



Overall Program



Overview – NACE Live Meetings

Presented to over 2,000 nurse practitioners and physician assistants nationwide as part of the National Association for Continuing Education's Clinical Updates for Nurse Practitioners and Physician Assistants 2019. This included:

- Nine regional meetings across the county
- A simulcast of one of these meetings
- One stand-alone live webinar
- All featured:
 - Recognized experts chosen for their influenza expertise and teaching skills
 - o Pre- and Post-"Practice Gap" assessments
 - o A discussion of the prevalence of influenza, both nationally and specific to the location of each meeting
 - o A review of vaccination and other antiviral treatments based on CDC and other guidelines

Overview – QI Initiative (Outcomes forthcoming)

Lancaster General Health Physician Grand Rounds: What's New with the Flu 2019/2020

- Educational meeting in fall 2019 focusing on the impact of influenza, its
 prevalence and severity in the community and nationally, guidelines for
 treatment, vaccination, and available antiviral treatments
 - Open to ~300 clinicians at 34 LGHP practices and ~75 clinicians at 6 LGHP urgent care centers
- LGHP Community (Patient) Outreach:
 - Community awareness campaign to highlight the importance of prompt diagnosis and treatment options
- LGHP EHR Analysis (Level 6 Outcomes):
 - o Program success will be measured using Epic EHR data from the 6 LGH urgent care centers.

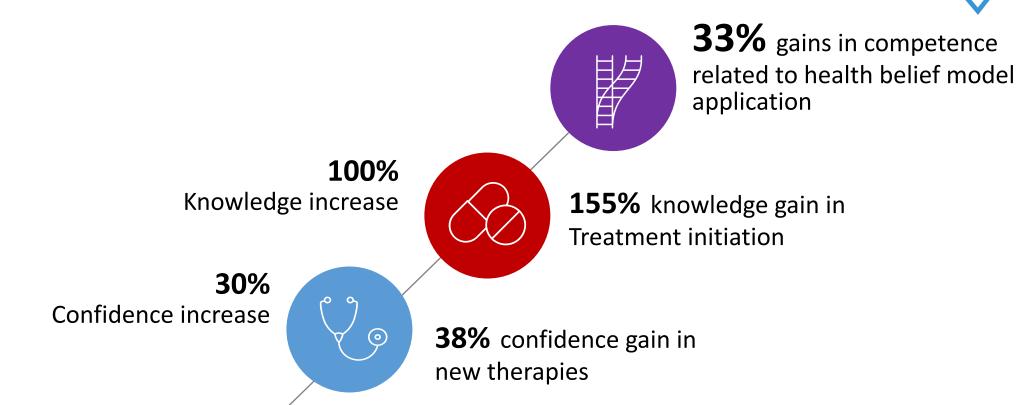
"As someone who has yet to learn these studies and practices; I can comment that I learned a lot more about influenza and physician activities"- Live meeting attendee





Educational Impact Summary





2,598 participants
72%, NP 10% PA
89% Primary Care, 4% Cardiology



Exceeded goal of 2,000 learners

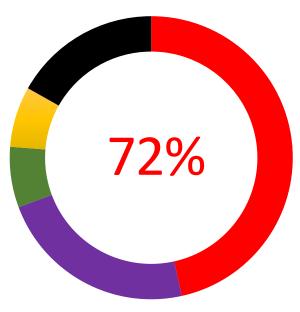




Learner profile - NACE Meetings



Profession



Nurse Practitioner

10 % PA 12% MD/DO 3% RN

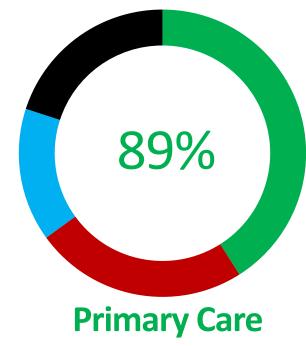
3% Other

2,598 participants

See 53 patients per month

Averaged 12 years in practice

Specialty



4% Cardiology
4% Emergency Medicine/Critical Care
2% Hospitalist
1% Endocrinology





Program Faculty





Charles Vega, MD Clinical Professor, Family Medicine

Director, UC Irvine Program in Medical Education for the Latino Community (PRIME-LC), Family Medicine

Associate Dean for Diversity and Inclusion, School of Medicine Irvine, CA

Paul Auwaerter, MD, MBA

Professor of Medicine

Johns Hopkins University School of Medicine

Baltimore, MD



Donald B. Middleton, MD

Professor of Family Medicine

UPMC St. Margaret

University of Pittsburgh School of Medicine

Pittsburgh, PA





Learning Objectives



New & Emerging Therapies

Assess new and emerging antiviral therapies profiles used to treat influenza.

Treatment Initiation Guidelines

Explain and apply CDC and other guidelines for initiating treatment for influenza in specific patient populations.

Effective Communication

Demonstrate effective communication techniques to address perceptions of symptom severity, vaccination measures, and therapeutic safety and efficacy.

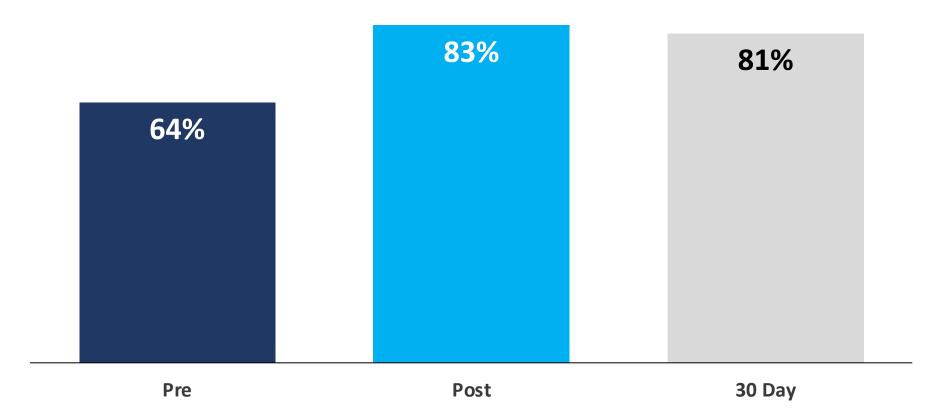




Confidence - Overall



Clinician confidence increased by **30**%* post and was retained on follow-up





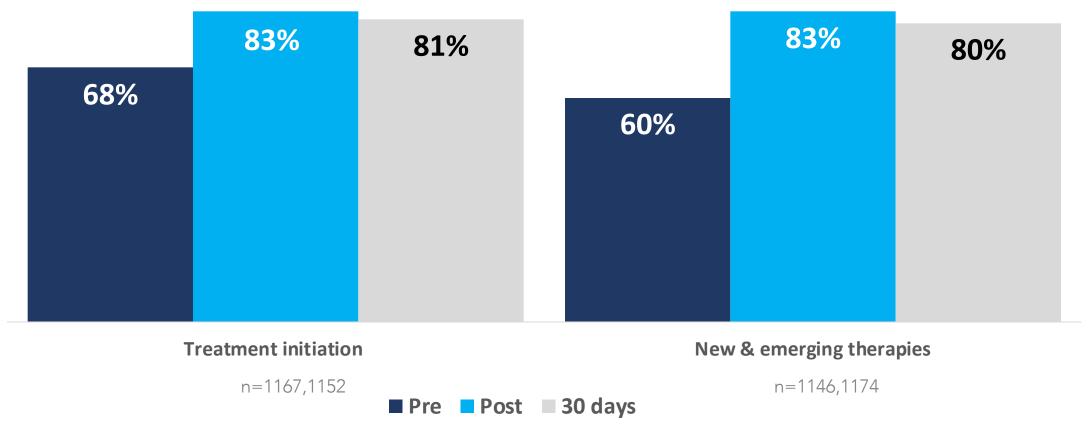
n=2313,2326,1399



Confidence - By Objective



As reflected in the knowledge results, clinician confidence related to new and emerging therapies increased by 38% post



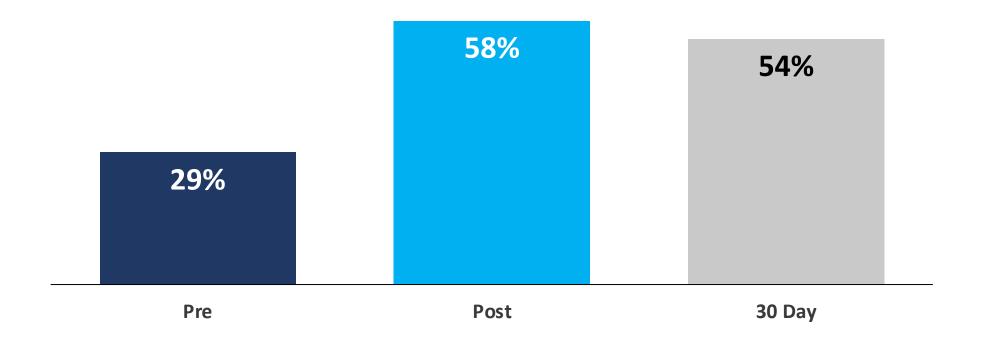




Knowledge - Overall



Clinician knowledge increased by 100%* post and was largely retained



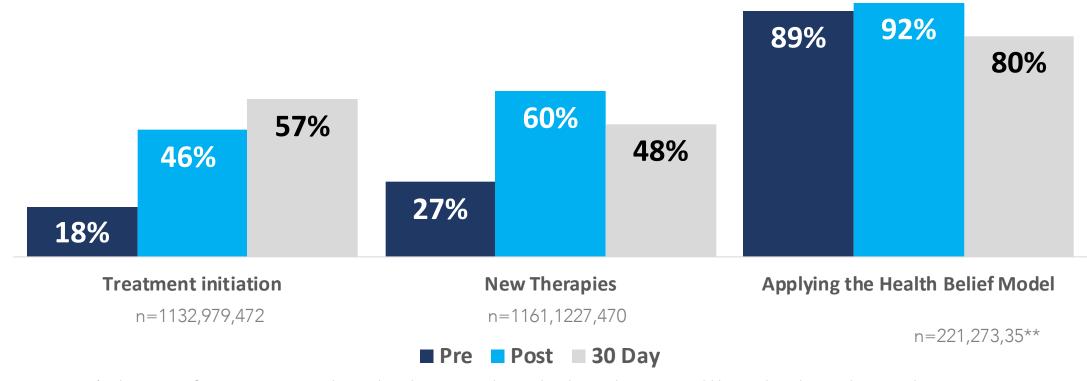




Knowledge – By Objective



While significant* gains were seen in *treatment initiation* and *new therapies*, data indicates further education would be beneficial in these areas





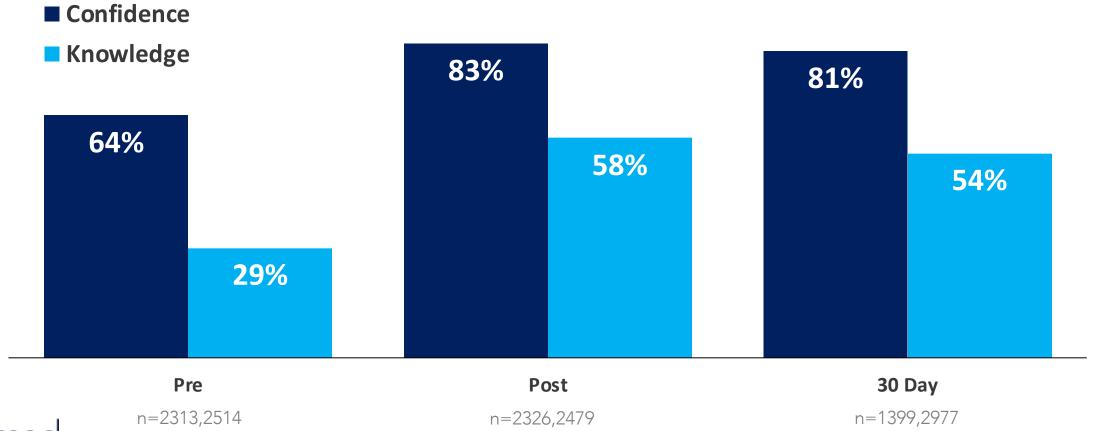
^{*}indicates significance p<0.001; i.e. there is less than a 0.1% chance the observed increase could be attributed to random sampling error.

^{**}Disproportionately lower sample sizes with this data series because this instrument was implemented in 2 of the 10 total live meetings

Confidence vs Knowledge



Clinician confidence was 121% higher than knowledge pre, though this disparity narrowed to 43% post and 50% on follow-up



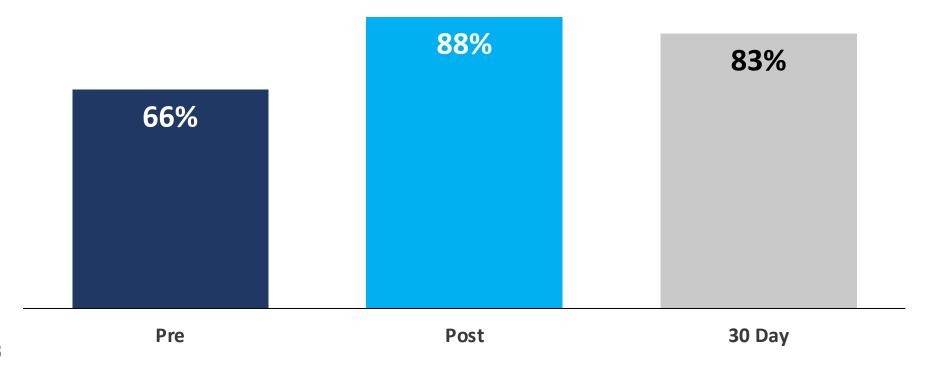




Competence – Patient Beliefs



Clinician competence related to applying the Health Belief Model increased by 33%* post and remained elevated





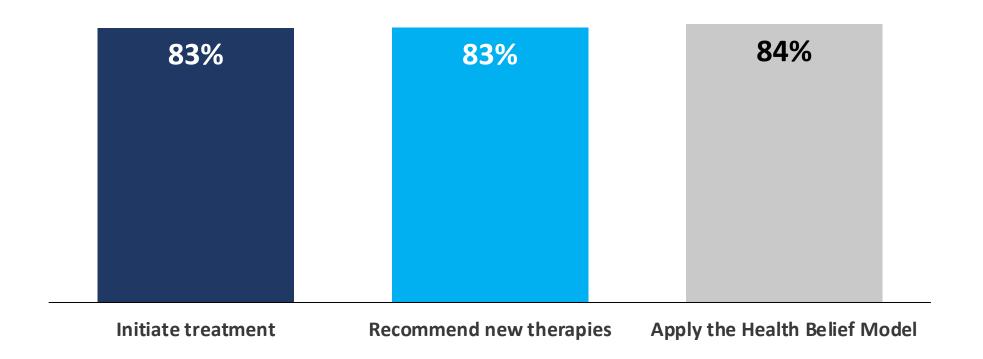


Practice Change – 30 Day



On average, 83%* of learners cited practice changes on follow-up

Clinicians were better able to:



Barriers — 30 Day



78% of participants indicated they encountered no barriers to practice change or were able to overcome them



Barriers encountered by participants:

- "Insurance coverage/cost/Accessibility." (n=14)
- "Adherence/compliance." (n=5)
- "Time." (n=2)

N = 472

Q Key Takeaways





2,598 Participants

- **72%** NP, 10% PA, 12% MD/DO, 5% RN
- 89% Primary Care, 4% Cardiology
 - Saw 53 patients with suspected influenza each month
 - Averaged 12 years in practice



100% improved knowledge

- There were significant knowledge increases pre- to post-activity
 - Treatment initiation
 - New therapies
 - Health Belief Model
- Knowledge remained elevated on follow-up, though further education needed on treatment
- Confidence increased by **30%**
 - New therapies **38%**
 - Treatment initiation 22%



33%Competence gains

- **33%** gains in the area of applying *The Health Belief Model*
- Clinicians were better able to::
 - o Initiate treatment- 83%
 - o Recommend new therapies 83%
 - o Apply Health Belief Model **84%**
- 78% encountered no barriers or overcame them