WVU Health Sciences Office of Continuing Education Practice Gap Worksheet

Contact Name:	Contact Email:
Program Title:	Program Date/Range:
Type of Program: □ conference □ Regularly Scheduled Series □ web course	(ex. Grand Rounds, Weekly, Monthly)
relative to the knowledge, competence	target audience to the desired practice? (i.e., What are you trying to "improve" e, and/or performance of your target audience with this activity?) When answering the educational objectives you expect participants to improve upon as a result of
All CME activities must be designed of Outcomes. Choose ALL that apply.	to change at least one of the following: Competence, Performance or Patient
☐ Yes ☐ N/A	improve or change knowledge related to:
Competence needs improvement/ch ☐ Yes ☐ N/A	nange: The participants don't know "how" to do it
This course will help participants	improve or change competencies in the following ways:
☐ Yes ☐ N/A	hange: The participants "just don't" do it, for some reason. improve or change performance in the following ways:
Will the educational objectives refl □ Yes □ No	ect these desired changes?

Is this activity designed to improve patient outco	nes?
□ Yes	
□ No	
Needs Documentation Cite references, i.e., show how you know that the paimproved or changed. Please attach applicable documents	tient competence, performance or patient outcomes need to be ments.
 □ written survey (attach results or summary) □ QA/UR data (attach examples) □ m&m reports (attach examples) □ telephone survey (attach results or summary □ informal summary (attach description) □ requests by physicians (attach list or summa □ inappropriate referrals (attach examples) □ problem cases (attach examples) 	relevant qualifications noted) - review of literature (attach reference article) eference list or articles) es, or description) each) practice exist?
This activity should improve:	
☐ Competence☐ Performance☐ Patient Outcomes	