



OGDEN SURGICAL-MEDICAL SOCIETY
CME Excellence Since 1946

**POB 9311
Ogden, Utah 84409
801-564-5585**

BOARD OF DIRECTORS

Chair

Marc Johnson, MD

Co-Chair

Heather Neilson, MD

Treasurer

Steve Scharmman, MD

CME Chair

Chad M. Gonzales, MD

Secretary

Bryan Campbell, MD

President

Petronella Adomako,
MD

President-Elect

Clark Madsen, MD, MS

Past-President

Michael Webb, MD

Trustee

Jason R. Hoagland, MD

Trustee

Douglas K. Anderson,
MD

Historian/Trustee

Val Johnson, MD

Members-At-Large

Frank Brown, MD
Clark Madsen, MD, MS
Scott Moore, DO
Kurt E. Rifleman, MD
Harry O. Senekjian, MD
Robert Whipple, MD

Executive Director

Teresa Puskedra
teresapuskedra@ogden
surgical.com
801-564-5585

Honoring Founders

Ezekiel R. Dumke, MD
Clark L. Rich, MD
George M. Fister, MD

*Quality Healthcare
Meetings Since 1946*

July 2, 2021

Ryan Child, CPA
Katie Gibbons, MST
Child Richard CPAs & Advisors
2490 Wall Ave. #100
Ogden, Utah 84401

Dear Ryan and Katie,

The OSMS Board of Directors initiated the following policies in 2021:

Although OSMS was awarded full accreditation for the next four years from November 30, 2020, to November 30, 2024, the Utah Medical Association (UMA) Continuing Medical Education (CME) determined that our program has several criteria that will need to be brought into compliance and addressed in a Progress Report. Therefore, this will be the third of several letters indicating policy changes to our processes.

3. Criteria 1 CME Mission Statement that includes expected results articulated in terms of competence, performance, or patient outcomes.

Current CME Mission Statement addresses the Who, What, What Price; however, the expected results for competence, performance, and/or patient outcomes is missing from the statement.

4. Criterion 11 Analysis of changes achieved in learners' competence, performance, or patient outcomes based on data and information on its programs' activities/education period.

The provider does only activity-level analysis. Ogden Surgical-Medical Society has not amalgamated the annual conference data over their entire accreditation period.

The OSMS BOD voted by email in March 2021 in favor of a separate OSMS organization policy governance mission statement and a separate CME mission statement.

The present OSMS organization policy governance statement:

Conference attendees specifically, and the local community in general, will receive a collegial, professional, and educational experience focused on healthcare and community at the greatest possible value.

1. Who – Licensed medical professionals and anyone who has interest in the subject matter presented. "Local community" and/or primary market includes people with connections to Ogden or affiliations to the Ogden area. Our secondary market includes other potentially interested parties.

2. What – A collegial, professional, and educational experience, utilizing locally, regionally, and nationally recognized speakers, that has value to all health care providers targeting an improvement in health and safety.
3. What price – The lowest possible cost.

Ogden Surgical-Medical Society's current CME Vision statement:

Vision

The Ogden Surgical-Medical Society (OSMS) is a CME (continuing medical education) community created by and for medical professionals. We provide platforms for empowering health-care professionals through education and collaboration.

Our annual conference and online CME are designed to keep the health clinician current through diverse, expert-led discussions and presentations, hands-on performance skill labs, and professional dialogue with colleagues, which improve overall competence and performance and enable improved patient care.

Purpose and Mission (C1)

Ogden Surgical-Medical Society's current CME mission statement:

OSMS Mission Statement

Purpose

The purpose of OSMS CME programs is to plan, conduct, and evaluate educational activities with emphasis on evidence-based clinical and research topics, supporting one or two medical themes of interest. Presented at the greatest possible value, the goal is to address OSMS members' current practice gaps and needs, and/or raise awareness of future trends to increase overall competencies and help improve members' performance, as well as foster professional development and encourage collegiality.

Target Audience

The activities primarily target health professionals in family medicine as well as health professionals in specialty medicine and community members interested in the activity subject matter.

Content Areas

OSMS develops the CME activity in the context of desirable physician attributes of the Accreditation Council for Graduate Medical Education Competencies (ACGME). With these competencies in mind, the needs assessment process identifies gaps (differences between current practice and best practice) in physician knowledge, competence, and/or performance. OSMS chooses activities and topics based on post-conference assessment result with the expectation of improving competence and performance. The gaps are

gathered from various sources, including but not limited to, community physician advisory sessions, physician program meetings, past conference surveys, published research, public health policy, attendees' dues envelopes with "written in" topic suggestions and medical expert dialogue.

Types of Activities

The OSMS CME live activity format is composed of several learning platforms. These include Q & A, What's New in My Specialty lectures, panels, hands-on performance skill labs, public health lectures, specialty lectures such as ABIM MOC nephrology, resident clinical research, and pre-medicine student research poster presentations, OSMS Learning Associated with Teaching CME is also available. As a result of the 2020 COVID-19 pandemic, OSMS initiated an online CME activity of medical podcasts and videos. The topics of the medical podcasts and videos are from the 2022 program meetings as well as COVID-19 topics.

Each OSMS CME activity presents scientifically rigorous and evidence-based content without commercial bias, developed independently of commercial interests; however, when applicable, a CME activity receiving ineligible company support is managed according to ACCME Standards for Integrity and Independence in Accredited Continuing Education. OSMS plans, implements, and evaluates CME activities based on principles of effective adult learning. Activities are developed to maintain a separation of promotion from education, and are designed to promote improvements in healthcare, not proprietary ineligible company interests.

Include the expected results of your CME program, articulated in terms of changes in competence, performance, or patient outcomes. (C1)

The expected results of the OSMS CME activity are increased competence and improved performance. Morning lectures consist of What's New in My Specialty sessions, which are structured to provide family medicine providers and other health care professionals with new advances and best practices that improve their current clinical knowledge and competencies. Midmorning and afternoon lectures are structured to improve competencies, and afternoon performance skill labs are structured to integrate best practice learnings with hands-on performance skill labs to improve physicians' skills. Afternoon breakout sessions also include recertification courses in ACLS, PALS, NRP, and BLS. These breakout sessions require learners to take tests prior to the actual session, as well as during the activity to attain their recertification.

All OSMS CME activities are designed to modify behavior. To gauge learners' development, post-activity daily surveys ask participating health professionals questions that include: *Participation in these courses provided tools that will enable me to (mark all that apply)...develop strategies to initiate changes in my practice, improve my current practice performance, or improve patient outcomes; and the questions: What changes will you make in your practice as a direct result of the lectures on one or two of the activity themes, what barriers do you anticipate, and were the medical sessions free from ineligible company bias?* Survey evaluations are sent two to four months after the activity to collect the data for

competence and performance results. They are asked if they made the changes they stated and if not, what barrier(s) prevented it.

Ogden Surgical-Medical Society's CME Expected Accreditation Period Results:

To facilitate the mission, the OSMS CME Program will also generate a yearly operational review plan of the CME activities results, in person and online, in order to assess the CME program results over its accreditation period. This operational plan will be prepared by the CME Executive Director in collaboration with the OSMS BOD CME committee and submitted to the OSMS BOD at the yearly retreat. This operational plan will eventually be action-orientated and include key indicators and performance targets to measure the progress of the yearly CME progress in achieving goals. The OSMS CME committee will engage in a yearly review of the strategic plan based on operational results and make the necessary adjustments.

Besides assessing learner competence and performance behavior change at the activity level through surveys and audience response, for the overall CME program to benefit its learners, OSMS will look at their program values of planning and conducting quality education, supporting a positive and interactive learner environment, sustaining strong technology/operations to allow for the achievement of qualitative goals, and fostering community collaboration.

C11: Overall Program Priorities:

1. Quality Education:

To be a regional leader in continuing professional development. OSMS designs and delivers programming that successfully promotes educational strategies and methods to improve physician competence and performance.

Objectives:

Continue to improve the competence and performance of clinicians that will ultimately result in a healthier community.

Continue to organize a regional in-person OSMS CME conference and an online CME on an annual basis.

To support the mission, OSMS will:

1. Receive full AMA accreditation approval November 2021.
2. Foster basic science and clinical-based education.

3. Apply evidence and best practices from the education and implementation sciences to develop and evaluate activities and initiatives designed to improve the skills, strategy, and performance of providers and healthcare teams.
4. Plan educational activities that are evidence-based, fair and balanced, scientifically objective, and free of commercial bias.
5. Continually advocate disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health.
6. Develop CME activities which promote professionalism that is manifested through a commitment to carry out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.
7. Provide family medicine physicians, specialty physicians, and other related health care professionals with educational activities that improve their current clinical knowledge and ability to apply that knowledge to practice (competence).
8. Encourage learners to make a commitment to change behavior or practice as a result of attending a CME activity either in competence with strategy or performance.
9. Continue to measure the attainment of the expected results of the CME Program by deploying a series of outcomes measurement options for every CME activity, including surveys and questionnaires and follow-up performance questionnaires to make sure that goals are met.
10. Expect that its learners will acquire new knowledge and improve skills to increase clinical competence and/or improve performance with the ultimate goal of improving patient care, safety, and health outcomes.
11. Develop continuing education activities which identify, respect, and care about patients' differences, values, preferences, and expressed needs.

Qualitative measurement: All of these objectives were met, with the exception of 1., from the 2017 in-person conference activity to pivoting to the online CME activity in 2020 due to COVID-19. With COVID-19, OSMS did not achieve a large number of physician competence changes as our numbers are down significantly from our in-person conference attendees.

2. Learner Environment:

To ensure regular assessment of delivered CME content and inclusion of unmet learning needs into the OSMS annual conference and online CME.

Objective: Raise awareness of future trends to increase overall competencies and help improve members' performance as well as foster professional development and encourage collegiality.

1. Create active learning environments which increase audience engagement in CME.
2. Identify multidisciplinary CME opportunities which enrich the lifelong learning capacity of learners.
3. Improve performance to facilitate lifelong learning consistent with the high ethical standards inherent in the practice of medicine (performance). Performance improvement, quality improvement, and healthcare team-based initiatives are designed to enhance the knowledge and skills of the participants, to address systemic barriers to quality and performance.
4. Provide educational interventions that modify behavior and measures those educational outcomes consistently—We ask/survey learners and in what ways the educational activity helped them to implement appropriate and evidence-based patient care strategies.
5. Utilize skill-based courses to provide hands-on skills that are signed off by physician faculty (a form of skill-based CME).
6. Identify and overcome barriers to physician change by addressing those barriers in CME content and in the use of non-educational interventions (algorithms, patient education material that the physician can provide to patients, checklists, etc.) to support the attainment of educational goals.
7. Effect improvements in system-based practice, leading to improved provider and collaborative team performance and improved physician competence.
8. Provide collaborative learning experiences that advance patient-centered practice and research through interprofessional team-based learning.
9. Promote interpersonal and communication skills which enable a clinician to establish and maintain professional relationships with patients, families, and other members of health care teams.
10. Leverage interprofessional capacities and learning resources to create highly effective, novel educational opportunities.
11. Provide “for the team, by the team” approach when developing CME.

Qualitative measurement: All of these objectives were met for the 2017 to 2020 accreditation period.

3. Technology/Operations

Continue to improve new methods of learning including: podcasts, webinars, videos, streaming and audience response systems.

Objective:

1. Ensure operations are sustainable.
2. Utilize technology to improve program visibility.
3. Continue to improve new methods of learning including: podcasts, webinars, videos, streaming and audience response systems.
4. Develop an informative, easily navigable CME website.
5. Improve the use of technology to support program delivery.
6. Improve and update the presence of OSMS on social media.

Qualitative measurement: All of these objectives were met for the 2017 to 2020 accreditation period. OSMS was able to pivot successfully to online CME due to COVID-19.

4. Community Collaboration

Objective: Foster collaboration within hospitals, clinics, and nonprofits.

1. Enhance members' practices by collaborating with other community organizations to provide timely education on the changing regulatory and practice environment.
2. Teach members about the implementation of health informatics and the use of health information in their practices to improve the health of their patients.
3. Build bridges with other stakeholders through collaboration and cooperation to address population health issues more effectively.
4. Provide collaborative learning experiences that advance patient-centered practice and research through interprofessional team-based learning.

The expected results of the OSMS CME program are:

Quantitative measure: 35 partners and sponsors for conference, to increase by 1 each year.

External collaboratives will help with our advisory committee to develop medical sessions.

OSMS added another foundation sponsor this year: Val A. & Edith D. Green Foundation, Inc.