### Final Objectives 2023-24

#### **Education Committee**

Chair: John Bailitz, MD, FACEP

Board Liaison: Alison J. Haddock, MD, FACEP

Staff Liaison: Suzannah Alexander

- 1. Recurring Duties: Always focused on adding significant educational value to our membership while generating sustaining revenue for the College's advocacy efforts on behalf of our patients and members.
  - a. Review and provide educational expert feedback on the following ACEP-generated reports:
    - Annual Educator and Education Committee and Subcommittees Demographics Report to increase diversity, equity, and inclusion in all ACEP education activities.
    - Annual Needs Assessment
    - CME process and applications
  - b. Purposefully increase diversity, equity, inclusion, and belonging within ACEP education.
    - Recruit leading URM (Under-Represented in Medicine) educators to the ACEP Education Committee, subcommittees, and advisory group.
    - Mentor new URM committee members to successful membership and leadership roles.
  - c. Submit a nomination for the annual Judith E. Tintinalli Award for Outstanding Contribution in Education.
  - d. Review Education Committee objectives, subcommittee structure, subcommittee chairs, and membership.
    - Explore the development of a new subcommittee co-chair structure (elect, current, immediate past) and regular terms for membership (3 years), and term renewal policies (self-nomination and chair review) to increase transparency and engagement.
    - Explore and create new subcommittees to support ongoing and new ACEP Education Committee efforts including the Teaching Fellowship and other innovative programs.
- 2. Review ACEP's new Strategic Plan to identify potential opportunities to educate our membership.

#### Educational Meetings Subcommittee

- 1. Ensure each track for *Scientific Assembly* includes at least one didactic session with a learning objective related to systemic racism and social determinants of health in accordance with Resolution 22(21) Expanding Diversity and Inclusion in Educational Program.
  - For example, differences in cardiovascular disease presentations, current outcomes, and strategies to improve among women and other currently under-represented groups.
- 2. Review ACEP Clinical Policies, Guidelines, and Quality Measures and incorporate them into didactic objectives as appropriate.
- 3. Pilot at least three innovations annually within any of the areas below:
  - Attendee engagement: general or special interest group.
  - Investigator engagement, including improving the visibility, prestige, and integration of the research forum and community.
  - Collaboration with other leading EM organizations and Education Providers.
  - Novel and active educational delivery methods.
  - Sponsor engagement.
  - Spaces for focused interviewing and networking.
  - Other.
- 4. Increase diversity, equity, and inclusion within ACEP Educational Meetings.
  - a. Recruit leading URM educators to the ACEP *Scientific Assembly* Planning Committee and other educational meeting planning subcommittees.
    - Mentoring all new committee members to successful membership and leadership roles.
    - Identifying and mentoring URM faculty to successful first and subsequent lectures.
- 5. Examine and improve the process of soliciting, reviewing, providing feedback, and implementing new course proposals, particularly those originating from sections, committees, and other interested member groups within the College.

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#### EMS Education Subcommittee

- 1. Review current ACEP educational products directed at EMS Medical Directors.
- 2. Identify ongoing and future ACEP EMS Director Educational needs.
- 3. Determine whether the EMS Education Subcommittee should continue as a subcommittee of the Education Committee or instead within the EMS Committee and/or have the subcommittee chair become a liaison to the Education Steering Subcommittee.

# Continuous Competency & Certification (CCC) Subcommittee

- 1. Review current and proposed new national requirements, state requirements, and ABEM requirements:
  - Identify current ACEP educational products that will meet these requirements.
  - Propose effective new ACEP educational products to meet these requirements.
- 2. Identify and facilitate areas of collaboration between ACEP and ABEM to better educate members on ACEP guidelines, quality measures, and evolving topics in EM (Such as Sepsis, Deliveries in Rural Areas, Stroke, and Opiates) and track performance on ABEM examinations.
- 3. Evaluate current standards for EM clinicians' Ongoing Professional Practice Evaluation and Focused Professional Practice Evaluation (OPPE and FPPE) to determine if there is an opportunity for ACEP to provide practical guidance for local hospitals and emergency physician practices.

## Educational Innovations Subcommittee (formerly Online Education)

- 1. Review all existing ACEP educational products, IT platforms, and collaborations.
- 2. Compare ACEP's educational portfolio to other leading medical organizations and medical education providers' offerings and determine how to best focus our efforts and potential opportunities to collaborate.
- 3. Work with ACEP staff to develop a process for soliciting, reviewing, providing feedback, and implementing new product proposals, particularly those originating from sections, committees, and other interested groups of members with the College.
- 4. Create proposals for new educational products in areas with clearly identified needs.
  - Develop and deliver a CME module to instruct physician-led teams based on the curriculum identified by the stakeholders for physicians who are post-residency as directed in Amended Resolution 63(21) Physician-Led Team Leader Training (second resolved).
  - Consider and collaborate with ACEP staff to create packages of existing and new educational products for specific interest groups within ACEP, including URM groups, Women in EM, Parents, Residents (EMRA and CORD), YPS, career transitions, etc.
  - Advise ACEP staff on the creation of a transparent, robust, and concise process for the proposal of new educational products by committees, sections, interest groups, chapters, and even individual members.