Regular readers of P&T understand that we are facing a crisis in continuing medical education (CME). This situation has its roots in multiple areas, including a history of financial abuses, congressional interests in these abuses, and a growing awareness that traditional clinical CME simply does not change clinician behavior. More frequently, we are hearing stories about academic medical centers banning detail representatives from all pharmaceutical companies. National organizations such as the American Medical Association (AMA), the Association of Academic Medical Centers, and the Accreditation Council for Continuing Medical Education (ACCMC) are in the news nearly every day as they try to sort out these issues.

Wouldn’t it be wonderful if we could find an unbiased source of professionally produced, cutting-edge, online CME lectures? I’m happy to report that help is at hand; it comes in the type of programming available through the Graduate Education Foundation (GEF).1

Founded in 2002, the GEF is a not-for-profit 501(c)(3) organization that is designed to enhance the training of health care providers by improving the quality of and access to continuing education. This is the first comprehensive Internet-based, grand rounds-style series of educational seminars directed at advancing professional knowledge. The organization is funded by non-pharmaceutical, non-interventional grants and revenue from subscriptions.

First, a disclaimer. I am a faculty member participant in the GEF, and I am grateful for the outstanding programming I have been able to offer under its auspices. The GEF took my Microsoft Power Point slides and turned them into an amazing online presentation with graphics that were professionally customized to my needs.

The GEF’s educational Web sites—CMElectures.org and CEElectures.org—can be accessed from anywhere at any time. The program consists of a comprehensive series of 130 online, evidence-based lectures. Most of the lectures are clinically oriented, but a series on patient safety, quality of health care, and risk management is also available. These presentations are designed to enhance efficiency, reduce practice costs, and minimize error rates.1

The GEF created the grand rounds format because of its inherent superiority in audiovisual presentation. Professional medical education experts take standard Power Point presentations and create a robust online experience unlike any other I have ever participated in. Potentially dull presentations are enlivened by a professionally narrated script and expertly created video material. The combination is a winning one indeed. A subject index and a table of contents enable users to easily search for and locate specific topics.

Individual and institutional subscriptions are available. Institutional users can access the lectures through a co-branded Web page. All users have unlimited access to all lectures and symposia. Each grand rounds lecture qualifies for up to 2.0 hours of educational credit. The GEF is fully accredited by the ACCME, the American Nurses Credentialing Center, and the American Academy of Physician Assistants (AAPA). Credits are awarded electronically upon successful completion of an accompanying examination.

Our team has recently seen evidence that the innovative GEF model might really work.2 It succeeds in changing physician behavior, improving outcomes, and possibly reducing waste—areas that P&T committee members should certainly find worth exploring.

There is no question that the very core of CME must change. We must find a way to eliminate former abuses and, more importantly, to create a vehicle for lifetime learning. I’ve covered some aspects of this in P&T and in my newsletters.3,4 I believe that a vehicle like the GEF is ideal for enabling clinicians to obtain high-quality CME at their convenience without any discernible economic bias. The GEF can’t fix the CME mess by itself, but it does represent a critically important step in the right direction. You can learn more about the foundation at www.gefcme.org.

As always, I’m interested in your views. You can reach me at my e-mail address, david.nash@jefferson.edu. Please visit my blog at http://nashonhealthpolicy.blogspot.com.

REFERENCES

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Whither CME