Evaluation Results of BCERP Continuing Medical Education for Pediatric Health Care Professionals

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**Supported by NCI & NIEHS (1R21ES027418-01)
Our CME Training

CME Modules

• Module 1 – The BCERP
• Module 2 – BCERP Science & Risk Reduction
• Module 3 – Communication Skills Training & Caregiver Preferences
Our CME Training

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CME Evaluation

CME Modules
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Evaluation Method

Provider Recruitment
- N=100 pediatric health care providers

- Snowball sample via national organizations, children’s hospitals, local clinics
  - Asked to pass along to colleagues
Evaluation Method

Baseline → Training → Post-Test → 3-Week Follow-Up

Knowledge → Knowledge
Feedback → Knowledge
Dissemination Intention → Actual Dissemination

(91% Retention)
Evaluation Results

Feedback:
- The training helpful, useful, well-designed, relevant

Sample average = 4.55
Evaluation Results

Knowledge:

Module 2

T1  T2  T3
65% 73% 74%

Module 3

T1  T2  T3
78% 87% 85%
Evaluation Results

Behavior:

Intention to Disseminate

\[ M = 4.27 \]

Self-Report Dissemination

\[ M = 4.05 \]

\[ B = 0.46 \]
Evaluation Results

Behavior:
• Quotes about behavior change

“I have discussed with two other primary care pediatric practitioners and recommended participating in this study and I am hopeful that they will integrate into their practice.”
Evaluation Results

Behavior:
• Quotes about behavior change

“I had a patient ask about how they would be able to know if they had breast cancer. I used that as an opportunity to also educate on prevention of breast cancer.”
Evaluation Results

Behavior:
• Quotes about behavior change

“I currently work in pediatric oncology and when parents and patients have asked me what they can do to avoid other forms of cancer later in life, I have used these learning points with my patients and their parents.”
Evaluation Results

Behavior:
• Quotes about behavior change

“Not only have I integrated them into practice, but I’ve brought them to fellow parents at school, on the sidelines of the soccer game and at ballet practice.

I chose to start using these recommendations because pre-puberty is an essential time to introduce these topics to my patients. The earlier the patients learn these recommendations, the more they will continue to practice them throughout their lifetime.”
Evaluation Results

Behavior:
• Quotes about PLANNING behavior change

“I haven't fully began to integrate these recommendations into practice. However, I will soon and I choose to because it important and can reduce risks by educating early.”
Key Takeaways

- CME is useful mechanism for dissemination of BCERP research
- Quantitative measure of mixed provider knowledge
  - But, can be targeted and improved
- Providers are willing to learn about and disseminate BCERP information
  - Recall nuance even 3 weeks later
- Can expect BCERP information to widely disseminate upon CME launch
Thank You!

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