President’s Page: Continuing Investment in “State-of-the-Art” Physician Education—an ACCF Program of High Net Worth

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In response to comments and questions from many members over the last few months about future American College of Cardiology (ACC) plans for educational programs, I will use this issue to clarify this critical area of emphasis, declared first and foremost in the College’s mission statement.

The ACC, incorporated as a teaching institution in 1949, has always had education fundamentally at its center and has strengthened this focus on education through the ACC Foundation (ACCF). The ACCF education includes the Annual Scientific Session, all live educational programs (domestic and international), self-assessment products, and Web-based education, primarily Cardiosource. The College’s history in continuing medical education (CME) has been achieved through a veritable army of expert volunteers who collectively represent ACC intellectual capital. Their work as faculty is the College’s intellectual property.

Growth and progress have changed the traditional landscape of education, which today can include distance learning, online lectures, and Web-based discussion groups. Traditional live CME programs, in particular, have borne the impact of our collective accelerated professional pace and the time constraints of travel. All these factors have challenged the successful presentation of live educational programs at Heart House. Although changes in the scope and number of ACCF CME programs may have become noticeable recently, I would like to be clear about one indisputable fact: the College is not retreating from education. On the contrary, the College is devoting more volunteer time, more staff time, and more money than ever before to education in an effort to provide on-demand programming tailored to the broad spectrum of cardiovascular specialists associated with the College.

EDUCATIONAL PROGRAMMING ADVANCEMENTS

Like medicine, educational media and teaching methodologies were subject to many new technologies and ideas in the last several decades. The College, recognizing the need to stay competitive in its educational presentations, responded through its task forces, work groups, and committees, which recommended specific changes in ACCF CME programs. In turn, the appropriate committees and work groups immediately began to implement these recommendations. The central effort—Cardiosource—is moving ahead successfully as ACC’s major e-learning vehicle.

An area of greater challenge, however, has been live programs. The Live Programs Work Group (LPWG) has taken direction from the Budget, Finance, and Investment Committee, the Executive Committee, and the Board of Trustees (BOT). The LPWG has changed the array of ACCF live programs by introducing new, more varied programs that provide greater flexibility and improved responsiveness to emerging information and market needs. The new program also represents a greater variety of the subgroups within cardiovascular disease, and seeks to ensure a balanced budget. Nonetheless, the last two objectives have been difficult to meet. For example, we continue to offer many programs in echocardiography but no coronary interventional programs. And though educational programs must reflect all direct and indirect expenses, some long-standing programs have had difficulty meeting their bottom lines.

IS A LEARNING CENTER IN HEART HOUSE’S FUTURE?

Much to the dismay of some ACC members, the Property Task Force, after lengthy study and deliberation, recommended to the BOT that the existing Learning Center classroom be closed. Simply put, the College would have had to invest millions of dollars to bring it up to state-of-the-art standards. Due to the Learning Center’s central location within Heart House, the entire facility would have had to close during renovations, necessitating the temporary relocation of headquarter’s operations during that period. Furthermore, the ACC still would be limited by zoning restrictions and other property constraints such as insufficient parking (for staff and program attendees) and underutilized space. Although the existing Learning Center classroom and support areas occupy a significant portion of Heart House’s present square footage, it serves only 4% or fewer of the ACC membership—mainly members from the surrounding environs. The BOT has not modified this decision since it was rendered three years ago. At the BOT’s request, some Learning Center programs were taken “on the road” in an effort to better assess other existing state-of-the-
art educational facilities and various geographic locations. This test is ongoing.

Moving forward, the LPWG undertook the serious work of developing selection criteria for programs and communicating these to program directors. The College also engaged an external reviewer to conduct a business process analysis of live programs. These findings were reviewed by the Executive Committee in November and the BOT in December.

Regardless of new findings, the BOT insists that a prerequisite feature of our future Heart House must be a facility that can “support the effective operations of ACCF staff by facilitating learning and knowledge-sharing, encouraging collaboration and interaction, [and] leveraging state-of-the-art technology.” Other prerequisites include a multipurpose space that could be configured to accommodate a stage and auditorium-style seating and incorporate a simulation suite. Certainly such spaces will be conducive to the learning experience in any educational programs we present for the foreseeable future.

PRESENTLY ON THE ROAD TO THE FUTURE

In 2004, the College will support 41 live educational programs: 33 CMEs; 3 new; and 5 co-sponsored. A sample of these programs is provided at the end of this President’s Page. The Annual Scientific Session alone will present 545 educational sessions in New Orleans, including eight Spotlight Sessions and a task force to review ACC ’04. Previous recommendations from oversight task forces have strengthened this particular educational venue and resulted in the addition of Spotlight Sunday, more scientific critiques, more expert discussion of clinical applications through case-based, evidence-based teaching, the addition of the well-attended Highlights Session, and the addition of highly interactive poster sessions and informal breakfast and lunch panels. Also we will conduct our first community cardiovascular health and education program just preceding ACC ’04 in New Orleans.

Other ACCF educational products include 11 self-assessment programs in various formats, two new Clinical Focus products, and the expansion of Cardiosource, with new CME opportunities and programming to support recertification. The College—far from retreating from education—is changing and improving its educational offerings to remain at the forefront of the CME environment.

The ACC recognizes that young cardiology educators need a high-quality training ground, that many physicians and paramedical professionals have depended on the ACC for outstanding CME opportunities, and that many thousands of patients have benefited from the education that their health care professionals received at ACCF courses. The College is not about to turn its back on those needs or its past accomplishments.

Instead, over the last year or so, the College has involved itself in broad experimentation with novel educational techniques and methodologies in order to provide greater access to improved educational materials for its members. The path, perhaps, has been rocky, but we expect the results to be rewarding and long-lasting for our educational programs of the future.

To summarize our direction for educational programs, I borrow an apt quote from hockey great Wayne Gretzky, who shared his winning game strategy: “Skate where the puck is going, not to where it’s been.”

SAMPLE ACCF 2004 CME PROGRAMMING

Perspectives on New Diagnostic and Therapeutic Techniques in Clinical Cardiology
Jan. 30 to Feb. 1, Lake Buena Vista, FL
(Directed by C. Richard Conti, MD, and Jamie B. Conti, MD)

Comprehensive Update in Carotid Stenting
March 26–27, Miami, FL
(Directed by William A. Gray, MD)

Cardiovascular Magnetic Resonance Imaging: State of the Art, Including an Update on Computed Tomography
May 2–4, Williamsburg, VA
(Directed by W. Gregory Hundley, MD, and Christopher M. Kramer, MD)

Congenital Heart Disease in the Adult: A Combined International Symposium
June 6–9, Stevenson, WA
(Directed by David J. Sahn, MD, Peter P. Liu, MD, and Gary D. Webb, MD)

International Heart Failure Summit: From Pathophysiology to Clinical Practice
June 10–12, Toronto, Canada
(Directed by Peter P. Liu, MD, Jean L. Rouleau, MD, and Michael J. Sole, MD)

New Approaches and Procedures in Nuclear Cardiology
June 17–19, Chicago, IL
(Directed by Jeffrey A. Leppo, MD)

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