The changing life of the CME provider in Europe: what’s new?

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Disclosures

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• Employee of Liberum a provider of IME and accredited CME

• Liberum receives funding from pharmaceutical companies and Societies for independent and certified medical education programmes

• Liberum is a member of the Good CME Practice group (www.gcmep.org)

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• Employee of International Medical Press (IMP) a provider of IME and accredited CME

• IMP receives funding from pharmaceutical companies for independent and certified medical education programmes

• IMP is a member of the Good CME Practice group (www.gcmep.org)
So you feel you’re being pulled in different directions, stretched too thin, and wound too tightly? Talk to me about that.

Is this our new world?
Learning objectives

After this workshop, you will be able to:

1. Discuss the role of funders/supporters of CME in Europe
2. Understand the opportunities for new formats learning in CME in Europe
3. Define the key criteria for ‘good’ CME
CHAPTER 3.
SPECIFIC REQUIREMENTS
FOR INTERACTIONS WITH HCPs AND HCOs

ARTICLE 16 MEDICAL EDUCATION

Medical Education is aimed at increasing the scientific knowledge and competence of HCPs to enhance medical practice and improve patient outcome. Member Companies can be engaged in different types of Medical Education but such activities must not constitute Promotion.
When funding independent Medical Education or organizing Medical Education activities directly or in collaboration with Third Parties, Member Companies must ensure that their participation and role is clearly acknowledged and apparent from the outset.
When organizing Medical Education activities in which Member Companies have input in the content, they are responsible for what is communicated during the activities. Such content must be fair, balanced and objective, and designed to allow the expression of diverse theories and recognized opinions.
Supporters, funding and transparency

• Defining the role for supporters/funders of CME in Europe: roles and responsibilities

**TASK:** Spend 10 minutes around your tables thinking about what is possible in Europe? What should happen (in your opinion)? And what happens in practice?
The impact of media perception: Example from Germany

- Congresses and educational events as promotional options
- Transparency, CME, product-placement, ... everything mixed in the media
- For the public: Physicians are corrupt, the system of CME is not robust enough, Pharma uses “all methods”
Micro-learning

- Definition?
- How effective is microlearning?
- Is it accreditable?

TASK: Spend 10 minutes around your tables thinking about microlearning, what is possible in Europe? The benefits, etc?
Micro-learning

- ACCME / AMA 0.25 credits as minimum currency
- EBAC and UEMS EACCME, Learner combines 1 hour’s worth of bite-sized learning to claim 1 hour of credit
  - Portal accreditation possible with at least 10 hours of accredited learning
  - Learning tailored to the learner’s needs: flexible in terms of time and content
  - No minimum length of module
  - Evaluation built into each bite-sized learning experience
  - No final assessment
- Germany: modular but 10 question assessment
CME needs new formats – What can you imagine?
CME needs new formats – What can you imagine

• Micro Learning
• Podcasts
• Learning-Timer/Point of care on portals
• Mobile-education
• Gamification
• ….
International criteria for ‘good education’

**TASK:** Spend 10 minutes around your tables thinking about what defines ‘good education’? Minimum criteria? Icing on the cake? Mutual recognition?
What are the 4 principles of quality and effective CME?

- According to the Good CME Practice group ...

1. Appropriate Education
2. Effectiveness
3. Balance
4. Transparency
gCMEp 4 core principles

• How should they change?
Findings from our workshop
Key outcomes from workshop
Thank you

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