

## Continuing Medical Education

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COLLEGE  
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## Evaluating Your CME Activity

The Accreditation Council for Continuing Medical Education (ACCME) has a very clear expectation for CME evaluation. You and we must:

*Evaluate the effectiveness of CME activities in meeting identified educational needs and evaluate the effectiveness of (the) overall CME program and make improvements to the program. (Elements 2.4, 2.5)*

**You should ask, “Did we solve (or improve) the problems we identified when we designed our activity?”**

Our requirement is that you assess the outcomes of your activity and, if you plan to repeat the activity, that you use this assessment to improve the next version. We require that you describe your assessment to us as part of the CME sponsorship approval process. If you are developing an activity that we have approved previously, we also expect to see evidence that you have used your previous assessment to plan the current activity.

How can you do this? At a minimum, you (and we) will want to know that:

- Your learners participated in the activity.
- They enjoyed the activity.
- They perceived that the activity had educational benefit.
- They did not detect any bias in the activity.

Attachment A is a basic evaluation form that you can adapt to your event. You can distribute this in paper or electronically.

However, this approach is the bare minimum. We hope you will develop additional objective measures of learners’ knowledge/ competence, performance, or patient outcomes that can be attributed to your educational intervention. In the end, you and we will want to know if your activity affected these measures and, if you plan to repeat your activity, how it could be improved.

### Looking for Change

Ideally, you would like to show a change in your learners that leads to a change in health outcomes, but this can be hard to accomplish in most CME settings. What types of change can CME developers measure if they cannot assess actual learner behaviors and health outcomes?

- They can measure knowledge and attitudes via pretests and posttests.
- They can measure clinical decision-making via pre/post vignettes and simulations (Peabody, 2004).
- They can measure likelihood to perform behaviors via pre/post surveys.

What if you have a large meeting where a pre/posttest approach is not feasible? If you have reliable survey instruments that provide external benchmarks for the subjects in which you are interested, you can use these instruments. For example, there are validated and reliable survey instruments to measure physician knowledge, beliefs, and self-reported behaviors in managing domestic violence (Short, 2006), chronic pain (Harris, 2008), and substance abuse (Harris, 2011). Learner scores on these instruments in either a pre or posttest setting can be compared to average scores for other groups of physicians with varying levels of expertise.

Another approach is the retrospective pretest, where questions ask about behaviors or attitudes that might have been positively affected by the CME program, for example, “I would rate my ability/likelihood to \_\_\_\_ before this program as \_\_\_\_ (ordinal choice, such as a 1-5 scale)” and “I would rate my ability/likelihood to \_\_\_\_ after this program as \_\_\_\_ (ordinal choice, such as a 1-5 scale)” (Campbell, 1963). This is a reasonable approach where the typical pretest is not feasible.

A third approach is measuring intention to change, “How likely are you to \_\_\_\_\_ having completed this educational program” (ordinal choice, such as a “very unlikely” to “very likely”)? This approach is widely used for assessing CME programs, but we feel it is subject to even more bias than the retrospective pretest, so it is not one of our preferred approaches.

### Bibliography

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## Attachment A – Sample CME Activity Evaluation Form

**You should adapt this form to meet the needs of your activity.  
This is a minimum evaluation. We encourage you to do more.**

Evaluation Items	Poor	Neutral	Neutral	Neutral	Excellent
1.) How would you rate the overall educational quality of this activity?	1	2	3	4	5
2.) Relative to where you were prior to participating in this activity, please rate how well this activity has affected your ability to:	<b>Made It Much Worse</b>		<b>No Change</b>		<b>Made It Much Better</b>
[Learning Objective 1]	1	2	3	4	5
[Learning Objective 2]	1	2	3	4	5
[Learning Objective 3]	1	2	3	4	5
[Learning Objective 4, etc.]	1	2	3	4	5
3.) Please provide a brief answer to the following question in the space to the right:  <i>As a result of what I learned from my participation in this activity, I intend to make the following practice/performance changes that I believe will result in more positive patient outcomes:</i>					
4a.) Did you feel this activity contained biased information in favor of, or against any pharmaceutical company's or medical device manufacturer's therapeutic agents, devices, or services?  <div style="text-align: center;">             Yes <input type="checkbox"/>      No <input type="checkbox"/> </div>					
4b.) If yes, please describe:  <div style="height: 100px;"></div>					
5.) Please share any other comments or recommendations, including improvements for the current activity or topics for future educational events:					