

# **Comments on UEMS CME Conference (18 November 2011)**

## **General comments**

### **Conference as a whole**

- Very good meeting
- Very useful meeting
- Thank you for good conference
- Well done!
- Thank you for the interesting meeting.
- Excellent and informative meeting.

### **Workshops**

- Break-out sessions: good initiative
- Workshops excellent – good chance to ask questions / clarify points
- Very timely and good discussion.
- Fora was excellent.

### **Interaction**

- Personally I'm quite new in the domain of CME. So I would say the conference was very interesting. Given the numerous spontaneous questions, it seemed to be interesting for a lot of us. Certainly during session 3 → even more interactivity! Would it be possible to have an overview of all questions answered during those sessions. Maybe via the website! Thank you. VW (*e-mail address provided*)
- Missed more interaction between reviewers and providers. It would have been useful for both sides.
- Not enough contact with providers
- Excellent to have the Q&A session.
- Very passive – not a lot of opportunities for interaction.
- No interactivity → no learning (adult learning principles).
- Good opportunity for networking if longer

### **Information / Content**

- Good to see the hard work behind the scenes to establish ECMECs.
- Very happy to have all presentations on a USB stick! Will be a good reference source in future.
- Good to have PPTs
- More specific answers than CME Forum!
- UEMS = not transparent
- Sessions about different levels of organizations + different groups largely irrelevant – would have been more useful to see more detail of how they worked together + what common aims they possess.
- Lacked workshop on evaluation process for LEE and EL

- There were mainly UEMS people telling what they are doing without any other views on CME. “Old boys around the table” meeting. You could work with organizations in education like AMEE and have them contributing to EDUCATION specialty. No women presenting, no younger specialists views. Very concertative thinking on elearning. Would not attend second time. Visit Ottawa conference, AMEE elearning conferences.... Low budget does not mean low content.

### **Expectations**

- It will be interesting to see if this is indeed a forum for discussion or a fait accompli.

### **Organisation**

- Thank you very much for the low registration fee – highly appreciated.
- I liked especially the cost saving way of sponsoring the conference.
- Good organization.
- One day meeting is an excellent idea
- 3 hours without break/drinks is quite long!

### **Other**

- Feedback numbers should be even, so that delegates can't be neutral in their response.
- Is it a conflict of interest if a member of UEMS council is also a member of Eucomed?

### **Comments on specific sessions**

- Session 1
  - o very “dry” presentations
  - o keep it more comprehensive, shortest to the point, one PPT about this would be enough
- Session 2
  - o discussions were good with short presentations
- Session 3
  - o not sure all the questions were answered
  - o should be longer, missing evaluation during plenary sessions
  - o Workshop presentation in room 316: excellent
  - o IIIrd session in the room Blue 314 was not guided properly. The best of it were the participants and 10 min of Dr E. Borman.
  - o Chair in session III was a little disorganized at times but good discussions + good to hear different people's perspective.
  - o More openness for discussion would have been very welcome! Still very interesting meeting.
- Session 4
  - o Did not see the relevance of EUCOMED presentation. EFPIA/ABPI have had all those standards for years.
- Session 5
  - o Should be more interactive, connection with session 3

- General comment
  - o Q&A sessions about practical issues were more useful than plenary presentations about philosophy and concepts.

### **Comments on individual speakers**

- General viewpoint
  - o Overall, a very informative, interesting and engaging meeting with an excellent faculty of experts. Very good in depth discussions.
- Edwin Borman
  - o Excellent
  - o Very good presentation
  - o Excellent presenter who also provided very clear, concise answers to discussion points raised.
  - o Talks were superb and brilliant.
  - o Very good.
  - o Excellent presentations and seems to be a brilliant head!
- Ian Starke
  - o His presentation was informative but nothing new – good presenter.
- John McLoughlin
  - o His lecture was also very informative.

### **Venue**

#### **In general**

- Excellent venue

#### **Location**

- Convenient location
- Perhaps next time venue closer to airport/highway to avoid late arrival due to traffic jam, faster to reach

#### **Outside the rooms**

- Not well signposted. Got lost!
- No internal signs to 3<sup>rd</sup> floor – got lost again!

#### **Inside the rooms**

- Lower part of slides not well visible in back of meeting room
- Lecture theatre – not a good design. Ceiling too low so screen very low – could not see slides.
- Very difficult to see content of slides as projection is too low and not above eyeline of other attendees in rows in front. I appreciate that this is the setup of the hall...
- Difficult to see screen in main room behind people
- Cannot see the bottom of screen.
- Impossible to see screen from row 7 and neither the board members.
- Difficult to see bottom ¼ of screen.
- Very comfortable seats
- Air conditioning was a little too cold.

- During afternoon breakout, could hear other speakers from next room really loudly.
- Expert panel should have sit on higher podium so we would see them.

## **Suggestions**

### **Opportunity to repeat the Conference**

- Next time, would be good to have a breakout session with providers and accreditors together.
- I think this should be an annual event
- Would like to do it again, but with more time.

### **Programme and other issues to be addressed**

- Tracks/breakouts should have been envisaged for various providers (advanced, beginner, provider etc.)
- More time for workshop, less “institutional” presentations.
- Another forum for reviewers to discuss the reviewing process and harmonize their practice would be appreciated.
- Suggest to have two different meetings: 1 for providers, 1 for referees, as they have different needs.
- New meetings should have experience from other countries.
- It would be good to have separate conferences – one for reviewers + one for providers
- Please have more varied voices speaking at meeting – not just UEMS.
- For the future: address problems, differences and obstacles in harmonization of CME in Europe.

### **Gathering information**

- Ask participants to send questions in advance, so that you can already answer on site.
- Prepare answers and feedbacks
- Modernise webpage with information
- Even more practical information
- It would be good to discuss evaluation of CME activities

### **Other**

- Paper for notes would have been welcome
- In future use rooms where you can actually see the chairs.
- There would be significantly more value combining the meeting jointly with the European CME Forum.
- I suggest combining ECF and UEMS/EACCME next year
- Involve gCMEp?
- List of reviewers should be published in web.
- Consult the providers before taking decisions.

### **Would like another meeting next year**

- Please repeat this kind of initiative
- Programme the conference again
- Very interesting and useful, please repeat.
- Continue next year
- Repeat meeting good idea.
- Do it again!
- One full-day meeting yearly would be great!
- Great meeting, thank you. Please have another meeting soon..
- Please repeat this conference annually!
- Continue with this kind of meetings for information and networking!
- Please keep me informed of events like this: (*e-mail address provided*)

### **List of participants**

- Would have been nice to have a list of participants
- No participant list

### **Comments on UEMS policy (from feedback forms and doodle boards)**

#### **e-Learning**

- What is the rationale for allowing only 3 weeks for e-learning programmes to change after not getting accreditation at first try. Especially for longer programmes time to interact with medical experts require time. E.g. think about holiday periods or congress seasons where such people are not easily available. For the initial review you allow 8 weeks to make life easier for our reviewers. Providers will work as fast as possible, but would be happy not to be kicked out because of missing the 3-week deadline.
- Fees for e-learning materials may be too high for some countries/providers. Grants could be explored.
- Feedback from reviewer – “self-indulgent rambling” of the speakers. What was meant by such remark? What is the educational quality of what is being said and how was that evaluated?
- Re E-learning & 12-week application process: Edwin mentioned most accreditation is done prospectively, but it is not practical for us (e-learning provider in UK) to wait 3 months to make a course live on the site. What feedback have you had from other e-learning providers on this and do you have any tips or strategies to help reduce the timescale? (eg submitting before the material has been edited but after peer review).

#### **Live education events**

- Are the LEEs organized thanks to a restricted educational grant from one sponsor still permitted? Can the sponsor logo be published on the program?
- What is the responsibility of the registered Dr?

- Fees for courses addressing small number of participants and with repetitive editions should be lower than fees for 250 participants events.
- Advertising in programme

#### **Nature of the material to be accredited**

- If a live event is video/audio recorded with synchronized slides and available online, is it live event or e-learning?

#### **Evaluations**

- Before implementation of decisions try to get the opinion of the National countries – Might be helpful to avoid “conflicts” . What about COI if one of us belongs to Eucomed. Re-specify clearly the meaning of provider.

#### **Application process**

- Docs UEMS have guidelines or templates about what document/information the faculty should provide to fulfill the disclosure of conflicts of interest?

#### **Other**

- Who should decide which CME/CPD activities a doctor attends? The doctor? The employer? The state?
- Possibility to get feedback from the provider’s activity.
- Have you thought about accrediting programmes instead of event and leaving each country do an ethical review of the events instead? (when same content is presented in multiple countries?)
- Is there a website where all European countries regulatory rules can be found?
- Quality, needs assessment, outcome evaluation
- Robin Stevenson’s journal
- Accreditation for Italy