

# Accredited CME activities must be designed for and evaluate changes in the blue part of the diagram

## Learning objectives (Examples)

Use NMDOH data to correct and improve patient care in actual practice

Use EMR data to correct and improve patient care in actual practice

Use patient-satisfaction data to correct and improve patient care in actual practice

Correctly place a chest tube

Distinguish when to place, or not place, a chest tube, based on a clinical scenario

Describe indications, contraindications, & risks associated with the placement of a chest tube

## Evaluation methods (Examples)

Data collection from NMDOH or other sources

Data collection from EMR or other sources

Observation and feedback in actual practice, EMR, patient satisfaction data

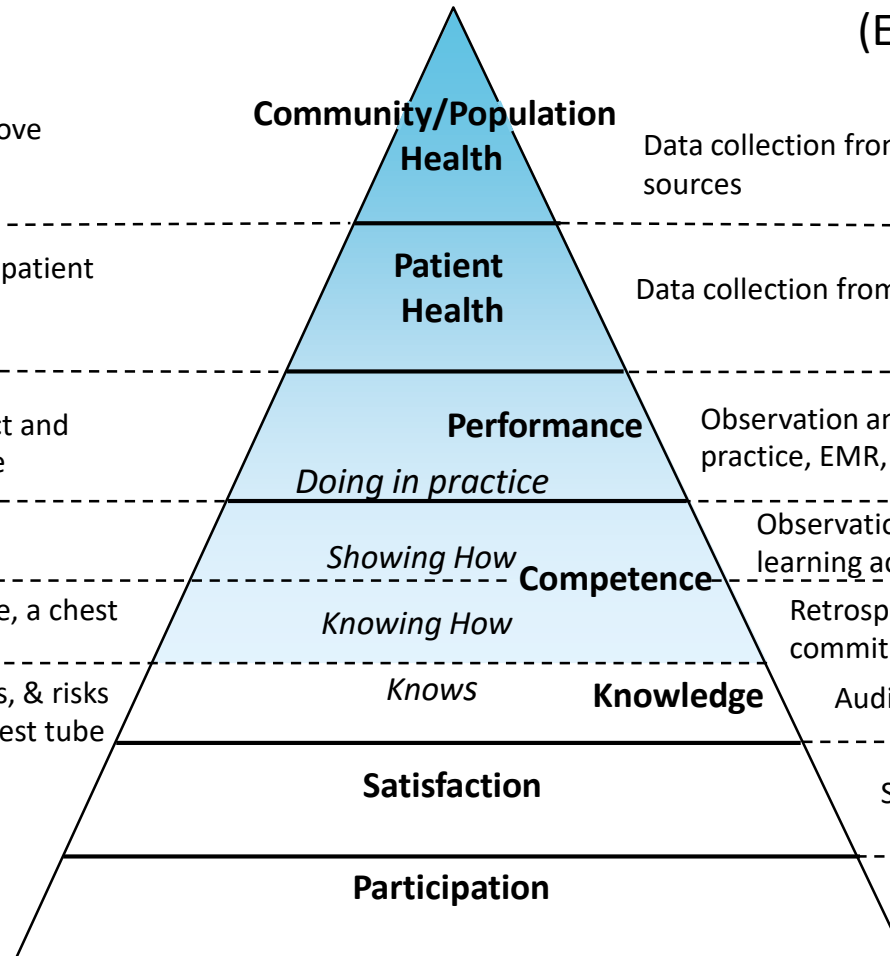
Observation and feedback during learning activity

Retrospective pre/post survey, commitment to change, quiz

Audience response system

Survey

Attendance data



# What's the difference between knowledge, competence, performance and outcomes?

**Knowledge** is what you know.

Example learning objective: “Describe indications, contraindications, & risks associated with the placement of a chest tube.” This can be assessed by direct test or an audience response system.

**Competence** is what a professional would do in practice, if given the opportunity. It is knowledge put into action by the learner *in the learning environment*. Competence includes *knowing how* to apply knowledge, or *showing how* to apply knowledge. An example of *knowing how*: “Distinguish when to place, or not place, a chest tube based on a clinical scenario” assessed by a retrospective pre/post survey. An example of *showing how*: “Correctly place a chest tube” assessed by observation and feedback during a learning activity.

**Performance** is knowledge put into action by the learner *in professional practice*. For example: “Use patient satisfaction data to correct and improve patient care.” *Objective* assessment of performance can be through observation and feedback in actual practice, EMR, or analysis of patient satisfaction data. *Subjective* assessment of performance might be with a retrospective pre/post survey or commitment-to-change statement.

**Outcomes** are the consequence of performance. You measure outcomes to determine the impact of the educational intervention. These may be patient outcomes, learner outcomes, or population/community health outcomes. Outcomes may be assessed *objectively* by data found in the EMR, length of stay, readmission, etc. Learner outcomes might be assessed by board exam scores. Outcomes might be assessed *subjectively* with a retrospective pre/post survey or commitment-to-change statement.

**A CME activity must be evaluated for change in competence, performance and/or patient/population/community outcomes.**