



Association of Medical Microbiology and Infectious Disease Canada  
2012 Continuing Medical Education Needs Assessment

Executive Summary

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## **The AMMI Canada 2012 Continuing Medical Education Needs Assessment**

From May to October 2012, AMMI Canada conducted an online survey to determine members' continuing medical education needs. Paper surveys were also available by e-mail. The goal of the survey was to find out what topics are of interest to members, and to determine how members wish to receive continuing medical education (online, in person, etc). A total of 145 members responded (approximately 24% of total members). The results of this survey will be used to prioritize and guide continuing medical education offerings by AMMI Canada. The Comprehensive Report (available from AMMI Canada) contains a detailed report and analysis of the survey results.

### **Demographics**

The demographics of the respondents indicated a representative sample from AMMI Canada members for age, gender, years in practice, practice type, and education. These demographics suggest that the responses reported for the survey are likely generalizable to the AMMI Canada membership. The only area that may not be generalizable is geographic location, as no respondents reported being from rural areas.

### **Methods for accessing continuing medical education**

Most of the respondents currently access CME by taking part in hospital rounds/journal clubs and conferences. Conferences (especially international) remain a popular choice when respondents are asked about most preferred ways to access CME. One of the possibilities that AMMI Canada might want to consider is to occasionally offer an international location for the annual conference.

### **Online learning**

About 1/3 of respondents currently use online learning opportunities for CME. Those who do not use online CME indicated it was either due to lack of interest, lack of time, or lack of user friendly tools. This is an area where AMMI Canada could offer links or develop online self-learning modules for members.

In regards to paying for online CME, 60% of respondents said they would be willing to do so, provided that the online learning was:

- High quality
- Reasonably priced
- Not available elsewhere for free

### **CanMEDS roles**

When asked about CanMEDS roles, respondents indicated that Medical Expert was “very important”, while Collaborator, Manager, and Health Advocate roles were “not very important”. However, when asked about specific aspects of each role (not categorized under the CanMEDS headings), respondents showed strong interest in aspects of Collaborator and Manager. The Professional role aspects were not of much interest to the respondents, but Scholar aspects generated interest.

## Specific Infectious Disease Continuing Medical Education Themes

Respondents were given the opportunity to select themes of interest from a comprehensive list. When a theme was selected, respondents were then given the opportunity to indicate their interest in a variety of subtopics, and to indicate their preferred mode of learning. The comprehensive report lists results for all subtopics.

### Themes of Interest (in order of popularity):

Theme	# selecting	% selecting
Antimicrobial stewardship	46	32%
Travel & International medicine	36	25%
Laboratory	33	23%
IT	26	18%
Viruses (HIV and hepatitis under special hosts)	24	17%
Infection control	22	15%
Special hosts (other than HIV)	21	14%
Gram positive bacterial infections	20	14%
Epidemiology	20	14%
Gram negative bacterial infections	20	14%
Quality Assurance	19	13%
Fungi	18	12%
Pharmacokinetics	18	12%
Teaching and learning	18	12%
Hepatitis B&C	17	12%
Immunizations	16	11%
Scholarly activity	16	11%
Parasites	14	10%
Special hosts (HIV)	14	10%
Pediatrics	13	9%
ICU	12	8%
Atypical bacterial infections	11	7%
Mycobacteria	9	6%
Occupational health – IP related	9	6%
Miscellaneous	1	.01%

### Modes of learning

For the majority of themes, online self-learning modules and conference workshops were the preferred modes of learning for each subtopic. For some subtopics, recommended readings and e-mailed tips and alerts were preferred. The least preferred modes were videoconferences and podcasts. This may have been a result of lack of familiarity with these modes of learning.