Current and future trends in the continuing medical education landscape

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Continuing medical education (CME) plays a critical role in medical research and healthcare as it bridges the gap between academic research and clinical practice. It provides healthcare practitioners (HCPs) with well-balanced, real-world information that is disease-oriented and aligned to patient needs and global healthcare trends.\(^1,2\) Thus, it enables HCPs to improve their competency, address healthcare gaps in their field, translate innovations into practice, and enhance the quality of care patients receive.\(^3,4\) This article discusses current trends in CME content development and its dissemination as well as how it can be made more effective. It also presents industry experts’ views on CME and its future.*
The role of HCPs in CME curriculum development

In order to be effective, CME content should be designed taking into account HCPs' requirements and information-seeking behavior or preferences, patients' needs, and current healthcare challenges and demands. Over the years, the CME landscape has undergone transformations in response to these requirements, and the focus is shifting from the traditional classroom-based approach to more dynamic ways of providing CME. Efforts are being made to enhance the connection between CME content creators (i.e., researchers) and end users (i.e., HCPs) by involving the latter in the peer review of CME content.

Elaborating on this, Lewis Miller, Principal of WentzMiller Global Services, LLC., and founder of the Alliance for Continuing Education of Healthcare Professionals and the Global Alliance for Medical Education, believes that “Peer reviewers should include the recipients of the education, the audience. Expert reviewers can assess the accuracy of evidence but not necessarily its relevance to the practicing physician; that requires a panel of HCP reviewers.” And to ensure that HCPs assimilate and apply the learnings, CME should include “blended learning, learner interaction, and repetition, where more than one medium or platform is used to impart CME.” Further, Miller emphasizes the need to personalize CME content, for example, by translating it into different languages and adapting it to the sociocultural reality of HCPs to enhance their learning.

It is impossible to overlook the influence of digitization on the CME landscape. Digitization has not only enabled information providers to reach out to users in a variety of formats and channels but has also influenced the information-seeking behavior of HCPs. According to a recent study, about 70% of HCPs look for information online. Another survey revealed that when HCPs go online, they expect to find “the latest research on specific topics, new information in a disease area, and information related to a specific patient problem.” CME should incorporate these changing trends and employ digital solutions such as virtual learning environments and online courses.

Increased patient involvement in CME content creation

Patients play an important role in medical research and healthcare practice but are rarely included in CME content creation. The Accreditation Council for Continuing Medical Education states that “CME is enhanced when it incorporates the interests of those who are served by the healthcare system,” i.e., patients. The role of patients is gradually evolving—from passive recipients of healthcare to proactive contributors who help improve the robustness and relevance of medical knowledge.

Examples of patient involvement include patient peer reviews and patient inclusion in CME content creation. Karen Woolley, Global Lead, Patient Partnerships, Envision Pharma Group, feels that “The best way forward is for HCPs and patients to be true partners where both are informed, both learn from each other and shared decision-making can take place.” Karen asserts that all stakeholders in healthcare research and practice are focused on what is best for the patient. Thus, patients are a “unifying stakeholder” and “everyone needs to be on “team patient” because patients are “experts living with disease and their unique insights can enhance the real-world relevance of publications.”

The future of CME

There is an increased understanding of the fact that CME content needs to be designed by considering HCP and patient needs and current healthcare demands. This understanding has already led to greater inclusivity of HCPs and patients in the creation of CME content and is strengthening the link between medical research and its reporting (i.e., CME content) and enhancing its relevance to end users (i.e., HCPs) and recipients (i.e., patients). These trends—coupled with the fact that digital technology opens up several possibilities to reach out to and engage HCPs with the most relevant CME content based on their needs and preferences—point to a promising future where there is an improved understanding of HCP and patient needs and where a well-connected community of content creators, providers, healthcare practitioners, and patients works together as true partners with the shared goal of influencing critical healthcare outcomes.

*Note: This post is based on a whitepaper – Scholarly Publishing in the Digital Era – that presents industry experts’ views on the future of research communication, content access, and learning. The quotes used in this post have been sourced from the whitepaper.
References:


