Project Summary September 2001

Assessing Physicians’ Continuing Medical Education Needs in the U.S.-Associated Pacific Jurisdictions

Background: The Pacific Islands Continuing Clinical Education Program (PICCEP) during 2001-2003 provided 15,000 hours of regional continuing clinical education (CCE) to physicians and other clinicians in the six U.S.-affiliated jurisdictions of the Pacific Basin. The program responded to widely documented health workforce needs and poor health status in the region. PICCEP embarked on this work with a commitment to developing programs that would reflect the stated and observed CCE needs of the region’s providers themselves. It achieved this understanding in part by conducting a needs assessment survey in 2000 that asked physicians about training experiences and priorities for clinical education.

Methods: The questionnaire included open- and closed-end questions about experiences with and the utility of continuing medical education (CME), priority topics and skills, availability of medical references, and preferred venue and duration of CME events.

Depending on the jurisdiction, the survey was delivered either by the regular post service, in person, or by e-mail.

Major Findings:

✖ 143 physicians in the region responded to the survey, with response rates ranging from 18 to 85 percent, depending on jurisdiction.
✖ 64 percent of respondents had attended a CME event during the previous two years (1999-2000), but most were short (one to two hours) and of variable utility.
✖ Among communicable disease topics respondents listed as priorities were tuberculosis, HIV-AIDS, and tropical diseases.
✖ Among noncommunicable disease topics listed as priorities were diabetes, hypertension, and heart disease.
✖ Among skill topics that physicians ranked highly were assessing trauma patients, interpreting EKGs and x-rays, and cancer screening.

Policy Implications: PICCEP’s survey of Pacific Basin physicians in preparation for CCE confirmed the value of self-assessment for learning needs. The survey’s high response rates, especially in smaller jurisdictions, reveal the importance the region’s physicians placed on developing and maintaining their clinical skills. Data from the survey informed and guided PICCEP’s implementation of CCE over three years, and it confirmed the value of the program’s guiding principles, which emphasize locally relevant and sustainable interventions.