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Tips for Conducting a Needs Assessment

The central question driving needs is "Why are we doing this activity?" Early in the planning process, it is important to determine the specific gaps in knowledge and/or practice that the accredited continuing education activity will attempt to address.

Robust needs assessment accomplishes the following:

- Helps establish clear rationale for the activity.
- Allows potential participants and content experts to provide their input in the design of the program thus ensuring program relevance and strengthening the likelihood of behavior change following the program.
- Utilizes a variety of different needs assessment approaches, including input from the profession(s) being targeted, leadership perspectives, and other data sources—not just literature review.
- When interprofessional – the needs assessment includes input from multiple professions—not just physicians. In addition the needs assessment looks at the needs of the team, not just the individual clinician.

The longer the CE activity, the more diverse and robust the needs assessment should be.

Needs assessments for accredited continuing education MUST be developed without any influence or involvement from the owners and employees of an ineligible company.

Guidance as to what to include in a Needs Assessment:

- Statement of unmet educational need, (i.e., what is the identified educational void?)
- Sources consulted to determine need. Cite actual references/sources.

Examples of ways to elicit potential target audience perspectives:

- E-Mail questions to a sample of target audience with response strongly requested.
- Brief phone interviews with a sample of the targeted participants.
- Discussion at peer group meetings.
- Review evaluation forms from past CE programs to identify what additional educational needs the participants identified.

Examples of useful Needs Assessment questions:

- What would you like to be able to do in your practice or with your team that is prevented by the absence of skills, information, or resources (barriers)?

- Which aspects of diagnosing and/or treating <insert topic> do you feel the most uncomfortable diagnosing or treating yourself or as a team (as opposed to referring)?

Note: Asking what clinicians find challenging in their practice or with their teams will yield more useful information than asking what topics they want addressed

Examples of ways to elicit expert and organizational perspectives:
- Interview or e-mail local, regional, and national experts.
- Review documents, organizational newsletters, etc.

Examples of data which highlight gaps in desired practice and actual practice.
- Internal quality data
- National data that illustrate variation in practice between physicians/geographic locations.
- Data/documentation that suggest a particular practice is desired but has not yet been introduced.
- External requirements or forces that require performance change and evidence that the required change has not taken place.

Other useful needs assessment information:
- New best practices that have not been implemented consistently.
- Research findings.
- Legal information.
- Marketplace data.
- Committee activities and action plans.