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# ACEHP-- CPD PULSE POINTS

## ORGANIZATIONAL STRATEGIC PLANNING, BACKWARDS PROGRAM PLANNING AND INSTRUCTIONAL DESIGN

*WHY ARE THESE SO IMPORTANT  
DURING AN INTERNATIONAL  
PANDEMIC?*

*JULY 16, 2020*

*2:00PM-3:00PM*



## FACULTY AND DISCUSSANTS

- Philip Dombrowski, MBA
- Joseph S. Green, PhD
- Marcia J. Jackson, PhD





TO MAKE CHOICES, ONE MUST BE RUTHLESS IN SETTING  
PRIORITIES AND MAINTAINING THEM OR RISK BEING  
UNPREPARED AND DELAYING VITAL ACTIONS.

Attributed to author John Dickerson in a recent book about the US Presidency entitled, *The Hardest Job in the World*



# LEARNING OUTCOMES FOR THIS SESSION

- Develop methods for *integrating education strategic planning into larger organization* planning efforts and to **move from CME to CPD**
- Create formal *backwards program planning processes* to start with the end in mind and **evaluate outcomes** to enhance value to the healthcare setting
- Use the literature on learning and cognition to **design activities, select most appropriate content, faculty and educational methods** to meet the needs of healthcare professionals



# TODAY'S SESSION

- **2:00 pm** Welcome, Introductions and **Strategic Organizational Planning**—Philip Dombrowski
- 2:10pm Q&A/Discussion
- 2:20pm **Backwards Program Planning and Evaluation**—Joseph Green
- 2:30pm Q&A/Discussion
- 2:40pm **Instructional Design**—Marcia Jackson
- 2:50pm Q&A/Discussion
- **3:00 pm** Conclusion and adjournment



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# BACKWARD ORGANIZATIONAL STRATEGIC PLANNING

**PHILIP DOMBROWSKI, MBA**

- **Goal #1.** *Education Vision and Mission*
- **Goal # 8.** *Leadership, Learning Skills and Organizational Knowledge*
- **Goal #9.** *Organizational Infrastructure*

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# GOAL #1. EDUCATION, VISION AND MISSION

- Task: # 4. Assess annually the degree to which the educational program fulfilled the organization's mission
- Task: # 5. Review annually the education strategic plan implementation

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## **GOAL #8. LEADERSHIP AND LEARNING SKILLS**

- Task: # 2: Develop training goals, objectives and materials for a staff and clinician leader education program
- Task: # 4: Create a career ladder for faculty development opportunities
- Task: # 6: Establish evaluation criteria to assess effectiveness and impact of efforts to enhance educational skills



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## **GOAL #9. ORGANIZATIONAL INFRASTRUCTURE**

- Task #1. Assure that the organization has all important skill sets to accomplish the mission
- Task #2. Implement enhancements or modifications to current organizational infrastructure

A scenic view of a lake with a boat and swans. In the background, a white motorboat with a canopy is on the water. In the foreground, several black swans are swimming. The sky is clear and blue, and the water is a deep blue. The background shows a distant shoreline with trees and hills.

# STRATEGIC PLANNING MODEL FOR CPD

- Select appropriate goals
- Choose relevant implementation tasks
- Evaluation

# ALLIANCE FOR CONTINUING EDUCATION IN THE HEALTH PROFESSIONS



## EARLY STAGES OF ADOPTION

- Linked*** education ***strategy to mission and vision*** of the Alliance
- Recently ***updated core competencies***, populated key domains with ***required knowledge, skills, and attitudes*** to meet competencies
- Mapped*** existing educational ***content to competencies***
- Competency-based content*** to ***address identified gaps*** available, more in development
- Curriculum Oversight Committee*** established to ***align every educational program with Alliance's education strategy***
- Member self-assessment study in development***

# STRATEGIC PLANNING LEADS TO BETTER BACKWARDS PROGRAM PLANNING

**Organizational strategic planning** gathers crucial information about clinician and healthcare organizational learning gaps and needs. This then will allow for **backwards program planning** to assure that resultant learning activities will positively impact clinician competence, performance and patient care outcomes.





**QUESTIONS? COMMENTS? DISCUSSION?**

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# BACKWARDS PROGRAM PLANNING

## JOSEPH S. GREEN, PHD

- **Goal #2.** *Purposeful Backward Program Planning*
- **Goal # 3.** *Comprehensive learning needs*
- **Goal # 7.** *Evaluation of higher level outcomes*

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## **GOAL #2. PURPOSEFUL BACKWARD PROGRAM PLANNING**

- Task: # 1. Identify essential elements comprising steps in the program planning process
- Task: # 3. Create training in this process for all involved in planning or implementing learning activities

# THE OLD PLANNING PROCESS

- Decide on topic
- Re-tool previous programs
- Location
- Select faculty
- Faculty select content
- Put content into lectures and panels
- Assess success
  - #’s, \$\$, happiness





# NEW PLANNING MODEL— MORE COMPLEX, BUT MUCH MORE EFFECTIVE

- **Identify gaps in physician performance**
- **Measure self-perceived gaps in learner competence**
- **Delineate desirable outcomes for learning intervention (objectives) based on gaps**
  - Create content needed to satisfy objectives
  - Pick most effective methods to meet objectives
  - Select best expert faculty to provide content
  - Determine the success of the activity in relation to desirable outcomes

## GUIDING QUESTIONS FOR BACKWARDS PLANNING

- **What is the patient care problem?**
- **Who is involved in this issues?**
- **Is the problem related to patient outcomes, physician behavior, competencies or knowledge?**
- **Can learning experiences impact physician performance?**
- **What are the necessary learning activity outcome measures?**
  - What are the best educational formats and methods to bring about these outcomes?
  - Who are the best faculty and what is the best content?

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## **GOAL #3. IDENTIFY COMPREHENSIVE LEARNING NEEDS**

- Task: # 2. Identify data sources for understanding gaps in competence, performance or patient care outcomes
- Task: # 4. Create needs assessment reports for each identified topic area for CME/CPD activities

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# BACKWARDS PLANNING FOR OUTCOMES

What are the **Problems/Opportunities** in healthcare?

Who are the **Health professionals** involved?

What are the **Desired outcome measures of an intervention?**

- Community Health (**Level 7**)?
- Patient Health Outcomes (**Level 6**)?
- Physician performance in practice (**Level 5**)?
  - Physician Competence (**Level 4**)?

Then, what are the necessary **Outcomes based objectives?**

- Knowledge
  - Skills
  - Attitudes



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“ACHIEVING DESIRED RESULTS AND IMPROVED OUTCOMES:  
INTEGRATING PLANNING AND ASSESSMENT THROUGHOUT LEARNING  
ACTIVITIES”  
JOURNAL OF CONTINUING EDUCATION IN  
THE HEALTH PROFESSIONS, 29 (1):1-15, 2009

AUTHORS:  
DONALD E. MOORE, JR., PH.D.  
JOSEPH S. GREEN, PH.D.  
HARRY A. GALLIS, M.D.

# IT IS ALL ABOUT THE “GAP”!

The difference between What is and...

- What ought to be
- What could be
- What is desired
- What peers are doing

As it relates to...

- What a learner knows (knowledge)
- What a learner is capable of performing (competence)
- What a learner actually does in their practice (performance)

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## **GOAL #7. EVALUATE EDUCATIONAL ACTIVITIES AND HIGHER LEVEL OUTCOMES**

- Task: # 1. Measure all activities as to levels of outcomes obtained and documented
- Task: # 4. Enhance the use of appropriate evaluation tools and collect highest level outcomes data possible for each learning activity

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## **LEVELS OF OUTCOMES FOR CME:** **TARGET OUTCOMES AT LEVELS 4-6!**

**(1)Participation**

**(2)Satisfaction**

**(3)Learning**

**(3A)Knows**

**(3B)Knows how**

**(4)Shows how (competence)**

**(5)Performance in Practice**

**(6)Patient Health Outcomes**

**(7)Community health**



# CRITICALITY OF **EVALUATION & ASSESSMENT** OF EDUCATIONAL OUTCOMES

- Benefits for **planners and learners to know what is known and how much was learned and applied in practice**
- Easy to determine the costs of education—what about having **data on the outcomes of this expenditure**
- Allows for using ‘**backwards planning**’ **principles to design** and redesign learning activities for impact



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# IS EDUCATION ALWAYS ENOUGH TO CHANGE PHYSICIAN BEHAVIOR?

*Education is not always adequate to facilitate physician behavior change*

Other non-educational change strategies:

- **Patient education** to facilitate compliance
- **Reminder systems** for drug-drug interactions
- Use of specific **treatment algorithms**
- **Patient feedback** of effectiveness of physician communication
- Methods to **study practice patterns**

# BACKWARDS PLANNING LEADS TO MORE EFFECTIVE INSTRUCTIONAL DESIGN AND EVALUATION STRATEGIES

**Backwards planning** gathers crucial information about learning gaps and needs that will be used to develop more **effective instructional design and evaluation strategies**, based on cognitive and learning theory which will result in better and more measurable learning outcomes



**QUESTIONS? COMMENTS? DISCUSSION?**

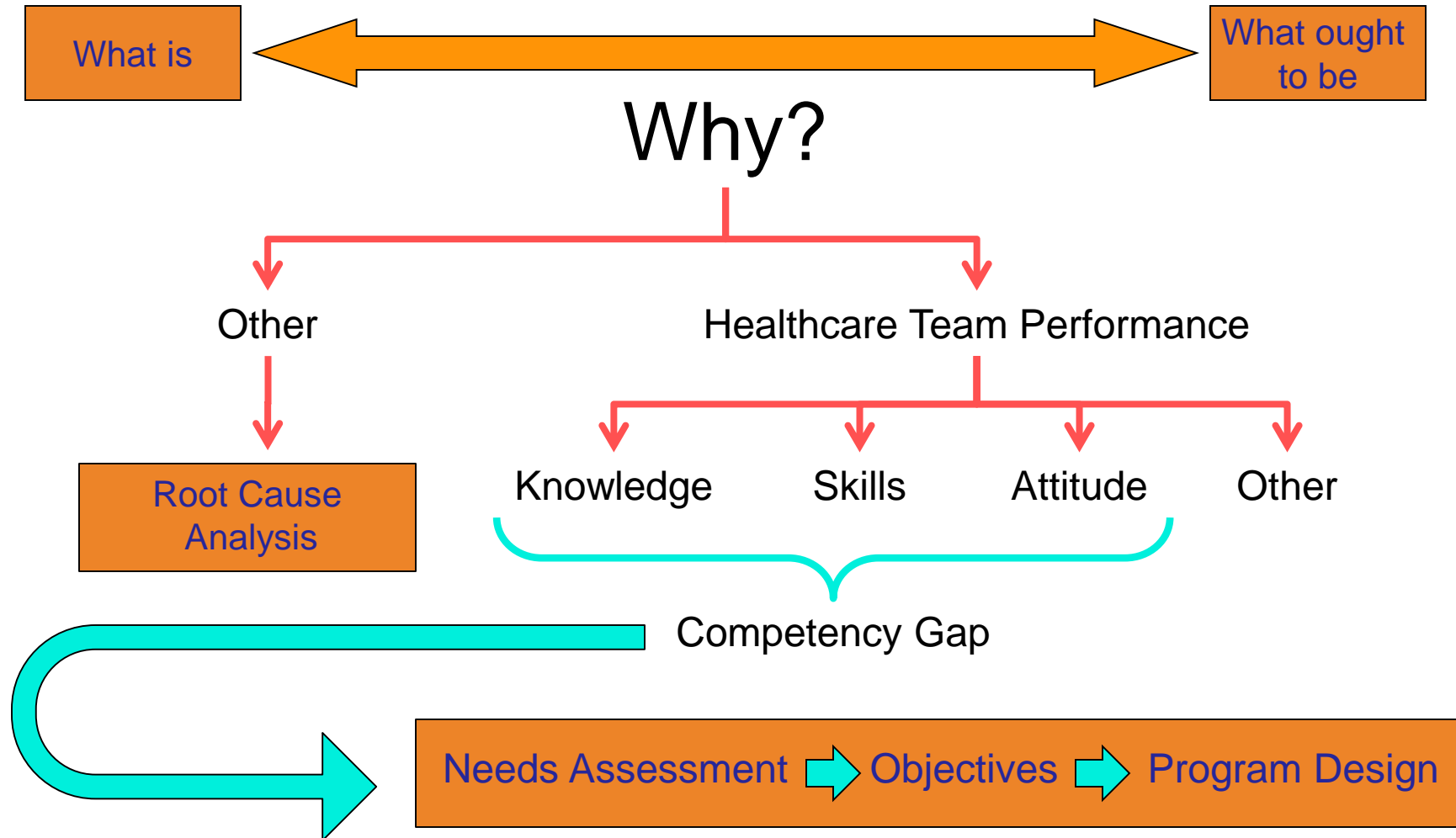
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# INSTRUCTIONAL DESIGN

## MARCIA J. JACKSON, PH.D.

- 1. **Goal #4:** Content, core curriculum and learning gaps
- 2. **Goal #5:** Meet individual learning needs with education program and learning activities
- 3. **Goal #6:** Use innovative formats, technology and methods

# GAP: PATIENT HEALTH STATUS





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# **ADDIE**

**Analyze**

**Design**

**Develop**

**Implement**

**Evaluate**



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## **GOAL #4. CONTENT, CORE CURRICULUM AND LEARNING GAPS**

- Task: # 3. Delineate competencies for identified knowledge domains in a core curriculum
- Task: # 4. Make the following planning decisions to meet identified needs: objectives, content, faculty, format, methods, and sequencing

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## GOAL #4. CONTENT, CORE CURRICULUM AND LEARNING GAPS

### COMPETENCY-BASED CURRICULUM

**Competency:** The knowledge, skills, and attitudes that enable one to perform effectively in his/her practice setting and meet the standards of the profession

**Format:** A competency is stated as an observable behavior linked to one or more outcome measures documenting that a health professional remains competent to practice

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## VALUE OF DEFINED COMPETENCIES

- Individual learning activities “tagged” to core competencies
- Highlights curriculum gaps
- Supports strategic development of new activities
- Provides framework for curriculum and activity evaluation

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# LEARNING OBJECTIVES

Objectives are critical tools in the design, development, implementation, and evaluation of instruction.



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## **GOAL # 5: MEET INDIVIDUAL LEARNING NEEDS WITH EDUCATION PROGRAM AND LEARNING ACTIVITIES**

- Task: # 3: Analyze the amount of current programming directed to each identified target audience
- Task: #4: Determine the extent of revised or new programming needed to health professional or audiences



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## GOAL # 5: MEET INDIVIDUAL LEARNING NEEDS WITH EDUCATION PROGRAM AND LEARNING ACTIVITIES

### What Learners Want...

- Focus on content that is new or changed
- Skip content they already know
- Minimize content that they can easily look up
- Learn at a time and place that is optimal
- Use any device to access digital content
- Have access to expertise for context and mentoring
- Provide targeted and non-punitive testing/feedback
- Know how it really works in practice
- Authentic collaboration with peers during learning
- Practice/simulate as they learn
- Performance support and job aids for transfer

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## **GOAL #6: USE INNOVATIVE FORMATS, TECHNOLOGY AND METHODS**

- Task: # 1. Evaluate and prioritize available educational formats and methods
- Task: # 3. Appoint a working group of young faculty to suggest new possible formats consistent with their new learning styles

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## GOAL #6: USE INNOVATIVE FORMATS, TECHNOLOGY AND METHODS

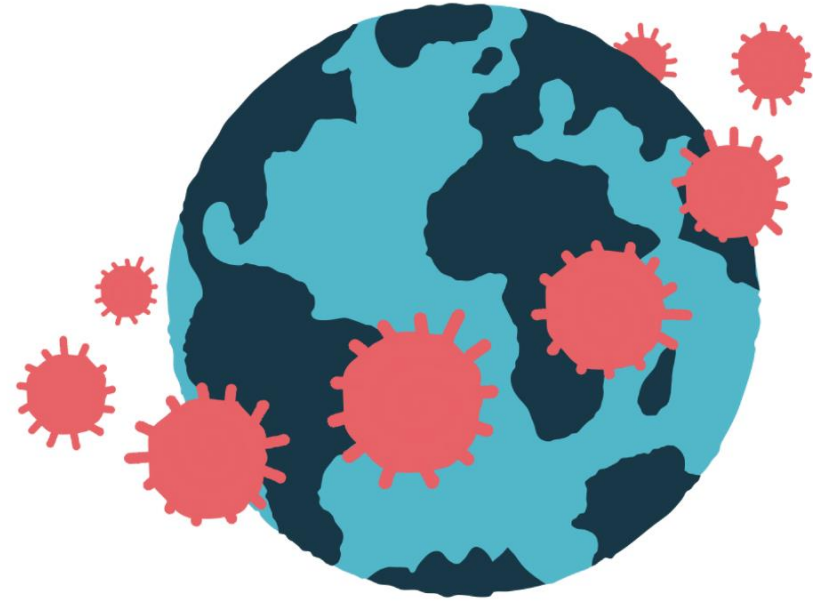
- Lecture
- Discussion groups
- Demonstration
- Role-play
- Reflection
- Simulation
- Self-assessment
- Other?

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# WHY IS IT SO IMPORTANT TO LOOK CLOSELY AT THE CPD LEARNING ACTIVITIES WE CREATE AND HOW WE CREATE THEM DURING AN INTERNATIONAL PANDEMIC?

If one is only taking care of the urgent issues, there's no time to identify and solve the challenges that can only be solved through planning and follow through.

Attributed to John Dickerson, the author of a recent book about the US Presidency entitled, *The Hardest Job in the World*



# CREATION OF EFFECTIVE INSTRUCTIONAL DESIGN STRATEGIES LEADS TO BETTER DATA ABOUT CLINICIAN LEARNING OUTCOMES

**More effective instructional design and evaluation strategies**, based on cognitive and learning theory, will result in better and more measurable learning outcomes which directly impacts CPD Organizational effectiveness



**QUESTIONS? COMMENTS? DISCUSSION?**

Thank you so  
much and hoping  
**your visions take  
flight after this  
pandemic!**

Phil, Joe and  
Marcia

