**ASPS Education Program Mission Statement**

**Prologue:**
The mission of the American Society of Plastic Surgeons (ASPS) is to support its members in their efforts to provide the highest quality patient care and maintain professional and ethical standards through education, research and advocacy of socioeconomic and other professional activities.

The mission of the Plastic Surgery Educational Foundation is to develop and support the domestic and international education, research and public service activities of plastic surgeons.

To accomplish the purposes outlined in the organizational mission statements above, the Society produces a comprehensive continuing medical education (CME) program. Through this program ASPS directly and jointly sponsors multiple CME activities on an annual basis. As outlined in the ASPS Strategic Plan, Education is one of the identified overarching goals of the organization.

**Mission/Purpose**
The mission of the ASPS Continuing Medical Education Program is to foster the ability of qualified physicians to obtain and maintain the highest level of competence in plastic surgical health care delivery. In support of the organization’s strategic plan, as related to the goal of continued excellence in plastic surgery, the ASPS CME Program endeavors to provide relevant, exceptional, and evidence-based educational activities that are designed to advance physician competence, enhance practice performance, promote patient safety, and, where possible, improve patient outcomes.

**Target Audience**
The ASPS continuing medical education program offers activities incorporating a well-rounded curriculum based on the latest information in plastic and reconstructive surgery to plastic surgery practitioners, residents and other interested health professionals.

**Content Areas**
Activity content may cover any and all topics related to the core body of knowledge for plastic surgery, as well as health care delivery system-based information. Topics may include but not be limited to: cosmetic; breast (cosmetic and reconstructive); craniomaxillofacial; reconstruction of congenital and acquired anomalies or trauma to the head and neck, trunk or extremities; microsurgery; or practice management and advocacy related issues. Content may also include information on emerging trends or innovative advancements, e.g. anti-aging, thread lifts, injectables and so forth. Planned content areas will reflect the diversity of the plastic surgery subspecialties and the practice disciplines of the learners.

**Types of Activities/Delivery Methods**
Educational information is delivered via delivery methods including but not limited to didactic presentations, hands-on workshops or live demonstrative workshops, interactive panel discussions, narrated film, and problem-oriented case example sessions. Within these various delivery methods, facilitated discussion sessions, provocateurs, and audience response systems may be utilized to enhance the learners’ experience. In addition, self-directed learning via videos/CD-ROMs/DVDs, journals, patient review and clinical outcomes data as collected in the TOPS program and the In-service self-assessment examinations, and other online education is offered. Additional opportunities are commonly provided for networking and peer exchange.

**Expected Results**
The intended result is to facilitate higher levels of physician competencies, improve health care delivery and subsequent outcomes of patient care, promote the highest level of patient safety, and further advance the specialty of plastic surgery. Expected results, in terms of measured changes directly related to the effectiveness of ASPS CME, will affirm that the educational interventions advanced physician competence, and where possible, enhanced practice performance, promoted patient safety, and improved patient outcomes.
All activities will be evaluated and subsequent outcomes assessments may be intermittently utilized when possible. Specific methodologies and assessment tools utilized will vary with the type of activity. Analysis of results will depend on the availability of reliable and accessible data sources. ASPS will continuously track changes and implement improvements to CME activities based on quantitative and qualitative data that may be obtained or reported from such mechanisms as pre- and posttests, evaluations, case vignettes, problem-based exercises, subsequent surveys, hands-on workshop exercises, and self-reported practice assessments.

- Changes in competence may be reflected by mastery of new concepts and greater confidence in approaching clinical problems, expression of intent to change practice behavior by applying newly-acquired strategies, and so forth.
- Changes in performance in accordance with activity goals may be reflected in demonstrated or observed evidence of enhanced surgical or procedural skills, when possible, in an appropriate setting.
- Changes in patient-related outcomes may be reflected by reported improvements in safety, quality, health outcomes, or possibly cost-effectiveness.

Regardless of the methods or metrics selected for individual activities, the overall ASPS CME Program will be periodically assessed in depth and improvements made accordingly: 1) to support compliance with all accreditation guidelines, and 2) to ensure that the educational needs of our learners are met and that the identified practice gaps are closed incrementally to further the ability of qualified physicians to deliver the highest quality of plastic surgical care to patients.

**Educational Program planner responsibilities are to:**
1. Provide participants with information on current and emerging issues and advances affecting the diagnosis and delivery of treatment for plastic and reconstructive surgical problems.
2. Broaden participants' technical knowledge regarding applicable strategies related to state-of-the-art procedures as well as drug and medical device uses.
3. Communicate current practice management and regulatory issues necessary for the efficient and safe delivery of patient care.

**Educational Program participant responsibilities are to:**
1. Increase their understanding of current and emerging issues and advances affecting the diagnosis and delivery of treatment for plastic and reconstructive surgical needs.
2. Expand their technical knowledge regarding applicable strategies related to state-of-the-art operative techniques as well as drug and medical device uses.
3. Recognize the practice management and regulatory issues necessary for the efficient and safe delivery of patient care.
4. Translate expanded knowledge into practice for the improvement of patient outcomes and satisfaction.