

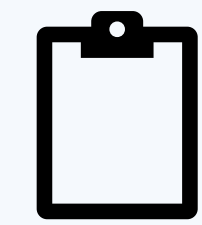
Applying Traditional CME Outcomes Models to Demonstrate the Effect of MSL Educational Efforts

CE Outcomes, LLC and Gilead Sciences

1 Background

Outcomes associated with CME are generally an expected part of an educational strategy, however, medical education efforts outside of accredited CME often lack structured outcomes planning. This study demonstrates the value of applying a traditional CME performance outcomes model within a medical scientist-led educational effort. The educational program *Simplifying Training of Providers in HCV Forums: STOP HCV Forums* were designed as small structured dinner meetings with the goal of having medical scientists help build a network of new HCV providers and connect them with HCV experts. The program provided a forum for an experienced treater to discuss novel ways to implement, improve, and simplify care in HCV screening and treatment, and for new treaters to ask questions about screening, treatment, and follow-up care.

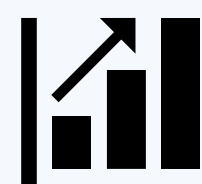
2 Methodology



Survey Instrument: A case-vignette survey was developed in alignment with the program objectives to assess the impact of the education on learners.



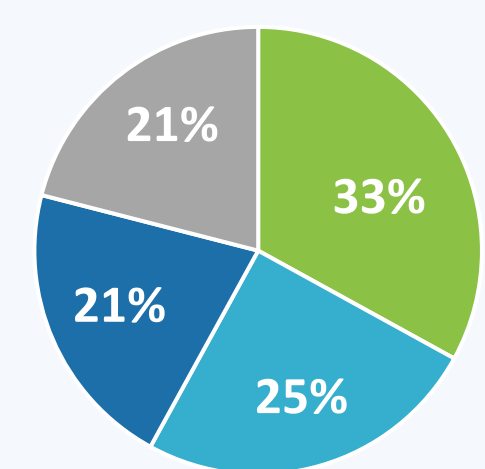
Data collection: The pre-survey was distributed to registered participants prior to the activity. The same survey was distributed at least 30 days following the education.



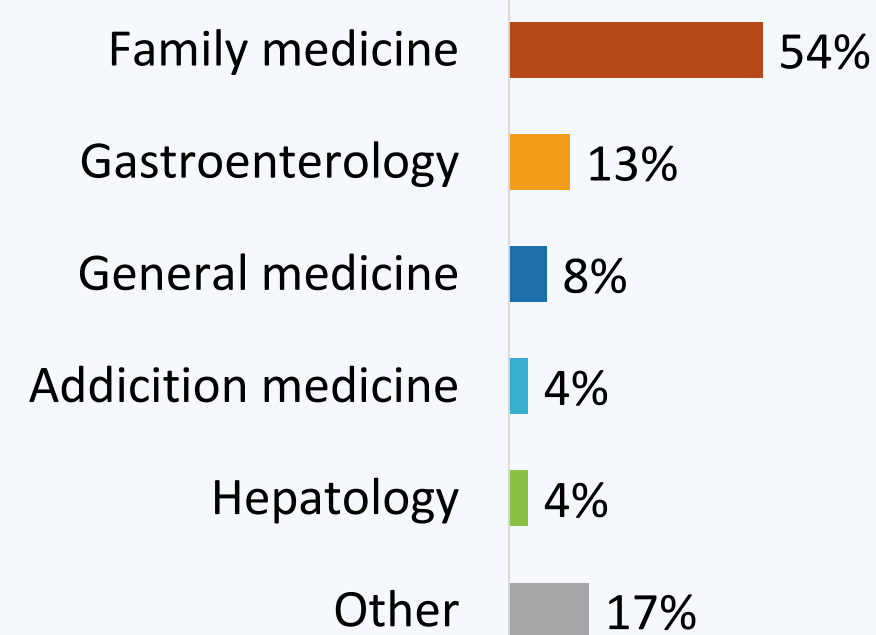
Analysis: A total of 77 pre-responses and 30 post-responses were collected. To directly assess change a sample of 24 matched pre and post responses was utilized for analysis.

3 Demographics

Clinical Role



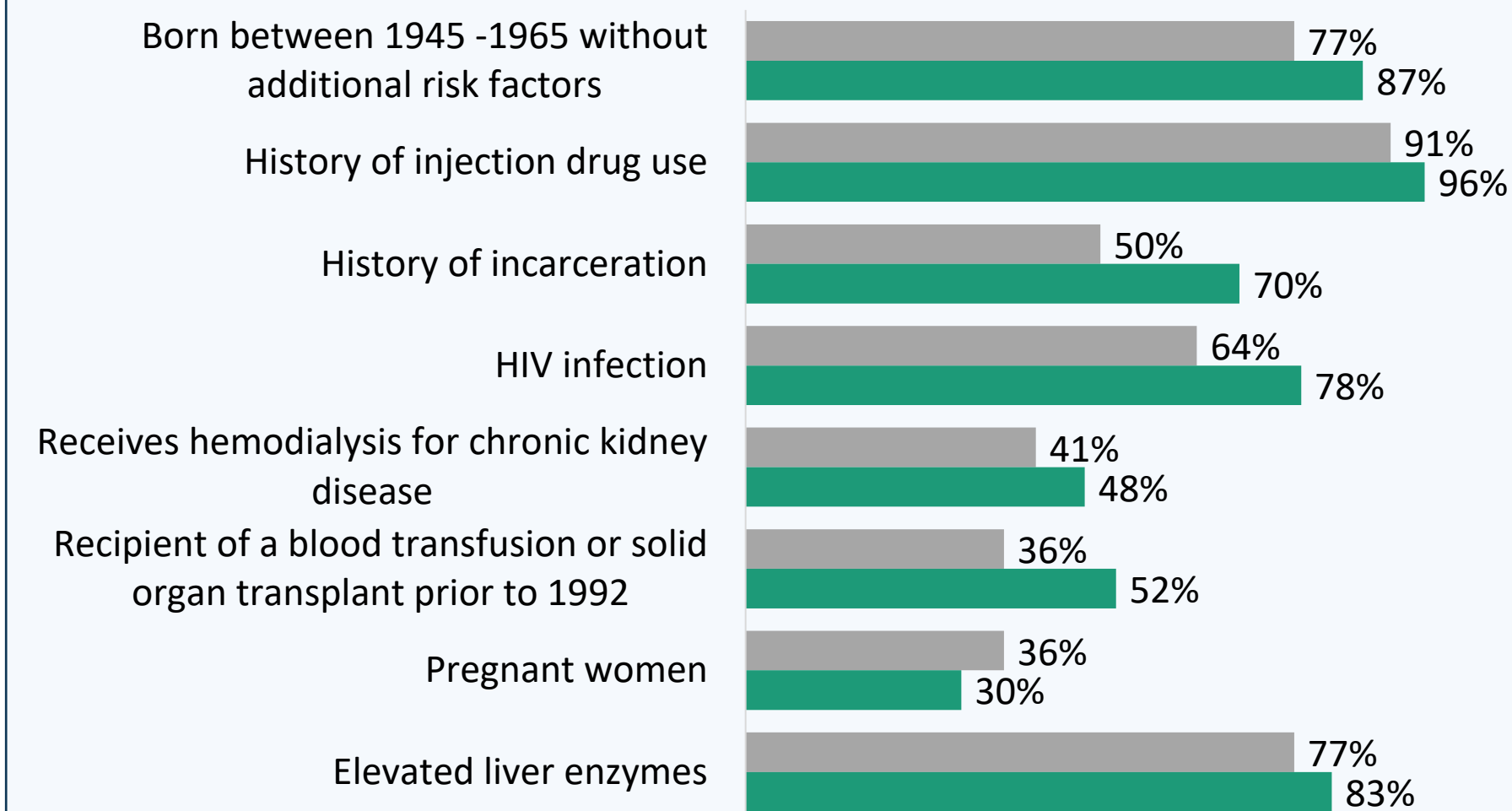
Specialty



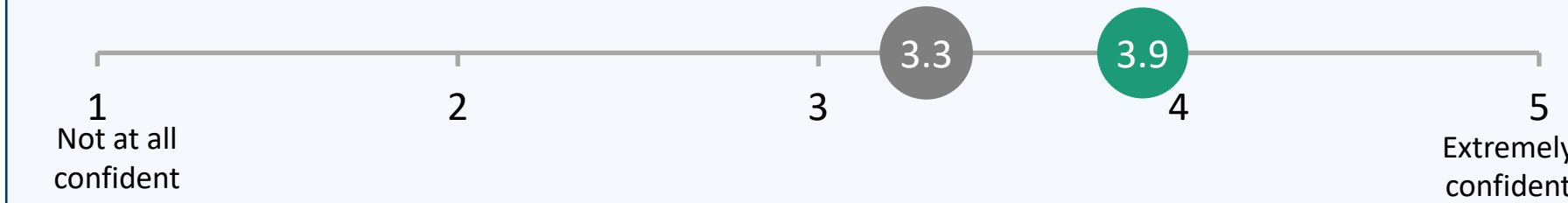
Pre-education, a mean of 41 patients per week were seen.

4 Screening for HCV

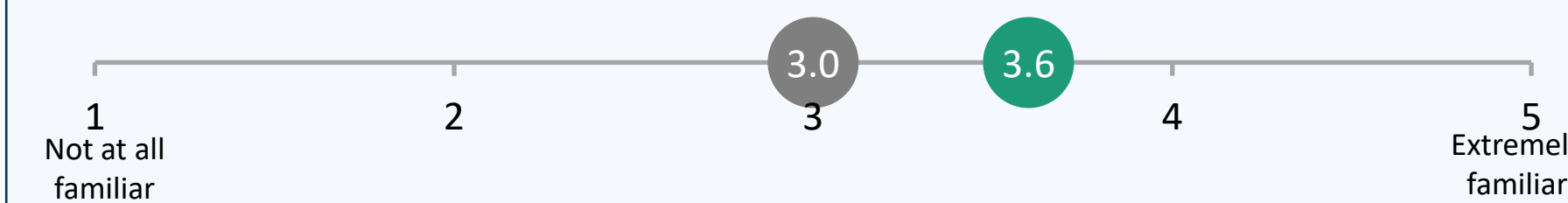
Which patient types do you routinely screen for chronic HCV infection?



How confident are you in selecting patients to screen for chronic HCV infection?



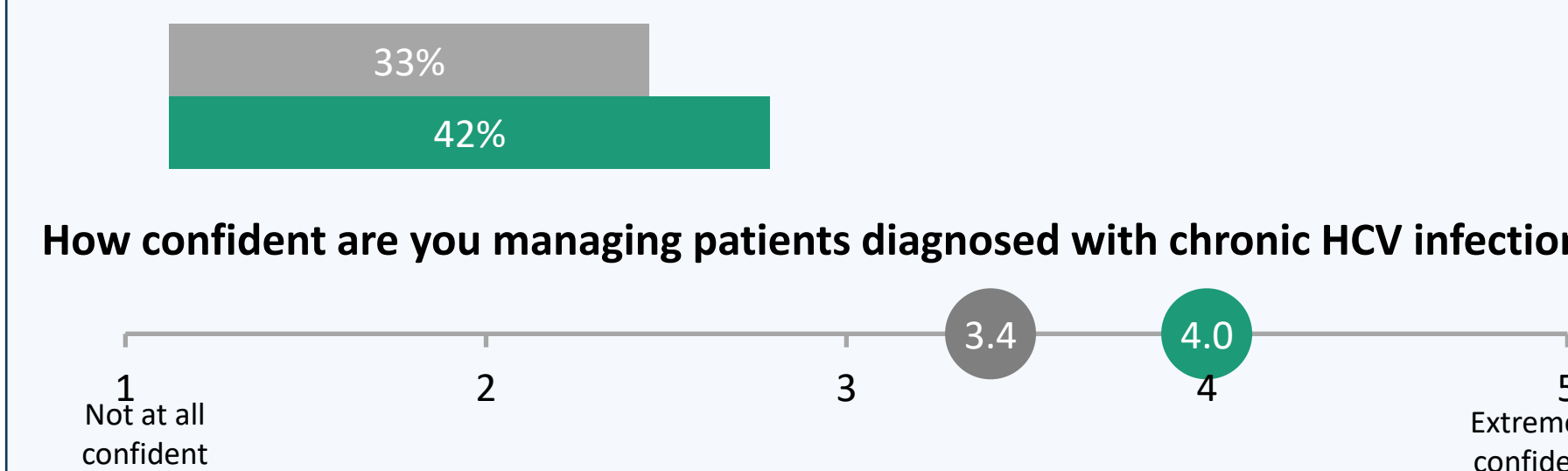
How familiar are you with guidelines for screening patients with HCV?



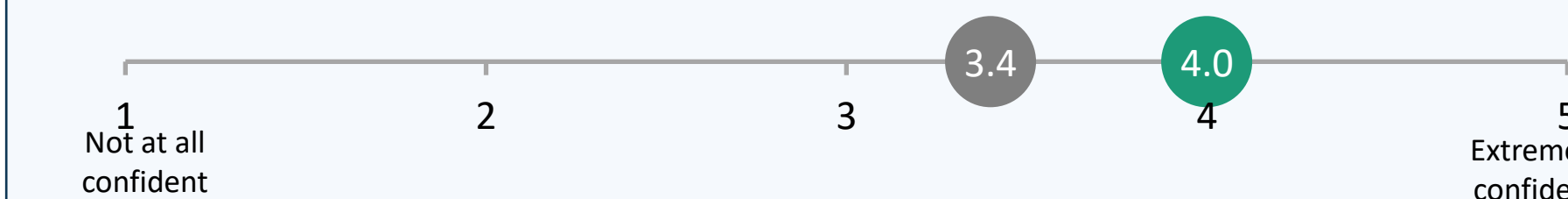
Routine screening of certain high-risk patient populations increased following education. Confidence in selecting patients and familiarity with screening guidelines also increased after receiving the education.

5 Treating Patients with HCV

Have you treated any patients for chronic HCV infection? (% Yes)



How confident are you managing patients diagnosed with chronic HCV infection?

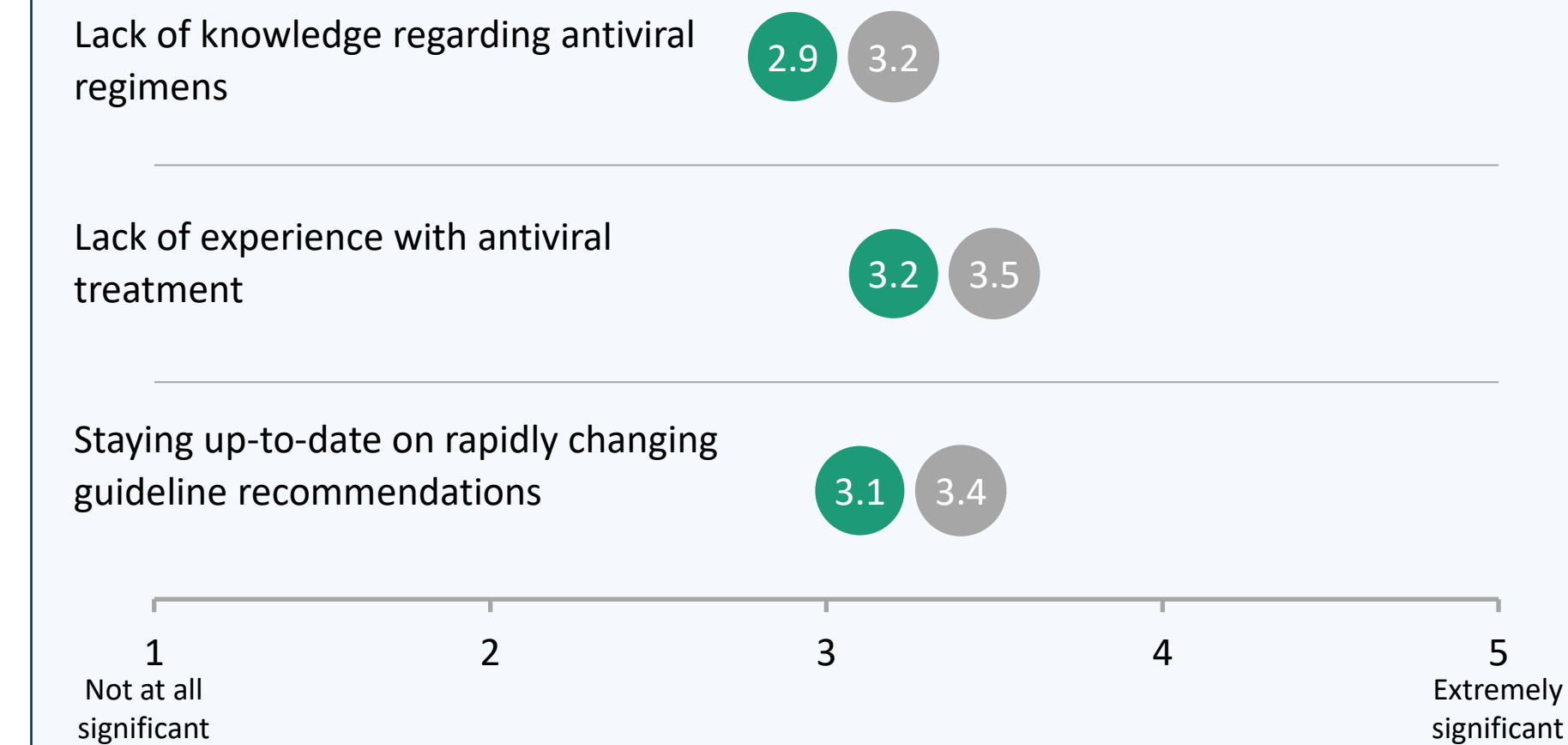


Following education, more clinicians report they have treated patients with chronic HCV infection and are more confident in managing patients.

■ Pre-survey response (n = 24) ■ Post-survey response (n = 24)

6 Barriers to Optimal Management

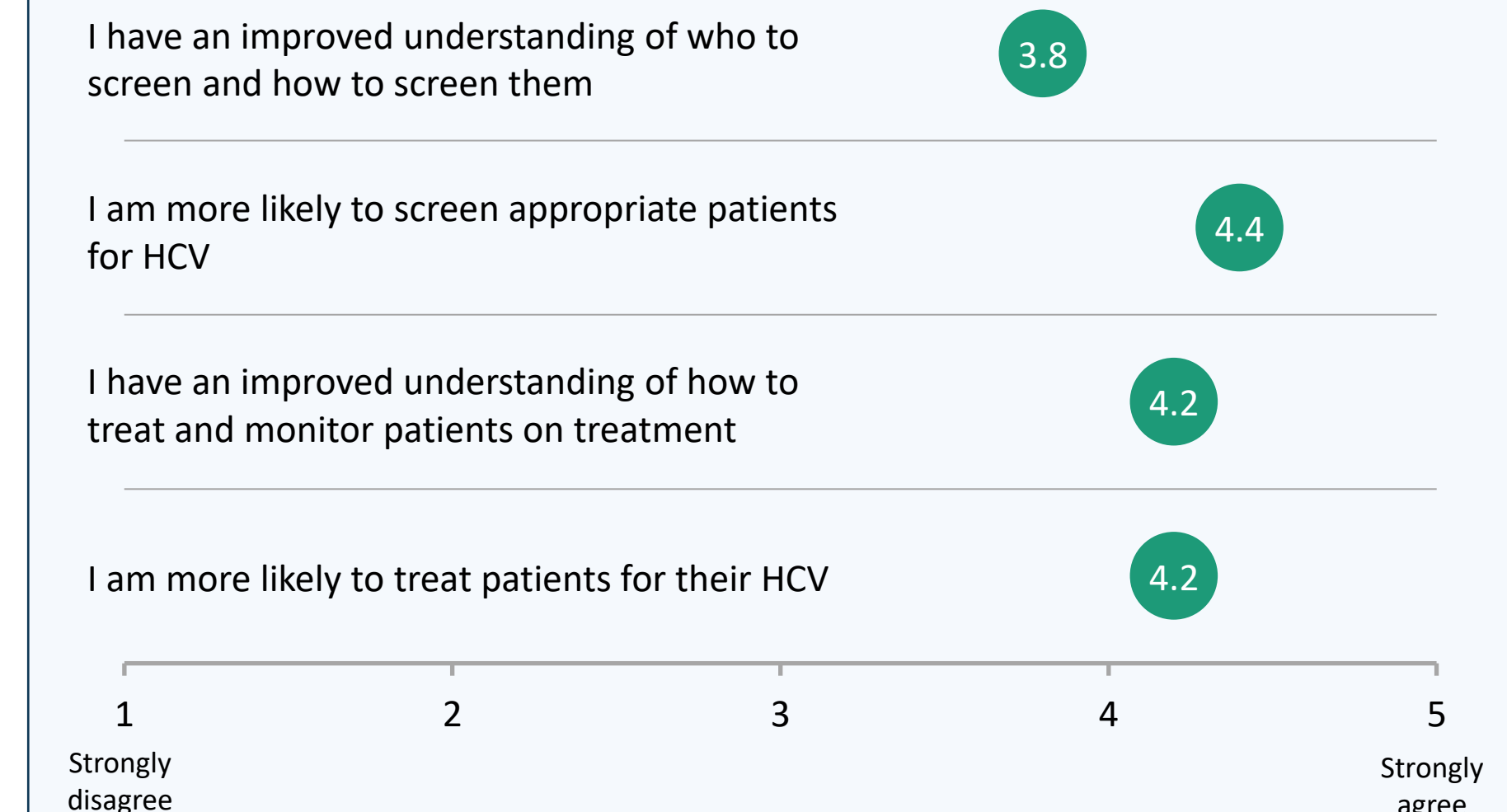
Barriers impeding the optimal management of patients with chronic HCV



Perceived significance to barriers related to screening and managing patients with HCV started to decrease following the education.

7 Educational Takeaways

As a result of the STOP HCV educational forum:



Learners reported increased understanding of multiple facets of HCV management and a higher likelihood to treat in the future.

8 Key Learnings

Please list 1-2 things that you learned from the STOP HCV educational forum



9 Implications

Most medical scientist-led education measures engagement, satisfaction and, at times, knowledge or competence. There is little evidence available demonstrating the impact of medical scientist-led education interventions on clinician performance.

This project demonstrates a model for assessing MSL interventions. The data captured highlight the success of the STOP HCV Forums in meeting the goal to expand the network of clinicians screening, diagnosing, and managing patients with chronic HCV to clinicians who have not had specialized training managing patients with HCV.

Further, the data also were able to provide information to support focus for continued future educational sessions