Core Competencies

CME activities should be developed in the context of desirable physician attributes. The American Board of Medical Specialties (ABMS)/Accreditation Council for Graduate Medical Education (ACGME) have designated competencies based on Maintenance of Certification. In addition Institute of Medicine (IOM) has similar core competencies.

**Patient Care or Patient-Centered Care:** identify, respect, and care about patients’ differences, values, preferences, and expressed needs; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health.

**Medical Knowledge:** established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social behavioral) sciences and the application of this knowledge to patient care.

**Practice-Based Learning and Improvement:** involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care.

**Interpersonal and Communication Skills:** that result in effective information exchange and teaming with patients, their families and other health professionals.

**Professionalism:** commitment to carrying out professional responsibilities, adherence to ethical principles and sensitivity to a diverse patient population.

**System-Based Practice:** actions that demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.

**Interdisciplinary Teams:** cooperate, collaborate, communicate and integrate care teams to ensure that care is continuous and reliable.

**Quality Improvement:** identify errors and hazards in care: understand and implement basic safety design principles such as standardization and implications; continually understand and measure quality of care in terms of structure, process and outcomes in needs; and design and test interventions to change processes and systems of care, with the objective of improving quality.

**Utilize Informatics:** communicate, manage knowledge, mitigate error, and support decisions making using information technology.

**Employ evidence-based practice:** integrate best research with clinical expertise and patient values for optimum care, and participate in learning and research activities to the extent feasible.