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ACC Education Today



Ancora Imparo (I Am Still Learning)

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ike the prolific Renaissance artist Michelangelo, we too have chosen a profession in which we have the privilege and responsibility of saying, "I am still learning." At every age and every stage of our careers, the pursuit of knowledge is indispensable. Our mission at the American College of Cardiology (ACC) is to transform cardiovascular care and improve heart health. Our mission depends on lifelong learning through continuing medical education.

HISTORY OF ACC EDUCATION

Education has been one of the foundational pillars of the ACC. The first national scientific meeting to draw clinicians and scientists from the field of cardiology took place in New York in 1951 and attracted >275 physicians. Our first international cardiology course occurred in 1961 in Taiwan and the Philippines.

By 1969, the ACC had launched the pre-cursor to ACCEL, an audiotape journal called ACCESS, which featured recordings from the Annual Scientific Session as well as reviews of key articles from print journals. The first Journal of the American College of Cardiology was published in 1981, providing essential scientific evidence within the field. In 1984, the ACC and the American Heart Association (AHA) published the first joint guideline for clinicians to better understand and implement pacemaker implantation. The first ACC Self-Assessment Program (ACCSAP) debuted in 1993 to help cardiologists prepare for the American Board of Internal Medicine's (ABIM) certification exam. By 1996, the advent of the Internet required the ACC to refocus its priorities to meet the needs of its members, resulting in a new home on the World Wide Web.

Over the past few decades, the ACC has continued to modernize and embrace new theories of learning

and models of knowledge delivery. Personalized education and asynchronous learning are key to the ACC's premier Annual Scientific Session (1). Small, live courses at the ACC's Heart House in Washington, DC, facilitate focused analysis of such contemporary topics as cardio-oncology. Distance, self-paced learning has expanded with 9 subsequent versions of ACCSAP, as well as an expanded collection of collaborative subspecialty needs including CathSAP, EchoSAP, EPSAP, and HFSAP.

The ACC has partnered with cardiovascular societies in regions around the world to offer live, culturally sensitive, international educational experiences. Live and on-demand webinars also provide multiple virtual offerings to members. Podcasts have become a favorite mode of receiving education, with the Eagle's Eye View podcast series averaging >14,000 downloads per month.

While the field of cardiology has grown tremendously over the past century, so too has the ACC's educational programming. To meet our members' professional needs, we have expanded the educational offerings beyond clinical topics to include advocacy, leadership, and the business of health care. The ACC has led the evolution of continuing medical education in the field of cardiovascular care and has addressed knowledge gaps to increase learner engagement and provide faculty development to improve pedagogy and achieve learning objectives (2). It has required a willingness to embrace change and an unrelenting commitment to lifelong learning.

RECENT ACCELERATION OF EDUCATIONAL STRATEGY

In early 2020, the ACC and its members were devastated by the coronavirus disease-2019 (COVID-19) pandemic. Realizing that an in-person, Annual

Scientific Session was neither feasible nor safe, the ACC committed instead to providing the most up-to-date and clinically relevant science through a virtual meeting: ACC.20 Together With the World Congress of Cardiology (ACC.20/WCC Virtual). With participation from 157 countries and >38,000 individual participants over 3 days of interactive, streamed education, the ACC successfully led the world into the next chapter of continuing medical education. By the time the post-conference on-demand access to ACC.20/WCC Virtual had closed at the end of June, almost 63,000 individuals had accessed the education online. The crisis has created the opportunity to expand and refine our digital resources and capabilities.

Now, living at a time where COVID-19 has made its home in many of our communities, the challenges to traditional continuing medical education have become painfully obvious. For the foreseeable future, international and even regional travel may be risky for both providers and our patients. Social distancing is essential, which limits options for gathering in person. Budgets have been slashed throughout most health care systems, limiting available finances for education and professional development. Likewise, the time ACC members can commit to continuing their education is fleeting as many clinicians are pressed to care for an overload of patients who have COVID-19 as well as those who have experienced delayed care because of the pandemic.

The ongoing uncertainty of the pandemic, as well as the aforementioned challenges, have led the ACC to rapidly evolve its current educational portfolio to best provide for our members in this new age of distance-based learning. Building on the success of ACC.20/WCC Virtual, the first ACC live course to pivot to a virtual meeting was "Care of the Athletic Heart," which attracted >700 registrants in June. Among the participants were 200 Fellows-in-Training, further suggesting that there is not only the need but widespread demand for ACC education. Since then, the Cardiovascular and Interventional Board Review courses have been redesigned into online experiences, offering 16-week study roadmaps, unlimited access to multiple online ACC board review products, and weekly interactive Q&A sessions with expert faculty.

The ACC continues to work with the American Board of Internal Medicine (ABIM) on offering more options for the ABIM Maintenance of Certification process. In response to the pandemic, the ACC's suite of SAPs with accompanying ACC/ABIM Collaborative Maintenance Pathway (CMP) modules provide even

more flexibility to physicians. The ACC has announced an extension of time to complete the 2020 CMP assessment topics through the end of 2021, allowing CMP participants 2 years to complete the 2020 designated performance assessment requirements. Also, while the ACC's regional conferences in Asia, the Middle East, and Latin America have been postponed until next year, the ACC continues to partner with its international chapters to create timely webinars that address current and localized educational needs.

A novel educational offering that premiered in June, the ACC Summer COVID-19 Education Series, has provided our global community with actionable insights to key clinical and operational concerns during the current pandemic. This series includes a wide range of weekly sessions spanning topics such as the COVID-19 Infodemic, Telemedicine, Clots and Anti-Coagulants, Health Disparities, Developing Resilience, and many others. Complementing these outstanding weekly sessions are a variety of Quick Tip video and audio segments, highlighting vital education and lessons learned over the past 6 months, such as point-of-care ultrasound (POCUS), virtual cardiac rehabilitation, and personal perspectives from the frontlines. All sessions are free and available on demand, as is the content on the ever-growing ACC COVID-19 Hub, which provides clinical guidance for the cardiovascular care team.

The COVID-19 pandemic has been the most recent disrupter in the health care field. It is the impetus for advances in many areas, including continuing medical education, which is positioned as a critical strategic element in the ACC's digital transformation initiative. These recently developed efforts are only the beginning of a bright and exciting future where learning at the speed of now and just-in-time education are standard components of all ACC programs. Tailored learner experiences, hybrid formats, portable and sharable content, all providing actionable knowledge, will lay a new foundation for the ACC's education portfolio (3).

As we work to establish a new norm for our chosen profession, we must remember the essential role that lifelong learning plays in our lives, in the lives of our patients, and in our local communities. It is both our privilege and our collective responsibility to say, "I am still learning."

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