Co-Chair of the task force, Mohammad Sahlia and I set about understanding the perspectives of SACME members on this issue. We initially met with our Strategic Affairs Committee for guidance on how to approach the project, and we decided the best place to start would be with our members. And here I must pause and offer our thanks to Joyce Fried who has provided excellent guidance for us throughout the process.

We then attended several coffee chats and gathered some feedback. In these sessions we found an open and safe environment in which participants could ask questions, offer opinions on both a professional and personal level, and share their perspectives on things that our organization could address and how we could best support the membership. We learned that many members' organizations had issued directives that they should ensure DEI issues are addressed in planning, development and delivery of education. Still, there was very little concrete guidance on just how to do that. We then reached out to the overall membership with a survey that focused on their own personal interpretation of what equity, diversity, and

inclusion meant and how the task force's work might help them. Following review and aggregation of the information we pulled together, we submitted our report to the Board, who will review and identify our next steps.

The SACME Board will compile all information and let us know how to step forward with this initiative soon, but we can share a couple of overarching themes from what we learned in our discussions and from the survey. First, people are overwhelmingly supportive of this initiative, and there's a genuine desire to be inclusive and make sure inclusiveness is a part of their programs, which is of great credit to the people in this organization who we know balance the competing needs of a highly variable set of education requirements on a daily basis. Secondly, this need extends beyond professional activities. Many people have questions not only about adhering to organizational directives, but also about how they incorporate considerations of diversity, equity, and inclusion on a personal level. This is heartening, and a living example of how we continually strive to get beyond compliance and engage in quality improvement even in our personal lives. The last major outcome was an explicit desire to include issues of accessibility into our examination of these topics. The pandemic brought us a significant shift in how we interact and engage, and raised questions about accessibility that we previously might not have seen as central into the forefront of activity design, development, and delivery.

There's a lot to do, but our conversations with SACME leadership and the rank and file have made it clear that the appetite for implementing educational activities that include all aspects of EDI is huge, and some guidelines, tools, and resources will kick-start largescale adoption into our practices.

# 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 Announces Largest Class of Visiting Scholars for 2022-2023

In August, [ABMS selected 10 outstanding individuals](#) – the largest cohort to date – to participate in its 2022-2023 [ABMS Visiting Scholars Program](#)™ thanks to unprecedented sponsor support. The 2022-2023 ABMS Visiting Scholars are co-sponsored by the Gordon and Betty Moore Foundation and the American Boards of Ophthalmology, Orthopaedic Surgery, Otolaryngology–Head and Neck Surgery, Radiology, and Urology. The ABMS Research and Education Foundation will sponsor three additional scholars. Launched in 2014, the one-year, part-time Visiting Scholars Program supports early-career physicians and researchers in scholarship and leadership development focusing on physician assessment in initial and continuing board certification.

## ABMS Responds to Misleading Assertions of Certifying Body Equivalency

In July, ABMS issued a statement following the National Board of Physicians and Surgeons' (NBPAS) announcement that it has been deemed a “designated equivalent source agency” by the Joint Commission. ABMS strongly disagrees with the persistent and misleading assertions that the NBPAS recertification process “provides a means of continuing ABMS board certification or is equivalent to ABMS board certification,” the statement reads. “Claims of equivalence to ABMS certification or that NBPAS is a means to maintain ABMS Member Board certification are misleading to the profession, and most importantly, to the public who depend upon the strength of ABMS board certification.”

ABMS points out that, unlike its Member Boards, NBPAS **does not**

- have a process for defining specialty-specific standards for knowledge

- offer an external assessment of knowledge and skills, which the [Institute for Credentialing Excellence](#) defines as the essence of a certification program’s ability to validate competence
- have a requirement for improving medical practice
- appear to engage in research to provide the evidence-based data supporting the value of its program and informing its continued quality improvement
- offer a certificate that is consistent with the established [American Medical Association policy on certification](#)



Questioning the rigor of NBPAS’s process for ensuring the professionalism of its members, the statement notes that “ABMS has identified a number of physicians whose certificates were revoked by ABMS Member Boards and who are certified by NBPAS. The reasons for these revocations range from sexual harassment to mis-prescribing controlled substances and other professionalism issues. This type of physician behavior places patients at risk yet they maintain their NBPAS certificates.” [Read the statement in its entirety.](#)

## ABMS Urges Medical Profession to Address Gun Violence as a Public Health Crisis

In June, ABMS released [a statement](#) calling for gun violence to be “acknowledged as the serious public health crisis that it is.” Among the solutions to address gun violence ABMS cited are seeking funding for and increased access to social, emotional, and mental health assistance; supporting trauma centers and interventional care; ceasing physician firearm “gag” legislation; investing in violence research; and supporting sensible gun laws.

## ABMS Issues Statement on Legislative Interference in Medical Education, Training and Practice

The following week, ABMS released [a statement](#) maintaining that the *Opinion* issued by the Supreme Court of *continued on page 10*

the United States that reverses *Roe v. Wade* and *Planned Parenthood of Southeastern Pennsylvania v. Casey* “establishes a dangerous precedent of legislative interference in the practice of medicine.” Furthermore, it states that “ABMS fully supports the Member Boards and recognizes their professional expertise in setting standards for necessary and appropriate boundaries of care in education, training, and practice.”

### **ABMS Announces New BOD, Executive Committee Members**

ABMS announced the election of new members to its Board of Directors and Executive Committee at its Board meeting held in late June. [Read about the new members.](#)

### **ABMS Supports SMBs' Autonomy Regarding Licensing Actions**

In March, ABMS released [a statement](#) supporting the Federation of State Medical Boards' (FSMB) opposition to legislative efforts limiting state medical boards' (SMB) authority to investigate patient harm.

### **Recent issues of *ABMS Insights* Highlight Professional Conduct, CBME and ABMS Visiting Scholars Program**

The [fall issue of \*ABMS Insights\*](#) highlights professional conduct/professionalism. Gain insights about the [newly approved ABMS Policy on Professional Conduct](#) from

those involved in developing it. Learn which boards are [updating their professionalism policies](#) and those that are [emphasizing professionalism through large-scale efforts](#). Read why [professional certification bodies should uphold public trust by enforcing codes of conduct](#) and how [one coalition is out to strengthen professional certification](#).

The [summer issue of \*ABMS Insights\*](#) focuses on how [Member Boards have accelerated resident outreach](#) and even [extended assessment opportunities to residents](#). Learn which boards [are exploring competency-based medical education](#) (CBME) and [how they are bridging the continuum of learning and assessment as well as driving professional development](#).

The [spring issue of \*ABMS Insights\*](#) features the [ABMS Visiting Scholars Program™](#). Learn how the program [helps shape future health care leaders](#) and [how the Gordon and Betty Moore Foundation aims to advance diagnostic excellence through the program](#). Hear from [ABMS Visiting Scholar alumni who speak to the many exceptional opportunities it has provided them](#), including [advancing their research aspirations](#), developing their leadership skills, and shaping their career path.



# Communications Committee Report

By Leslie Doering, Oregon Health & Science University Division of CPD

The last couple of years have forced all of us into a lot of thinking and rethinking about what we do and how we do it. The SACME Communications Committee is no exception, and we've spent a considerable amount of time re-evaluating the ways in which we provide information to members. In 2021 we undertook an exercise to determine who our publications were aimed at and what information was contained in them. We conducted what might be described as a modified Delphi process with committee members to answer this question for the Intercom, CE News, and Pulse Points:

From your perspective, what are the goals, audience, and intended benefits of the *Intercom/CE News/Pulse Points*?

Fifteen committee members provided their perspectives, reviewed a finalized list of responses, and then ranked responses for each submission so we could prioritize aggregate views of each publication. A review of the results suggested some overarching themes identified by the group:

- CE News was identified by several respondents as the venue for communicating information on scholarly activity within the discipline
- Pulse Points was identified as a venue for time-sensitive information and member outreach
- Intercom was identified as a good venue for distributing related organization information, and a mechanism for SACME leadership to communicate to members.

Based on this analysis we created a framework defining the mission, structure, audience, and distribution for each publication that will provide sign posts for future editions so that we can shape them to present distinct but complementary information for members.

Another significant effort was the review of our website that we undertook towards the end of 2021. As some of you may have noticed, the SACME website is in need of some rework. We have some duplicate content, some dead ends, and we're missing some information that should be available to members. Enter Jennifer Reino, to whom we're indebted for her detailed work in mapping our website to help us see what was outdated, missing, in need of revision and upgrade. We took a novel ap-

proach to this review, creating a website scavenger hunt for committee members to explore the site while thinking about structure – did you find the item? Is it where you expected it to be? Is there a location where you think it ought to be? This set the stage for a redesign based on the user experience, and though this is an ongoing process, expect to see changes as you access the site to catch up on what's going on inside SACME, find some resources, or look for contacts. This is an ongoing process so we'd like your thoughts. Are you a skilled web designer? Can you help us re-organize our site? Maybe not, but maybe you'd like to meet more SACME members, or learn a little more about what's going on in the area of scholarship, or how our annual meeting is organized. The best way to learn would be to [join a committee](#). Sign up, put your skills to work and help us drive our society forward.

In the meantime, we must also give a collective tip of our caps to Cindy Juarez who has continued to extend our reach by connecting with members on social media and providing an additional avenue through which we can provide information. To stay up to date on what's happening follow us @SACMECPD and [sign up to connect on LinkedIn](#).

Another communication mechanism that we often overlook is the listserv. This is a great tool for members to bounce ideas off one another and ask questions about some of the nuances of implementing ACCME standards. There's always a willing respondent out there who can share their own stories with you. As this listserv enters its 25th year, we've begun to think about how this treasure trove of information could be made more accessible, perhaps as a searchable database. Again, we'd like your thoughts – any skilled database developers out there? We could use your insight.

The Intercom celebrates its 35th year of publication, and as we've moved from printed mail-out, to pdf, to future posts on our new Word Press site, we can see some obvious changes. Take a coffee break and take a look at past issues [posted here](#). Many thanks to Joyce (once more) and the Bostrom team for framing these windows into SACME history. If you have an interest in how we got here these old editions provide insight into the ups ([Expanding Opportunities for CME](#)) and downs ([The Katrina Effect on Tulane CME](#)) of the CME experience.

# Enhance Your CE Programming with the CE Educator's Toolkit

Explore the [CE Educator's Toolkit](#), a resource developed by SACME to equip educators with best practices and guidelines to deliver effective CE. This resource was developed through an [ACCME research grant](#) in fulfillment of the ACCME's strategic goal to advocate for research and scholarship in CE. The toolkit has been downloaded over 215 times to date—you won't want to miss out on this tool to elevate your CE program! Check out a few highlights from the toolkit below.

## Apply IDEA Principles

When designing and implementing an educational activity, it's important to consider your learners' demographics, experiences, learning preferences and needs, and professional backgrounds. The toolkit explores ways to incorporate principles of inclusion, diversity, equity, and accessibility (IDEA) in CE programming and offers guidance on how to create meaningful educational opportunities for all learners. Learn more about IDEA principles on page 35 of the toolkit.

## Facilitate Small Group Learning

Research has shown that small group learning is an effective module for continuing education—it promotes a collaborative environment for learners to develop skills in problem-solving, team building, decision-making, and critical thinking. Looking for guidance and tips to facilitate small group learning in your work? Explore case scenarios, implementation guidelines, and key considerations on page 46 of the toolkit.

## Implement Case Based Learning

Clinicians learn best when they are presented with scenarios that are relevant to their type of practice and represent realistic problems. Case-based learning (CBL) encourages learners to analyze problems presented in authentic cases, craft inferences based on information provided, and make decisions to simulate real-world professional context. Learn more about ways to apply CBL in your program on page 84 of the toolkit.

Tip: When creating cases, authenticity is best achieved by staying true to a real-world example: include the main

character with a problem that needs to be solved, describe the problem, and provide supporting data that will lead learners to ask questions.

This toolkit may be used, distributed, or presented for non-promotional educational purposes with attribution. Contact [info@accme.org](mailto:info@accme.org) with questions on reproduction or use.

Stay tuned for more information throughout the year on how to leverage the toolkit for your needs. [ACCME Academy](#) will offer courses for the CE community that explore strategies and best practices outlined in the toolkit.

## Save the Date for the ACCME 2023 Meeting

Mark your calendars for the in-person-only ACCME 2023 Meeting on May 16-18, 2023 at the Sheraton Grand Chicago. View a recap of the ACCME 2022 Meeting [here](#).

Help shape #ACCME2023 through our Call for Proposals! We are soliciting three types of proposal submissions, outlined [here](#). You are welcome to submit more than one proposal.

Visit [www.accmemeeting.org](http://www.accmemeeting.org) for details and guidelines for submission. The deadline for submissions is 11:59 PM CT on Friday, October 28, 2022.

# Using our Strength in Numbers

By Ginny Jacobs, AXDEV Group Inc.



We often hear the phrase “there is strength in numbers” and that is the basis for the regular SACME Northeastern Region Coffee Chat, which is but one example of the regional meetings that are routinely hosted for SACME members. After a lighter schedule for the summer, the Northeastern group, chaired by Julie White, is now back to a bi-weekly arrangement with a gathering every other Friday morning.

This meeting provides an exceptional opportunity for CPD professionals to engage in informal discussion (in a safe environment) around topics of interest and concern. It is an open meeting and individuals may submit questions or topics in advance of the call, if they wish. Everyone is encouraged to actively participate in the call which makes for a beneficial exchange of experience and ideas. In the most-recent discussion on Friday, 09/16/22, the 17 members on the Zoom call addressed several topics related to: joint accreditation, staff roles, funding structures, and exhibit practices/policies.

Not surprisingly, the topic of Joint Accreditation (JA) has drawn an increased level of interest over the past year, as many providers have recognized the value of a more streamlined process of granting credit for learners across multiple professions (i.e., members of the care team). The providers on the Northeastern Region call are at various stages of the Joint Accreditation process - some are well-established JA providers up for renewal, others are preparing for the initial application, while others are just beginning their JA journey. Friday’s group engaged in a hearty discussion focused on an exchange of lessons learned and ideas for advancing their JA efforts.

In the busy world of CPD, the “strength in numbers” concept comes to life when you remember you are not alone and there is a good likelihood that we can all benefit from sharing our collective experience as CPD colleagues. That type of sharing and learning is the basis for the regional meetings. We invite you to be sure to take advantage of that member-related benefit.

# The Central Region Coffee Chat Experience

By Laura Worrall, Southern Illinois University School of Medicine

SACME virtual coffee chats offer members an opportunity to connect with fellow CPD professionals and discuss issues of current importance, ask questions about CPD practice, and get feedback on questions or issues that they face.

They are also fertile ground for taking the pulse of members and identifying what's important to them in their professional environment. To that end, Laura Worrall, the SACME representative for the central region who runs coffee chats for members, conducted a survey of attendees to discern their interests and identify topics that are important to them. Here's what she found.

Meeting colleagues and sharing ideas on specific practices top the list of benefits to participation. Another significant benefit identified is the ability to get feedback on ideas for process implementation, problem-solving around specific themes. Networking is always valuable but participants seemed most appreciative of being able to gather input on specific issues of concern, and I think we can all relate to the simple relief provided by the understanding that we aren't alone in the challenges we face – it's not you *or* me (it's them ☺).

Just like the CPD world itself, the topics of interest are wide-ranging. Trends in evaluation, specific CME and MOC requirements by state (e.g. opioid education), the ABIM portfolio program, and advances and innovation in design and delivery of education, were among the broad array of topics of interest. As always, the nuts and bolts of accreditation questions, such as meeting requirements for enduring materials, communicating requirements to clients, and handling relationships with industry are on members' minds. When it comes to professional development interests, credentialing, innovation, and improving overall program efficiency also surfaced.

One interesting offering – *when to offer accreditation for a meeting* – struck a chord with me. While additional detail isn't provided, this one might be interpreted as how to handle clients who routinely fail to adhere to the processes and procedures required by the ACCME, one that will likely resonate with a few of us.

When asked if they would prefer an informal group chat or a format that included guest speakers, the group largely leaned towards mix-and-match: having a guest speaker for part of the hour and reverting to an informal conversation around issues of current interest for the remainder.

Time, that infinitely precious resource, proved to be the largest barrier to participation. Perhaps some of our members might have some ideas on mitigating that problem – perhaps record and publish notes, provide highlights on collaborative areas of the SACME website, examine the problem within the context of our nascent technology enhanced CPD committee (see elsewhere in this publication for opportunities to participate). Jump in, provide some feedback, and share your ideas.

If you're interested in attending, [find a coffee chat for your region](#).





# WELCOME

## New Member Committee Report

By Natalie Sanfratello, Boston University School of Medicine

Since I have just recently taken on the mantle of Chair of the Membership Committee, I feel like a novice in delivering a report on our activities, but what I can do is give you a summary of what we do and what's been happening in our little corner of SACME over the past few months. After a brief hiatus, the Membership Committee recently reconvened to take stock and set priorities for the next year.

Our first order of business was to figure out our schedule. Going forward, we'll meet monthly for a period of time to push some new initiatives (on the 2<sup>nd</sup> Thursday of every month from 2-3 pm EDT; feel free to [contact me directly](#) or email [info@sacme.org](mailto:info@sacme.org) if you're interested in participating, or would just like to listen in). Thereafter we may adjust our cadence to meet every two months. Our primary charge is to review applications from prospective members to determine eligibility and forward recommendations to the board. We typically conduct reviews asynchronously and then meet to discuss any issues that a committee member wants to raise before forwarding those applications along.

And what issues would be raised, you might ask? Well that's where we circle back around to our new initiatives.

SACME leadership has expressed an interest in further defining membership eligibility in SACME related to the perspectives a new member might bring in, and contributions they might be able to make. And so our committee has provided input on how we might broadly define what constitutes the values of a SACME member, and how we might evaluate member fit based on some identified measures. The goal is not to measure potential members against a set of criteria, but to understand our own values, structure, and intentions around accepting new members. The SACME leadership has been working on the membership eligibility guidance, and they presented it to the committee at our last meeting for feedback.

A second initiative we've implemented is a drive for new members. Our committee has identified medical schools with CME and professional education units who do not have a current member in SACME, and we have reached out to gauge interest in joining. Specifically, committee members have reached out to those institutions with whom they have prior relationships, and we have divvied up the remaining schools based on geographical region. And here we'd like to recognize and welcome our new members in 2022:

*continued on page 16*

First Name	Last Name	Organization
Rose	Desilets	Mass General Brigham, Somerville, MA
Carlo	Hojilla	University of Toronto, Toronto, Ontario
Berenice	Correa	Loyola University Chicago, Maywood, IL
Jennifer	Luhrs	University of Tennessee Graduate School of Medicine, Knoxville, TN
Kimberly	Templeton	University of Kansas Medical Center, Kansas City, KS
Reid	Barker	Noorda College of Osteopathic Medicine, Provo, Utah
Debra	Hastings	Dartmouth Health, Lebanon, NH
Judith	Langhans	Dartmouth Hitchcock Medical Center, Lebanon, NH
Nicole	Pearce	Obesity Canada, Edmonton, AB
Jonathan	Rodriguez	Loyola University Chicago, Maywood, IL
Alice	Kam	UHN, Toronto, Ontario
Donna	Dougherty	East Tennessee State University, Johnson City, TN
Tania	Noreen	Shifa International Hospitals Ltd, Islamabad, Pakistan
Mary Beth	Ebersol	University of Rochester School of Medicine & Dentistry, Rochester, NY
Laudy	Mattar	WCM-Q, Doha, Qatar
Sherry	Fischer	American College of Surgeons, Naperville, IL
Rebecca	Stachurski	University of Kentucky, Lexington, KY
Maria	Steinert	The Medical College of Wisconsin, Milwaukee, WI
Leonora	Lalla	The College of Family Physicians of Canada, Mississauga, ON
Kathleen	Snyder	Magis Learning Partners, Hinsdale, IL
Jackie	Capazola	USF Health, Tampa, FL
Robert	McCarron	UCI School of Medicine, Irvine, CA
Richard	Mimeault	Canadian Medical Protective Association, Ottawa, ON
Brittany	Taylor	UT Health Science Center, San Antonio, TX

Speaking of regional representation, historically any of our SACME Regional Representatives' approach to their responsibilities has evolved fairly independently, frequently based on any information, tips, and tricks handed off to them by the previous representative. This has its benefits and drawbacks, so a third initiative we've undertaken is to determine what types of activities might be standardized for Regional Representatives, what common expectations might be set, and what types of activities would be better left to their own discernment of regional interests and preferences. We hope to be able to create some guide posts for specific tasks across all regions while allowing space to create personalized or customized approaches and communities of practice as well.

Finally, we're also reviewing the member application form to ensure we can fully understand applicants' motivation to join our society without overburdening or intimidating them in the process. So, with the help of the board, we've set about streamlining the application with-

out losing any of the value it provides in gauging member fit.

And so there you have it. A lot going on, and you'll likely see some announcements on changes to our baseline activities while we continue to grow as both a society and a committee (don't forget to [email me if you're interested](#) ☺), create connections between our members, and support them in their professional growth.

# Journal of Continuing Education in the Health Professions – Call for Papers

The Society for Continuing Medical Education (SACME) is inviting authors for a supplement issue to the Journal of Continuing Education in Health Professions (JCEHP). The supplement will focus on productive disruption – challenging our existing assumptions and paradigms of continuing professional development to forge new paths for emerging frameworks, philosophies, and theoretical insights that can be applied to our education efforts. The deadline for manuscript submission is February 28<sup>th</sup>, 2023. For more information, [please click here](#).



## Manning Award: Call for Proposals

By Morag Paton, University of Toronto

The Society for Continuing Medical Education (SACME) is announcing the call for proposals for the Phil R. Manning Research Award in Continuing Professional Development. Funding up to \$50,000 (USD) is available over two years for projects that support scientific research for the advancement of any of the following fields: Continuing Medical Education, Continuing Professional Development, Interprofessional Education, Faculty Development, Patient Safety, Knowledge Translation, and/or Quality Improvement. There is a two-step application process. Letters of intent are due December 12, 2022. After an initial review process, selected applicants will be invited to submit a full proposal due April 17, 2023. For more information, application criteria, and submission instructions, please go to: [https://sacme.org/SACME\\_Grants](https://sacme.org/SACME_Grants)

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