Question 1

Which region are you from:

1. Europe
2. USA
3. Asia
4. India
Question 2

How much of your existing CME work would you consider to be global:

1. less than 10%
2. 11 – 30%
3. More than 30%
Introduction of our panel

Dr Alvaro Margolis – Uruguay
Vaibhav Srivastava – India
Lisa Sullivan – Asia and Australia

We are all Board members of the GAME organisation, a not-for-profit organisation with a mission to serve as the international organization of leaders advancing innovation and collaboration in CME/CPD worldwide, with the goal of improving patient care.
Alvaro’s presentation to be done here

• Following Alvaro’s presentation we will have questions from the floor directly to Alvaro to answer
Vaibhav’s presentation to follow after questions to Alvaro
CEPD in Asia/Australia

Lisa Sullivan
Lisa Sullivan, Group Managing Director of the In Vivo Communications group of companies with offices in Sydney, covering Australia and NZ, and Singapore, covering Asia.

As such I have an interest in selling CEPD programmes to CEPD professionals across Australasia including eLearning, blended learning and face-to-face programmes.
Audience question

Have any of you conducted CME/CPD/CE programmes in the following countries:

1. Australia
2. South America
3. India
4. Asia
5. 2 or more of the above
What is the format of the programmes you are running outside Europe:

1. F2F
2. Online
3. Blended (combination of the two above)
4. Something else
Some statistics

China
- Population: 1.384 billion
- 1.5 physicians to 1,000 population

Thailand
- Population: 67 million
- 0.4 physicians to 1,000 population

Indonesia
- Population (2010): 237 million
- 0.2 physicians to 1,000 population

Japan
- Population (2012): 128 million
- 2.3 physicians to 1,000 population

Korea
- Population: 50 million
- 2.1 physicians to 1,000 population

Australia
- Population (2012): 24 million
- 3.3 physicians to 1,000 population
Current issues with CEPD
Asia & Australia

**Physicians**

- **Mandatory Requirements**
  - Most countries

- **Non Mandatory**
  - Japan
  - Thailand

**Nurses & Pharmacists**

- **Mandatory Requirements**
  - China
  - Indonesia
  - Australia
  - Korea

- **Recommended**
  - Japan

**Good News**
Current issues with CEPD
Asia & Australia

- Formal needs assessments rarely done within country e.g. decisions based on expertise of the societies/states (Asia)
- Predominantly based on skills & knowledge only e.g. little QI or PI (Asia)
- CME terminology rather than CPD still the key concept (Asia)
- Major discrepancies between urban and rural education/availability (Common Issue)
- Vast differences in delivery across countries (face-to-face vs. online & blended e.g. India only live events are accredited)
- Focus on QI rather than PI (Australia)
- Still substantial editorial control from Pharma in accredited CME/CPD (Regionally)
SEAR guidelines for CPD: Challenges in Asia

• Lack of motivation
• Absence of need-based accredited programmes,
• Credits minimal so no incentives or legal requirements
• Designing high quality and tailored courses to meet specific needs
Trends

• IME now being recognised and interest being generated
• CIPE negligible (Asia) due to limited multidisciplinary team based management
• Online CME/CPD still not appreciated except in Australia and China
• F2F events are expensive to organise and run so funding can be an issue
• Better English language skills are assisting in deployment of international CME/CPD programmes
Thank you

Questions ???