APENDIX A

LEVEL	Description	Educational Design	Source of data
PERFORMANCE (level 5)	The degree to which participants **do** what the CME activity intended them to be able to do in their practices	Simulation or Standardized Patients/Medical Actors: • Provides a standardized method for physicians to assess their individual skills of diagnosis, treatment and management of a patient. • Technical skills/hands-on workshops, Communication skills workshops, or Role play: Experiential learning allows learning through reflection on doing.	**Objective:** observation of performance in patient care setting, patient charts, administrative databases
Competence (level 4)	The degree to which participants **show** in an educational setting how to do what the CME activity intended them to be able to do	Case studies: • Provides an actual problem or situation an individual or group has experienced. An effective method of provoking controversy and debate on diagnostic, AMR, AMS issues.	**Objective:** observation in education setting **Subjective:** self-report of competence, intention to change
Knowledge (level 3)	The degree to which participants **state** what the CME activity intended them to know how to do	• Audience response/interaction: Provides a simultaneous large audience response to faculty questions, allowing the faculty to interact with their audience. • Debate or Panel discussion: Provides an opportunity for experts or a group of learners to present differing viewpoints on a topic, issue, or problem to other panelists and the audience.	**Objective:** pre- and post tests of knowledge **Subjective:** self-report of knowledge gain

		- Question/Answer: Provides an opportunity for faculty to answer specific participant questions. - Small group work/discussion: Provides a less formal setting for peer interaction, discussion and problem solving.	