

Needs Assessment and Practice Gaps

The goals of continuing medical education have changed during the past few years. CME is now based on the concepts of quality improvement in order to achieve and maintain physician competence and performance. The end result of CME is the improvement in patient health status.

Both individual educational activities (e.g., conferences) and series activities (e.g., grand rounds) are designed around identified practice gaps. The term, professional practice gap, is defined as the difference between what a physician currently knows and is doing and what he or she should know and do.

Identifying professional practice gaps is a straightforward process, utilizing the following questions:

- What areas in practice do you and your colleagues find challenging? (examples include: difficult-to-manage or non-resolvable cases; prevalent public health problems; lifestyle-related health problems; patient safety concerns; limitations or obstacles occurring in the healthcare system)
- What factors contribute to the problem?
- What educational interventions are needed to change current behavior to 'best practices' behavior? (or what does the target audience need to do differently in order to improve practice?)
- What is the best format for teaching and learning the concepts to be presented? (examples include: case presentation and discussion, demonstration, expert panel, lecture and discussion, moderated audience discussion, problem analysis and application to practice, question and answer session, role play, simulation, self-directed learning, skill development, or small group discussion)
- What additional educational or non-educational strategies must be incorporated in order for the target audience to achieve 'best practice' behavior?

Sample Gap Statements

Gap statements should be two to three sentences and state two important facts: 1) current physician behavior; and 2) desirable physician behavior. The following examples are taken from the gap statement section on previous activity planning forms:

- As the body of knowledge in pediatrics grows and the time commitments of pediatricians become greater, it is becoming increasingly difficult for pediatricians to have time to assimilate new information. This series will address common pediatric problems and provide updates about standards of care in order to reflect the most current evidence-based knowledge and guidelines to improve pediatricians' competence. It will also bring educational opportunities to the general pediatricians, the pediatric specialists, and other members of the healthcare team regarding various aspects of general and specialized pediatric care resulting in our pediatricians synthesizing new medical information for use in their practices to be able to provide optimal care of their patients.
- This case conference is designed to review challenging cases - especially those with negative or poor outcomes in patients with complex and multiple health problems, perform analyses of care services delivered, identify gaps in clinical practice, increase knowledge and establish more effective treatment plans to bring about improvements in patient outcomes. By fully examining the patients' related health factors, diseases, disorders, and the sequence of events leading up to each case, the participants can develop treatment strategies that will result in improvements in patient outcomes.
- Currently, many primary care physicians, general pediatricians, and family practice providers do not have the knowledge or tools to confidently assess, diagnose, treat, and manage children with autism spectrum disorders. With a discrepancy between the population of children within the Autism Spectrum and the number of professionals available to help them and their families, primary care providers, nurses, and allied professional are increasingly being charged to provide the basic tasks of early identification, early intervention, and coordination of care for these children. To achieve quality of care and confidence in taking on these tasks, general practitioners need to be equipped to independently make developmental diagnoses across the spectrum and continuum of developmental disabilities rather than waiting for an available developmental-behavioral pediatrics consultation.
- Effective management of subarachnoid hemorrhage (SAH) is critical in pre-hospital, hospital, and post-hospital care. TTUHSC physicians in critical care, emergency medicine, neurology, psychiatry, anesthesiology, surgery, and neurosurgery, need continuous updates on current guidelines in the identification, treatment and management of SAH. Interdisciplinary teams are responsible for treating patients with SAH in hospitals. According to observations from hospital leaders, physicians and residents need to improve their skills in patient transport, diagnosis, ER care, monitoring, and management. Improved management skills will result in mortality rate reductions.
- Clinicians experience feelings of being ineffectual and unmotivated in clinical practice due to every day distress relating to ethical dilemmas, quality of care guidelines, resource allocations and administrative pressures. Issues like mechanizing medicine with inefficient EMR, government and administrative constraints, professional burnout, complicated cases as well as personal biases can create situations that add to the feelings of helplessness many clinicians feel. This session is designed to help clinicians conceptualize these problems and provide ideas for effective strategies for managing difficult ethical situations.
- Ethical challenges in medicine are not simple and often require a great deal of thought to manage appropriately. A solid knowledge of medical ethics and the practical application of clinical ethical reasoning skills are essential components of a physician's skills. This series is designed to develop a greater awareness among participants of how to recognize, analyze, and respond to situations with ethical challenges.
- The field of pain management is complex and challenging for the physician. In addition to numerous treatment methodologies to choose from, multiple causative factors, co-morbid conditions, psychological disorders, high risk behaviors, opioid abuse, controlled substance laws, and ethical dilemmas add to the complexity of diagnosis and management of pain. Through increased knowledge about and competence in managing complex cases, physicians will choose effective treatment plans to improve patient outcomes.