

Proposed Revisions to ADA CERP Standards

Call for Comments
October 2017

At its October 2017 meeting, the Commission approved publication of a draft outline for a comprehensive revision of the CERP Recognition Standards (Appendix 1) and drafts of three revised Standards (Appendices 2-4) for discussion at an open hearing on October 20, 2017 at the ADA Annual Meeting in Atlanta, and for written comments to be solicited from the communities of interest. Written comments on the proposed outline and preliminary drafts of three Standards will be accepted until December 1, 2017.

Drafts of the remaining Standards will be available for comment at a later date. A final draft of all revised Standards will also be posted for comment prior to adoption. Calls for comments will be posted on the Commission's website at ADA.org/CCEPR. Communities of interest will be notified by broadcast email and published announcements on the Commission's website, and in ADA News.

Background: In 2016, the Commission for Continuing Education Provider Recognition determined to conduct a comprehensive revisions of the CERP Recognition Standards. The decision was based in part on feedback from the communities of interest obtained from a call for general comments on the Standards. The Commission also conducted a validity and reliability survey of the Standards, in which stakeholders evaluated individual CERP Standards and Criteria for relevance to effective continuing dental education. The Commission also reviewed accreditation standards for continuing education in other health professions. Based on information gathered through these processes, the Commission determined that the guiding principles of the revision process would be the following:

- Simplify the Standards by consolidating overlapping Standards and eliminating redundant criteria
- Emphasize the principles and practices that contribute to effective continuing education; de-emphasize or eliminate criteria that may be less relevant to a provider's ability to deliver CE that improves professional effectiveness
- Reduce the prescriptiveness of criteria
- Provide additional guidance to help providers interpret the requirements

The Commission has therefore proposed that the existing 14 CERP Standards should be simplified and consolidated into six Standards focusing on criteria essential to the delivery of effective continuing dental education (Appendix 1).

Submitting comments: Written comments on the proposed outline and preliminary drafts of three Standards will be accepted until **December 1, 2017**.

Send written comments to:

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List of Proposed CERP Standards and Criteria—October 2017

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4 **Standard 1. Purpose and Mission**
5 1.1. Provider’s Mission
6 1.2. Program Administration
7
8 **Standard 2. Content of CE Activities**
9 2.1. Needs Assessment
10 2.2. Educational Objectives
11 2.3. Sound Scientific Content
12 2.4. Promoting Improvements in Care (not proprietary commercial products)
13
14 **Standard 3. Delivery of CE Activities**
15 3.1. Instructors
16 3.2. Educational Formats
17 3.3. Patient Protection
18 3.4. Facilities/Media
19 3.5. Publicity
20 3.6. Record Keeping
21
22 **Standard 4. Commercial Conflicts of Interest**
23 4.1. Independence
24 4.2. Management of Commercial Conflicts of Interest
25 4.3. Management of Commercial Support
26 4.4. Disclosure
27 4.5. Separation of Marketing/Promotion from CE
28
29 **Standard 5. Assessment of Learning**
30 5.1. Assessing Participant Learning
31 5.2. Assessing Activity Outcomes
32
33 **Standard 6. Evaluation**
34 6.1. Evaluation of CE Activities
35 6.2. Evaluation of Impact and Achievement of Mission
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1 **Standard 1. Purpose and Mission**
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4 **1.1. Provider's Mission.** The provider must have a mission statement and goals which define the
5 scope and intended outcomes of the continuing education activities that the provider offers.
6

7 Guidance

8 A concise, clearly defined continuing education **mission statement** describes the scope
9 of the provider's continuing education activities, the audience for whom these activities
10 are designed and how these activities will enhance professional competencies or support
11 improvements in oral health care.
12

13 A **goal** is a concise written statement of what a provider intends to achieve for oral health
14 education. Goals articulate short-term or long-range strategies for carrying out the
15 provider's continuing education mission statement. Goals should address how the
16 provider's CE activities will enhance dental professionals' competencies, performance or
17 patient outcomes.
18

19 Sharing the provider's mission statement with instructors and other stakeholders will
20 clarify the purpose of the CE program and will set the direction for the development of
21 strategic goals
22

23 **1.2. Program Administration.** The provider must conduct business operations and manage the
24 overall CE program so that its financial, legal and human resource obligations and commitments
25 are met.
26

27 Guidance

28 An effective program administration has policies and procedures that demonstrate:

- 29 a. adequate resources to administer all aspects of the CE program
30 b. compliance with applicable laws and regulations
31 c. the provider has specific procedures for personnel changes to maintain continuity,
32 particularly with regard to the administrative authority (e.g., personnel policy
33 statements, etc.)
34 d. there is a provision for adequate support personnel to assist with program planning
35 and implementation where the size or extent of the CE program warrants.
36 e. the responsibilities and scope of authority of the individual or administrative authority
37 is clearly defined (e.g., individual job descriptions or pertinent policy statements)

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1 **Standard 5. Assessment of Learning**

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4 *The intent of this Standard is to ensure that CE activities include assessment methods that allow learners*
5 *and providers to evaluate the effectiveness of the activities.*
6

7 **5.1. Assessing Participant Learning.** The provider in collaboration with instructors must include
8 learning assessments in each CE activity to assess participants' achievement related to learning
9 objectives/outcomes.

10 Guidance

11 The provider may select formal and informal techniques for assessing learning. Informal
12 techniques may involve participant discussions or observations. Assessment
13 mechanisms must be content oriented. The method of assessment and feedback must
14 be appropriate to the nature of the activity and learning objectives or desired outcomes.
15 Assessments for activities designed to impart knowledge or address gaps in knowledge
16 may include questions to assess recall of facts, pre- and post-tests, or quizzes.
17 Assessments for activities designed to address application of knowledge or performance
18 may include case studies, observations, demonstrations or evaluations of hands-on
19 techniques or performance. Following assessment, the student should be given feedback
20 concerning correctness, and/or progress relative to a goal.
21
22

23 **5.2. Assessing Activity Outcomes.** The provider must assess changes in aggregate (group)
24 learners' knowledge, performance or practice as a result of the educational activity/learning
25 intervention.
26

27 Guidance

28 The provider should assess the impact on the group participating in the activity by
29 analyzing the information collected through the learning assessment tools used (5.1), and
30 observing any changes in the learners' knowledge, performance or practice. Providers
31 should use this aggregate (group) data to improve activity effectiveness.

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1 **Standard 6. Evaluation**
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4 *The intent of this Standard is to ensure that a CE provider evaluates the effectiveness of its CE activities*
5 *and the impact of its overall CE program, in order to support continuous quality improvement of the*
6 *provider's CE programming.*
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8 **6.1. Evaluation of CE Activities.** The provider must assess learners' perceptions of the CE
9 experience and confidence in their abilities relative to the learning objectives.

10
11 Guidance

12 The provider should obtain feedback from learners regarding:

- 13 a. applicability of the CE activity to their educational needs
- 14 b. achievement of published learning objectives
- 15 c. quality of instructors
- 16 d. effectiveness of teaching and learning methods
- 17 e. perceptions of bias or commercialism
- 18 f. any other metrics the provider wishes to monitor

19
20 The provider should use this information to make adjustments and improvements to
21 future CE activities.
22

23 **6.2. Evaluation of Impact and Achievement of Mission.** The provider must develop and implement
24 a plan to evaluate the effectiveness of its overall continuing education program and assess
25 whether its CE mission and goals are being met.
26

27 Guidance

28 An evaluation plan will help the provider measure the impact of its CE programming and
29 determine whether it is meeting its overall goals. The evaluation plan should measure
30 impact in the following areas:

- 31 a. participation
- 32 b. satisfaction—including learners' perceptions regarding the applicability of the CE
33 activities to their practices, effectiveness of the activities, satisfaction with instructors,
34 instructional methods and organization of material, etc.
- 35 c. learning and performance—data gathered from learning assessments in CE
36 activities
37

38 Documentation of the evaluation process could include methods, results, significant
39 findings and next steps for subsequent actions. The plan may include participant
40 surveys. Analysis of aggregate (group) data could be used to support evaluation of
41 impact and achievement of mission.
42

43 The provider should review its overall CE mission and goals and revise if needed, based
44 on the results of the evaluation.
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46 When possible, a provider's evaluation plan could also measure the impact of the
47 provider's CE program on patient oral health and population oral health through metrics
48 such as increased compliance with published guidelines, reductions in adverse events
49 (for example, infection rates, failure rates), etc.