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Explanation of Gaps, Needs, Objectives and Needs Sources

Explanation of Professional Practice Gaps
A gap is the difference between a current level of knowledge, competency, performance or patient outcome and the ideal or desired level. Essentially it's the difference between actual (what is happening) and ideal (what should be happening).

Gaps are the description of a problem in practice – in research practice, clinical practice, educational practice, and/or administrative practice. Gaps can be at the individual level, the group level, the community of providers level, etc.

Gaps exist when providers:
- Are not doing everything they could be doing.
- Are not doing things correctly.
- Could improve what they are doing.

Gaps can be in:
- Knowledge (providers don't know something).
- Competence (providers don't know how to do something).
- Performance (providers not doing something in their practice).
- Patient outcomes (the consequences of performance).

General Examples
- Misdiagnosis because of lack of knowledge or understanding. (Knowledge Gap.)
- Suboptimal patient care because of lack of strategies or methods to intervene under certain clinical conditions. (Competence Gap.)
- Suboptimal patient outcomes because of lack of action, intervention, barriers, etc. (Performance Gap)

Specific Examples
- Inappropriate technique and use of ultrasound leading to complications and medical errors.
- Not successfully implementing goal-directed therapy and target therapy is leading to worse outcomes.
- IBS continues to be a common condition encountered by health care professionals, but is often not recognized.

Explanation of Educational Need

A need can be defined as the cause or reason for the educational gap. Why does this problem exist? Is there a lack of knowledge, competence or performance?

Gaps exist when there's a:
- Lack of prompt or early recognition of …..
- Inappropriate management of ……
- Application of wrong or incorrect techniques.
- Not applying current clinical algorithms.
- Challenging to stay current with rapid advances in the field, new drugs, etc.
- Treatment not happening in a timely manner.
- Lack of experience in managing or treating conditions.
- Lack of education or training.
- Training is inadequate, inefficient, out of date, etc.
- Condition is difficult or challenging to diagnose or treat.
- Condition is poorly understood.
- Providers don't know when to refer patients to a specialist.
- Providers lack the time to properly diagnose and/or treat condition.
- Providers don't get appropriate patient history.
- Patient not in compliance with treatment or doesn't adhere to treatment protocol.

Explanation of Objectives

The objectives are the solution to address the need and help close the gap. Objectives show what changes are anticipated (in knowledge, competence, performance and/or patient outcomes) as a result of the continuing medical education activity.

Explanation of Needs Assessment Sources

How do you know that the gaps and needs exist? What evidence do you have? Outline the methods used to identify gaps, needs, etc.

When looking at needs assessment sources, ask yourself:
- What patient problems or professional challenges is the target audience unable or struggling to meet?
- Why are they unable to address those patient problems or challenges?
- What evidence, data, or sources were consulted in the identification of the professional practice gaps?

Professional practice gaps are identified by the course chair(s) and/or the planning committees who use:

- Surveys of patients and physicians
- Data from peer-reviewed publications.
- Direct interactions with physicians.
- The introduction of new techniques or procedures.
- Educational needs of learners that underlie the professional gaps are identified through prior course surveys.
- Expert opinion and recent data from public health sources.
- Reported morbidity/mortality gaps and evidence of misdiagnosis or mistreatment.

Practice gaps and needs are identified through staff and management discussions, including through resources such as:

- Data from other organizations with similar membership and audience.
- Member opinion surveys.
- Online member forums, activity evaluations and pre- and post-test scores.
- Input from consultants and topic experts.
- Government regulations with which physicians must comply.

Gaps are identified through:

- Physician self-observation.
- Observed performance in the patient care setting.
- Referral patterns.
- Quality data generated from the institution's affiliated hospitals.
- National performance measures.