Writing a Practice Gap Statement, Educational Needs Development Description, and Learning Objectives

The Accreditation Council for Continuing Medical Education (ACCME) requires that all accredited providers:

“...incorporate into CME activities the educational needs (knowledge, competence, or performance) that underlie the professional practice gaps of their own learners.”

This is one of the basic criteria (Criterion #2) underlying ACCME accreditation.

When you develop an educational activity or event that you wish us to sponsor for CME credit, we look to you to describe and to justify:

1. The overall reason for developing your activity, which should be presented as a professional practice gap that your activity will seek to close,
2. The educational needs that underlie this gap, which will determine the elements of your activity, and
3. The changes you expect to see in learners’ competence, performance, or patient outcomes as a result of your activity (the learning objectives).

The more precisely you describe and support your professional practice gap, the way you develop your educational needs, and the specific changes you expect to accomplish with your activity, the easier it is for us to evaluate your proposal. Read on to see suggestions for how to present your information.

What are practice gaps and how do I write practice gap statements?
How should I develop and explain my educational needs?
What are you expecting for learning objectives?
What do you expect for Grand Rounds and similar activities where gaps, needs, and objectives change?

Practice Gaps

A professional practice gap is the difference between a desirable or achievable state of practice and current reality. For example, “Current guidelines recommend X, but this is not commonly achieved in practice,” describes a practice gap. The practice gap under consideration could be a gap in clinical practice, but it could also be a gap in administrative practice or research practice, any activity that a physician uses to provide services for patients, the public, or the profession.

We are looking for a practice gap statement (or several, if necessary) that defines the overall reason for your activity. You can say that “Physicians lack adequate knowledge of new techniques in minimally invasive surgery,” or “Patients treated in our facility have an unusually high rate of MRSA infection.” This statement should be followed by an explicit “gap closure” statement, such as, “This activity will seek to
close gaps in physician performance in minimally invasive surgery,” or “This activity will seek to improve patient outcomes by reducing rates of hospital-acquired MRSA infection.” By describing the problem and the gap you hope to close, you will be well-prepared to define the educational needs you intend to address.

The following are acceptable and unacceptable practice gap statements.

**Acceptable**

- “Evidence has shown the traditional open carpal tunnel syndrome (CTS) release may have less surgical risks than an endoscopic approach. This activity will help close gaps in physician knowledge of complication rates in CTS release surgery.”

- “Physicians need to understand and manage environmental changes in order to deliver optimal patient care. Practicing pathologists struggle with managing environmental change and this meeting will seek to improve their ability to recognize and manage environmental change.”

**Unacceptable**

- “The goal of the program is to address the medical, surgical, and technologic advances that affect each area in otolaryngology to keep physicians on the cutting edge.” (Comment: while this may describe a goal for the meeting, it does not define the reason for the meeting, i.e., the gap that will be closed)

- “These sessions will teach skills needed to adapt to the rapid changes in today's pathology environment, including change management, assessment of emotional quotient in hiring, and building resiliency in order to adapt to change.” (Comment: we are not looking for a description of what will be accomplished, but why it will be accomplished.)

Planners of CME events containing multiple presentations on multiple topics sometimes struggle to provide unifying, “umbrella” practice gap and needs assessment statements on their application. For guidance in these situations, you may wish to view our document entitled, **Examples of “Umbrella” Practice Gap and Needs Assessment Statements**.

What level of justification and evidence do you need for your gap? Some professional practice gaps are readily apparent and don’t need much supporting evidence. However, it will help your application if you describe why you believe there is a gap and, therefore, a reason for your activity. You can use literature reports, physician surveys, or even expert opinion, but we usually want to see some evidence to support your assertion that a practice gap exists. You may refer to this evidence later when you describe the educational needs of the learners that you will address. For example, a physician survey may indicate a need for greater knowledge of “environmental issues in pathology” as well as an interest in specific educational topics.

What if your activity has several presentations that cover multiple practice gaps? You can offer a broad practice gap description that describes the overall purpose of your activity or you can present several smaller descriptions.
The practice gap statement does not need to be lengthy, but it should contain three elements: 1) mention of a standard, 2) a statement of current practice, and 3) the type of gap (e.g., competence, performance, patient outcomes) the activity seeks to close. If you want more help on writing a gap statement, see the article, “Perspective: A Practical Approach to Defining Professional Practice Gaps for Continuing Medical Education,” (2012) by Christopher Wittich et al.* You can also visit the ACCME Website’s discussion of practice gaps.

**Educational Needs Development**

Your educational needs development statement should clarify how you developed the specific educational elements that you have proposed for CME sponsorship. If your activity is very brief, you may have already provided this information in your practice gaps statement. The gaps statement,

*Evidence has shown the traditional open carpal tunnel syndrome (CTS) release may have less surgical risks than an endoscopic approach. This activity will help close gaps in physician knowledge of complication rates in CTS release surgery.*

Clarifies the gap, differences in the surgical risk of CTS release procedures, and the educational need, improving physician knowledge of complication rates. Both were developed based on “evidence” (citing this evidence would be helpful). This statement also leads to a clear description of the measurable objectives of the activity, improving physician knowledge. Nothing more is needed here.

Many times, however, your gap statement describes a broad issue,

*Physicians need to understand and manage environmental changes...*

Your CME activity may include presentations in several areas, such as health policy, patient safety, professional development, and record-keeping, that are intended to close this gap. This would be typical in a live meeting of a day or more. In this case we ask you to describe your educational needs development process by defining and justifying the specific needs you will meet, with reference to the gap you have described and the outcomes (physician competence or performance, or patient outcomes) you seek to change. If your meeting is large, we do not expect you to justify every presentation, but we do expect you to provide evidence that your planning process developed educational elements intended to address the gap. Consider, for example, a full-day meeting intended to close gaps in pathologists’ understanding and management of environmental change. The educational needs development statement could be presented as follows:

- “We have developed several educational presentations for this meeting that are based on recent literature, and are intended to close a gap in pathologists’ understanding and management of environmental change. Recent studies, for example (Kim et al, J Am Acad Dermatol. 2012 Jul 26), suggest a need for education on improved specimen labeling protocols to enhance patient outcomes, which will be covered in the program.”

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• “We have also relied on learner feedback from previous meetings to define environmental changes of concern to pathologists. Last year 45% of those responding requested additional education on strategies for dealing with professional burnout.”

These two examples demonstrate to us that you, the activity planner, have a systematic process for defining and incorporating the educational needs of the learners into a program that addresses the professional practice gap(s).

**Learning Objectives**

After you describe the professional practice gap(s) you seek to close and the educational need(s) that you believe underlie the gap(s), we want evidence that your activity is designed to change competence, performance, or patient outcomes. Specifically, we want you to list three or more measurable objectives for your activity. If the preponderance of your activity is focused solely on changing physician knowledge, you must explain how your activity contributes to an overall effort to change learners’ competence or performance, or patient outcomes. Please note that for CME proposal purposes we do not require a description of learning objectives for each presentation in a multi-presentation activity. But, we do expect that, as part of your activity planning, you will develop specific learning objectives for each presentation.

If you are focusing on a learner attribute, such as knowledge, competence, or performance, we prefer that you set objectives that emphasize a change in behavior such as, “After completing this activity, learners will be better able to...” The list that follows should include a small number of observable and measurable behaviors that are related to the educational needs you identified.

There are numerous recommendations of verbs to use/not use when developing learning objectives, but we are not fond of this approach to developing learning objectives. Nor do we particularly like 60-year old learning taxonomies. It is certainly important to avoid vague concepts, such as “understand” when describing your learning objectives, but asking you to simply use action verbs such as “explain,” “demonstrate”, and “list” encourages you to think about knowledge attributes you can easily measure rather than important professional behaviors. Closing practice gaps usually means changing important behavior(s). Because we do not believe that an improved ability to list something is an important behavior, we suggest you not rely on generic “action verbs”, but take a minute to think about what you and your learners would hope to do better if your program is successful.

For more information on developing measurable learning objectives, please see our CME Evaluation Guide, “Evaluating Your CME Activity.”

**Grand Rounds and Other Regularly Scheduled Series**

Describing professional practice gaps and educational needs, along with learning objectives, for a regularly scheduled series (RSS), such as Grand Rounds or Tumor Board, can be difficult. Some items may not be known until just before an event occurs.

What we are seeking is a description of a broadly stated professional practice gap that will be addressed by your RSS and evidence that your planning process will incorporate educational elements intended to address the gap. We do not expect you to prepare a gap description, needs development statement,
and list of learning objectives for each RSS event as part of your application. We do expect you to communicate the most important gap(s) you plan to address over the course of the series, the major approaches you will use to define educational needs, and your broad learning objectives. However, before a specific event takes place, we will also expect you to define the learning objective for that event and communicate these objectives to learners.

Here are brief examples of practice gap statements that might be used for an RSS:

- This series seeks to close gaps in surgical knowledge and practice.
- This series seeks to address gaps in team communication and professional knowledge that arise in the management of hospitalized patients.

Here are some examples of brief educational needs development statements that are appropriate for RSS proposals:

- The Activity Director, Dr. Hughes, regularly confers with Surgery faculty and trainees to review previous evaluations, current literature, and expert opinion regarding appropriate topics for the Conference.
- The Education Director and QI Committee review recent examples of clinical adverse events and “near misses” to select cases for discussion.

Overall learning objectives might include the following:

As a result of completing this educational activity, participants will be better able to:

1. Utilize recommendations from current clinical guidelines.
2. Identify and respond to adverse events.
3. Manage common complications of surgical therapy.