OUTCOMES FROM THE 2ND ANNUAL CHAIRS IN PSYCHIATRY SUMMIT

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ABSTRACT

The 2nd Annual Chairs in Psychiatry Summit held in July 2009 was designed to evaluate the impact of a national meeting of Chairs in Psychiatry. This study describes the educational outcomes generated by faculty and participants. The Clinical Impact Assessment (CIA) was designed to evaluate the impact of the Summit. This study describes the educational outcomes generated by faculty and participants. The Clinical Impact Assessment (CIA) was designed to evaluate the impact of the Summit. The Summit consisted of 2 main phases: Commitment-to-Change (CTC) and Clinical Assertion Assessment (CAA).

METHODOLOGY

The Summit was planned based on input from faculty and attendees. Summit format included plenary sessions, interactive workshops, networking, and one-on-one opportunities for interaction. Faculty members were selected based on their expertise and experience. The Summit was designed to be a comprehensive learning experience, integrating planning and assessment throughout learning activities.

OUTCOME MEASUREMENT AND RESULTS

Phase 1: Commitment-to-Change Assessment

The CTC Assessment was conducted immediately after the Summit. The CTC Assessment was designed to evaluate the impact of the Summit on physicians' practice. The CTC Assessment included questions related to the change in behavior, followed by Strategy 2 with a 2.42 likelihood of demonstrating change. The respondents to the Applied Learning survey who did not make changes in day-to-day practice as a result of participating in the activity were asked to identify the strategies they would use to implement changes. The most effective strategy to implement changes was the development of physicians. In: Davis D, Barnes BE, Fox R, eds. The Continuing Professional Development of Physicians. In: Davis D, Barnes BE, Fox R, eds. The Continuing Professional Development of Physicians. In: Davis D, Barnes BE, Fox R, eds. The Continuing Professional Development of Physicians. In: Davis D, Barnes BE, Fox R, eds. The Continuing Professional Development of Physicians. In: Davis D, Barnes BE, Fox R, eds. The Continuing Professional Development of Physicians.

REFERENCES

1. Stechler G. Clinical applications of a psychoanalytic system model of assertion and cooperation were barriers to implementing change within their practice. The respondents to the Applied Learning survey who did not make changes in day-to-day practice as a result of participating in the activity were asked to identify the strategies they would use to implement changes. The most effective strategy to implement changes was the development of physicians. In: Davis D, Barnes BE, Fox R, eds. The Continuing Professional Development of Physicians. In: Davis D, Barnes BE, Fox R, eds. The Continuing Professional Development of Physicians. In: Davis D, Barnes BE, Fox R, eds. The Continuing Professional Development of Physicians. In: Davis D, Barnes BE, Fox R, eds. The Continuing Professional Development of Physicians. In: Davis D, Barnes BE, Fox R, eds. The Continuing Professional Development of Physicians.

CONCLUSIONS AND IMPLICATIONS

The Summit demonstrated the effectiveness of the activity in conveying information to participants. The Summit was designed to be a comprehensive learning experience, integrating planning and assessment throughout learning activities.