

The Accreditation Council on Continuing Medical Education

How do providers use non-educational or adjunctive strategies to creatively enhance change beyond CME activities?

The literature shows that educationalists, educational systems, education itself, can change what people know and what people want to do. Education enables people to do something differently. When those individuals are predisposed to learn, the likelihood of them learning and changing their practice is much higher.

The literature also shows that reminders as an adjunct to learning, changes and maintains the change in practice. ACCME recognized that when it was revising its Accreditation Criteria and put in C17 as a requirement, as an expectation that providers would be thinking about this and putting into systems that weren't entirely educational, that weren't another lecture, that weren't necessarily a handout with the same material, but something that was different.

And the most obvious is a mailing after, that reminds people or asks them: Have you changed your practice? Are you doing what it is that you promised to do? The other kind of thing is a web-based or computer-based reminder, where an icon pops up and says: It's time for you to renew your information or use that which you were taught.

And ACCME believes that the creativity and innovation of the accredited provider needs to come to play here and to find many, many ways to reinforce what it is that you've taught and to remind people about what it is that they need to do in practice.

What are some examples of non-educational strategies as mentioned in Criterion 17?

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Examples of a "non-educational strategy to enhance or facilitate change as an adjunct to activities or educational interventions" would be, 1) implementing a mechanism to send reminders to participants following CME activities (e.g., "Don't forget to..." or "Have you incorporated...?"), or 2) working with others to facilitate a peer to peer feedback system to reinforce new practices, or 3) incorporating new questions about the new practices into patient satisfaction questionnaires. These types of strategies assist in reinforcing the message of the educational event as well as facilitating changes in behavior.