**SCOLIOSIS RESEARCH SOCIETY**

**SCIENTIFIC PROGRAM PLANNING DOCUMENT**

**Meeting or Course:** 54th Annual Meeting

**Date:** September 18-21, 2018

**Location:** Montreal, Canada

**Planning Committees:** Education Committee, Program Committee

**Program Outline:**

**Identifying the Educational Gap(s)**

What procedures were used to identify the existing gap(s) between current and best practices?

**Documentation must be summarized and attached.**

|  |  |
| --- | --- |
| **Direct Measurement of Learners** | **External Sources** |
| [x]  | Survey of targeted learners | [ ]  | Public health data |
| [ ]  | Clinical practice data | [ ]  | Review of peer-reviewed literature |
| [ ]  | Quality improvement studies | [ ]  | New information/research (i.e., Cochrane Collaborative ([www.cochrane.org](http://www.cochrane.org)), diagnostic techniques, treatment plans, etc.) |
| [ ]  | Practice profiles |
| [x]  | Gap(s) identified by target audience/expert | [ ]  | Data from mainstream sources (journals, websites) |
| [x]  | Committee findings/audits | [ ]  | National and State quality data sources & guidelines, such as Florida Agency for Healthcare Administration ([www.fdhc.state.fl.us](http://www.fdhc.state.fl.us)), National Guideline Clearinghouse ([www.guideline.gov](http://www.guideline.gov)), or National Quality Measures Clearinghouse ([www.qualitymeasures.ahrq.gov](http://www.qualitymeasures.ahrq.gov)) |
| [x]  | Faculty and/or planning committee’s perception of learner’s needs |
| [x]  | Focus panels (interviews) |
| [x]  | Opinion leader interviews | [ ]  | Specialty societies |
| [x]  | Opinion of experts in specialty field(s) | [x]  | Requirements of state licensing board, specialty societies, etc. |
| [ ]  | Summary of previous outcomes data | [ ]  | Other:  |
| [x]  | Expert opinion of Activity Director |  |  |

**Using Identified Gap(s) to Plan Content**

Based on the information above, please summarize the needs identified and the results you intend to achieve. The desired results should be based on “best practices.” They are what learners will apply to their practice based on the knowledge and implementation strategies addressed in this activity. **Please note that CME activities should focus on competence as well as knowledge. *Content Focus – Only check fields that you plan to measure following the activity.***

**What is a Practice Gap?**

**A professional practice gap is the difference between** actual **and** ideal **performance.
Professional practice gaps are measured in terms of:**

|  |  |
| --- | --- |
| **Knowledge:** | **Being aware of what to do** |
| **Competence:** | Being able to apply knowledge, skills and judgment in practice (knowing how to do something) |
| **Performance:** | **Having the ability to implement the strategy or skill (what one actually does)** |
| **Patient Outcomes:** | A measurable change in patient health status. |

**How are gaps identified?**

* **A needs assessment looks at the state of clinical practice from a variety of angles and perspectives and is a tool for planning the activity.**
* **The needs assessment helps determine the current situation, state of skills, knowledge, abilities, and/or performance (what should be vs. what is, ideal vs. real, where we want to be).**

**What is the difference between a gap and a need?**

**Gaps are the difference between ACTUAL (what is) and IDEAL (what should be) in regards to performance and/or patient outcomes. Educational needs are defined as “the need for education on a specific topic identified by a gap in professional practice.”**

**Gap Analysis**

**IDENTIFIED GAP**

|  |  |  |
| --- | --- | --- |
| **What are your learners doing now that you don’t want them to do?****(Current Practice)** | **DESIRED RESULTS****(Best Practice)** | **CONTENT FOCUS****(Measurable Outcomes)** |
| Lack of understanding the growth and measures of growth of the spine  | The indicators and radiographic measures of growth to make clinical decisions | [x]  Knowledge[x]  Competence[x]  Performance[ ]  Patient outcomes |
| Misunderstanding/lack of information regarding the role of navigation and robotics in Spinal deformity treatment | Understanding of the value and Indications for the effective use of navigation and robotics  | [x]  Knowledge[x]  Competence[x]  Performance[ ]  Patient outcomes |
| Lack of appreciation value of dashboards in improving patient performance | Utilizing dashboard to improve physician performance and patient outcomes | [x]  Knowledge[x]  Competence[x]  Performance[ ]  Patient outcomes |
| Lack of recognition of the need to integrate age-adjusted alignment parameters | Improved understanding of the parameters that change with the aging spine | [x]  Knowledge[x]  Competence[x]  Performance[ ]  Patient Outcomes |
| Multiple surgical choices for approach for the treatment of ASD | Optimize the selection of anterior, posterior, combined , or minimally invasive approaches | [x]  Knowledge[x]  Competence[x]  Performance[ ]  Patient Outcomes |
| Lack of understanding of newer surgical techniques to reduce common complications | Understand and appropriately apply new surgical techniques | [x]  Knowledge[x]  Competence[x]  Performance[ ]  Patient Outcomes |
| Perioperative risk management | Appreciate the available evaluation tools and treatment of comorbidities to improve patient outcomes | [x]  Knowledge[x]  Competence[x]  Performance[ ]  Patient Outcomes |

**Please describe and attach your evidence for the above gaps:**

**Identifying the Educational Needs(s)**

 (Check all that apply, please select a minimum of **one**)

 [x]  Provide medical/surgical information.

 [x]  Promote appropriate referral.

 [x]  Demonstrate new techniques (surgical or other manipulative activities) to be learned and adopted by the audience for use in their practice.

 [x]  Demonstrate new techniques (surgical or other manipulative activities) activity participants will not necessarily master but need to know so that appropriate referral can be considered.

 [x]  Provide a review of a subject or a field.

 [ ]  Other (Specify):

**Activity Objectives**

Based on the desired results described above, list the learning objectives. Learning objectives are a tool to assist you in identifying the specific steps that will be taken to address the gap between an identified need and the desired result.

**How do I formulate learning objectives?**

After looking at the practice gaps and educational needs, what do you want the learner to be able to accomplish after the activity?

* Learning objectives are the take-home messages that bridge the gap between the identified need/gap and the desired result. Learning objectives also help learners understand the specific result they can expect to achieve by participating in this educational activity.

Note: learning objectives should be measurable and should begin with a verb that can be measured.

### Verbs that Measurably Communicate Knowledge, Competence, and Performance

# INFORMATION

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| write | count | define | describe | draw | identify | indicate | list | name | point | quote  |
| read | recite | recognize | record | relate | propose | select | tell | state |  |  |

# COMPREHENSION

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| associate | classify | compare | compute | contrast | describe | differentiate | discuss | distinguish | translate | review |
| estimate | explain | express | interpret | locate | predict | report |  |  |  |  |

# APPLICATION

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| apply | calculate | complete | demonstrate | dramatize | employ | examine | illustrate | interpolate | interpret | locate |
| operate | order | practice | predict | relate | report | restate | review | schedule | solve | translate |
| use | utilize | communicate | provide |  |  |  |  |  |  |  |

# ANALYSIS

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| analyze | appraise | contract | criticize | debate | detect | distinguish | differentiate | diagram | infer | experiment |
| inspect | inventory | question | separate | summarize | highlight | explore |  |  |  |  |

# SYNTHESIS

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| arrange | assemble | collect | compose | construct | create | design | detect | formulate | generate | integrate |
| manage | organize | plan | prepare | prescribe | produce | propose | specify | document | refine |  |

# EVALUATION

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| appraise | assess | choose | critique | determine | estimate | evaluate | grade | judge | measure | rank |
| rate | recommend | revise | score | select | test |  |  |  |  |  |

# VERBS THAT IMPART SKILLS

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| diagnose | hold | internalize | measure | pass | project | empathize | integrate | massage | palpate | percuss |
| visualize |  |  |  |  |  |  |  |  |  |  |

# AVOID THESE VERBS

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| appreciate | have faith in | know | learn | understand | gain knowledge of |  |  |  |  |

**As a result of participating in this activity, participants should be able to:**

* Evaluate the indicators and radiographic measures to estimate growth and improve clinical decisions
* Critically analyze the value and refine the indications for the effective use of navigation and robotics
* Adopt dashboards to improve physician performance and patient outcomes
* Demonstrate a thorough understanding of the parameters that change with the aging spine
* Optimize the selection of anterior, posterior, combined , or minimally invasive approaches and differentiate the benefits of appropriate surgical techniques
* Evaluate and appropriately apply new surgical techniques
* Integrate the available evaluation tools and treatment of comorbidities to improve patient outcomes

**Core Competencies**

CME activities are designed within the framework of competences designed by the ACGME/ABMS. Please check all competencies that will be addressed by this activity:

|  |  |
| --- | --- |
| x | **Practice-based Learning and Improvement:** Show an ability to investigate and evaluate patient care practices, appraise and assimilate scientific evidence, and improve the practice of medicine. |
| x | **Patient Care and Procedural Skills:** Provide care that is compassionate, appropriate, and effective treatment for health problems and to promote health. |
| x | **Systems-based Practice:** Demonstrate awareness of and responsibility to the larger context and systems of health care. Be able to call on system resources to provide optimal care (e.g. coordinating care across sites or serving as the primary case manager when care involves multiple specialties, professions or sites). |
| x | **Medical Knowledge:** Demonstrate knowledge about established and evolving biomedical, clinical, and cognate sciences and their application in patient care. |
|  | **Interpersonal and Communication Skills:** Demonstrate skills that result in effective information exchange and teaming with patients, their families and professional associates (e.g. fostering a therapeutic relationship that is ethically sound, uses effective listening skills with non-verbal and verbal communication; working as both a team member and at times as a leader). |
|  | **Professionalism:** Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles and sensitivity to diverse patient populations. |

**Program Format**

Adult learning principles are important to consider when designing the educational method. Indicate the approaches underlying the proposed activity to ensure that the format is appropriate for the objectives and desired outcomes of the activity:

 Indicate the educational methods you plan to use

|  |  |  |
| --- | --- | --- |
| [x]  Lecture | [x]  Case Presentations | [ ]  Workshops |
| [x]  Panel Discussions | [x]  Question and Answer | [ ]  Cadaver Lab |
| [x]  Abstracts | [ ]  Video/Audio Presentation | [x]  Web-Based Interactive/App |
| [ ]  Formal Discussion Groups  | [ ]  Simulations (eg, role playing) | [x]  Audience Response System |
| [ ]  Other:      |  |  |
|  |  |  |
|  |

Indicate methods by which faculty will be selected:

|  |  |
| --- | --- |
| [ ]  Literature Review | [x]  Program Committee/Activity Director Judgment |
| [x]  Past Evaluations | [x]  Faculty Recommendation |
| [x]  Society Leadership Recommendation  | [x]  Other: scientific merit |

Solicitation of Abstracts

Will you solicit abstracts for platform presentations at this activity?

[x]  YES [ ]  NO

Methods of soliciting abstracts:

      We produce and mail out a Call for Abstracts every November. The Call for Abstracts is placed on the Meetings section of the SRS website, the latest news of the SRS homepage and the Annual Meeting and IMAST meeting websites. We also advertise in our E-Newsletters and, other societies’ websites and meetings.

Process of peer review and selection:

      Each abstract is blindly reviewed by five members of our review team which is made up of our Program committee, IMAST committee and selected program reviewers. After all abstracts are scored, the average and Olympic averages are compiled for the committee’s review. The committee then meets to finalize the selection of abstracts.

Rules governing publication of papers presented at your meetings.

      All abstracts for the Annual Meeting must have at least two-year follow up except for those submitted to the Innovative Methods category. Abstracts may not have been previously presented at any other meeting or published in any journals. Abstracts accepted for an Annual Meeting podium presentation may not be presented as an IMAST podium presentation. Also, if accepted as an Annual Meeting podium presentation, the abstract may not be presented as an E-Poster at the meeting.

**Describe the rationale for the Education Format selected:**

The format for the Annual Meeting has changed in the past two years. Evaluations and focus group surveys show that abstracts, lectures, case discussions, and debates remain popular formats for our learners.

We have integrated our Pre-Meeting Course into the full Annual Meeting, changing it to a morning half-day of didactic content to allow for additional abstracts in the afternoon. This course utilizes formats such as lecture, debate, and case discussion.

Abstract sessions remain popular, 155 paper abstracts and 12 case based abstracts have been selected out of 1741 submissions. These will comprise 12 paper sessions (one concurrent) and three concurrent case discussion sessions.

The Half-Day Courses are three hours topical courses, there are two courses that run concurrently on Thursday afternoon. This year the Half-Day Courses each have 7-9 abstracts built into their content. Lunchtime Symposia are one hour sessions, which run concurrently during the lunch hour on Wednesday, also three at a time. These courses do not have a set format and are formatted by the course chairs based on their view of the topic, faculty, and learner needs. Popular formats include case discussions, debates, lectures, and audience response. This flexibility allows our Education and Program committees to test out formats that may be in consideration for larger courses in the future.

**Outcomes**

What are the expected outcomes of this activity in terms of competence, performance, patient outcomes (Check all that apply)?

 [x]  New knowledge

 [x]  Acquisition of new skills or techniques

 [x]  Acquisition of new protocols, policies, and procedures

 [x]  Change in pharmacologic management

 [x]  Change in diagnostic approach

 [x]  More appropriate referral to specialties

 [x]  Improve patient outcomes. (Describe):

 [x]  Other (Specify):Knowledge translation