# Accredited CME Delivers



Accredited continuing medical education (CME) plays an invaluable role helping physicians and healthcare professionals improve patient care.

#### The evidence is in. Accredited CME:

#### Improves patient safety.

CME has been shown to be one of the most effective methods for improving physician performance.<sup>1</sup>

Protects physician learners.

Commercial influence in medical

education, ensuring it is accurate

and based on best practices.8,9

education puts learners at

protects the integrity and

independence of medical

increased risk.<sup>7</sup> Accreditation

#### Controls spending.

Unnecessary medical procedures, prescriptions, and hospital readmissions are averted.<sup>2,3</sup>

#### Uses teams to improve care.

Interprofessional teams are empowered to work more effectively together to achieve their organization's quality improvement and strategic goals.<sup>10</sup>

## Increases physician recruitment and retention.

CME has been linked to a decrease in physician burnout and turnover.<sup>4,5,6</sup>

#### Expands preventative care.

Accredited CME has a proven track record of life-saving interventions. It has been linked to increases in stroke identification, timeliness of care, cancer screenings, pediatric immunizations, and more. 11,12

**For physicians,** accredited CME can improve performance by focusing on the unique needs of individual learners.

*For organizations*, it can be a catalyst for change, providing practical solutions to many of their most pressing problems.

For references, see page 2.

For organizations looking to innovate, investing in accredited CME can provide a remarkably cost-effective solution. CME professionals know how to improve performance, eliminate waste, and inspire and reward valued employees. CME is designed to plan, assess, and create change.<sup>13</sup>

Engagement and participation in CME is at record levels, with roughly 230,000 accredited educational activities and over 21 million physician interactions reported in 2022.<sup>14</sup>

Organizations that invest in accredited CME can expect a meaningful return on their investment—it makes change possible for physicians, teams, and our larger healthcare system.

### References

<sup>1</sup>Cervero, Ronald, and Julie Gaines. "The Impact of CME on Physician Performance and Patient Outcomes: An Updated Synthesis of Systematic Reviews." *Journal of Continuing Education in the Health Professions 35*, no. 2 (2015): 131-138.

<sup>2</sup>Cook, David A., Chistopher R. Stephenson, John M. Wilkinson, Stephen Maloney, and Jonathan Foo. "Cost-effectiveness and Economic Benefit of Continuous Professional Development for Drug Prescribing: A Systematic Review." *JAMA Network Open* (2022).

<sup>3</sup>Decreases in patient readmissions were reported by ACCME-accredited providers who achieved Accreditation with Commendation in July 2021-March 2022.

<sup>4</sup>Griebenow, Reinhard, Henrik Hermann, Michael Smith, Mohamed Bassiony, Arcadi Gual, Philip K. Li, Essam Elsayed, Robert D. Schaefer, Siham A. Sinani, and Graham T. McMahon. "Continuing Education As a Contributor to Mitigating Physician Burnout." *Journal of CME 12*, no. 1 (2023).

<sup>5</sup>McMahon, Graham T. "The Leadership Case for Investing in Continuing Professional Development." *Academic Medicine* 92, no. 8 (2017): 1075-1077.

<sup>6</sup>National Academy of Medicine. "National Plan for Health Workforce Well-Being." The National Academies Press (2022): 64.

<sup>7</sup>Marks, Jonathan H. "Lessons from Corporate Influence in the Opioid Epidemic: Toward a Norm of Separation." *Journal of Bioethical Inquiry 17*, (2019): 173–189.

<sup>8</sup>Accreditation Council for Continuing Medical Education. "<u>Standard 2: Prevent Commercial Bias and Marketing in Accredited</u> Continuing Education." *Standards for Integrity and Independence in Accredited Continuing Education.* 

<sup>9</sup>Accreditation Council for Continuing Medical Education. "<u>Standard 1: Ensure Content is Valid.</u>" *Standards for Integrity and Independence in Accredited Continuing Education*.

<sup>10</sup>Reeves, Scott, Simon Fletcher, Hugh Barr, Ivan Birch, Sylvian Boet, Nigel Davies, Angus McFadyen, Josetta Rivera, and Simon Kitto. "A BEME Systematic Review of the Effects of Interprofessional Education: BEM Guide No. 39." *Medical Teacher* 38, no. 7 (2016): 656-668.

<sup>11</sup>ACCME-accredited providers who achieved Accreditation with Commendation in July 2021-March 2022 reported success in increasing cancer screenings, pediatric immunizations, vaccinations, stroke identification and more. They also reported decreased mortality rates through smoking interventions and alternatives to opioid prescriptions.

<sup>12</sup>The Texas Medical Association accredited provider Gulf Coast AHEC reported using targeted accredited CME to reduce the occurrence of patient sepsis cases in their state.

<sup>13</sup>Moore, Donald E. Jr, Kathy Chappell, Lawrence Sherman, and Mathena Vinayaga-Pavan. "A Conceptual Framework for Planning and Assessing Learning in Continuing Education Activities Designed for Clinicians in One Profession and/or Clinical Teams." *Medical Teacher*, (2018). <a href="https://www.tandfonline.com/doi/full/10.1080/0142159X.2018.1483578">https://www.tandfonline.com/doi/full/10.1080/0142159X.2018.1483578</a>.

<sup>14</sup>Accreditation Council for Continuing Medical Education. <u>ACCME Data Report: Renewal and Growth in Accredited Continuing Education – 2022</u>.