COVID-19-pandemic – The Unloved Digitisation Engine

Günther Ochs and Eva Mikolasch
Österreichische Akademie der Aerzte GmbH, Wien, Austria

ABSTRACT
Short history of digital learning formats in Austria and the role of the COVID-19 pandemic in rapidly changing the learning methods of physicians towards a more digital, diverse spectrum.

E-learning in the form of reading medical articles and subsequently completing a test consisting of content-related questions has a long tradition in continuing medical education in Austria. As early as 2004, the Academy of Physicians launched an online platform (www.meindfp.at) on behalf of the Austrian Medical Chamber (in cooperation with the leading medical publishers in Austria) in order to organise this popular form of continuing education efficiently.

The platform has enjoyed great popularity right from its start and experienced a noticeable upswing in 2016 when Austrian doctors had to provide evidence of their mandatory CPD for the first time. Since then, in line with the spirit of times, this opportunity to earn digital CPD points has been used more and more often although this and many other modern, digital learning formats have still been by far exceeded in number by live educational events. A comprehensive modernisation of the learning platform www.meindfp.at in 2019 enabled important innovations that have turned out to be of great benefit in the following year when COVID-19 has surged.

COVID-19 considerably disrupted many areas of life. Especially physicians, being one of the most affected groups of profession, have been afflicted by the ongoing pandemic. They have been confronted not only with an extraordinary workload but also with the urgent need to update their medical knowledge and skills concerning the COVID-19 disease in order to provide state-of-the-art healthcare for their patients.

This demand for continuing medical education (CME) conflicted with the most prevalent and customary CME learning method in Austria, the in-person, live educational event. Bans on events and worldwide lockdown restrictions have made it impossible to maintain the established education routines, forcing CME providers and physicians to cancel or postpone events. Especially, the beginning of the crisis was characterised by uncertainty with regard to the duration and severity of the pandemic. As the severity of the situation became evident, CME providers had to switch to other means of learning, in particular to digital learning formats. Although challenging, costly and time-consuming, CME providers responded flexibly and quickly to this development and set up web-based continuing medical education.

The database of CME activities in Austria, the web-based platform “DFP-Kalender”, also serving for the online process of certification of CME activities and their publication, provides statistical data in this regard.

A five-year comparison demonstrates that this turning point in CME is due to the pandemic. The years 2016 up to 2019 show a continuing increase in live, face-to-face meetings, while the much lower number of educational activities offered online has remained on a constant level (Figures 1 and 2). Live educational events (face-to-face CME activities, Figure 1), traditionally popular and thriving as CME activity over the years, experienced a significant decrease in 2020 (Figure 1). This reduction in live events has probably been even more pronounced since the number shown in Figure 1 still contains an unknown number of cancelled events that were still listed in the database because it can be assumed that in times of high workload and rapidly changing environment many providers had not updated their data in our database. In contrast, the number of digital formats such as online and live broadcasted CME courses/webinars skyrocketed in 2020 (Figure 2).
The Austrian Academy of physicians, acting as the Austrian accreditation authority for CME (on behalf of the Austrian Medical Chamber), was concerned with this pandemic-related transition in CME on several levels. It was necessary to assist providers in cancelling, postponing or transforming educational events, and beyond that, it was crucial to prepare the adaption of our CME system to the new circumstances, which required increased attention to the specifics of digital learning methods.

The COVID-19 situation changed the environment for CME activities, demanding to adjust the legal CME framework correspondingly. Due to the quick introduction of new and yet unfamiliar learning modes, many questions of CME providers had risen and had pointed out gaps in the regulatory legal frameworks. Consequently, the Austrian CPD regulations were thoroughly revised and then implemented at the beginning of 2021. Among the essential improvements were new regulations concerning the sustainable shift to digital learning formats as live online courses/webinars. Details on how authentication of the learner, learner engagement and tracking of attendance is provided, for example, became mandatory in the online application for CME certification. Alongside, all necessary technical adaptions were installed in the Austrian CME database.

In addition to these formal alterations, changes in composition and diversity of the digital learning spectrum have taken place. The “traditional” e-learning formats are increasingly being augmented by new, modern offerings that promise even more interactivity and educational benefits. Examples include audio-visual-media like videos on demand or audio-lectures, which gain in importance and enable doctors to choose from a greater variety of learning styles and location-independent learning. Newer learning formats even take the learner’s level of knowledge into account and adapt learning content according to the results of onsite progress assessment. However, most CME credits are still earned by using long-established formats.

Taking into account these developments, it can be summarised that digitisation in continuing medical education in Austria has been strongly influenced by the COVID-19 pandemic. The crisis acted as an accelerator for an already imminent tendency to establish new digital learning formats. While prior to the
pandemic progress in establishing new online educational formats used to happen eventually, the impossibility to continue with the established learning routines has led providers and physicians to quickly (and successfully) adopt new electronic learning formats. The image of physicians, being flexible and staying in touch with current developments, has proven to be true in the pandemic when embracing new forms of learning. It also contributed to a more diverse, flexible and fully digital CME portfolio for Austrian physicians. During times with limited possibilities for face-to-face meetings and/or in medical fields with rapid changes in evidence, as exemplified by the current pandemic, digital learning formats provide an invaluable resource for updating medical knowledge and offer quick, professional and global exchange. In the long term, a wide range of learning methods will allow physicians to continue their education according to their personal preferences, individual learning needs and regulators’ requirements, thus allowing flexible knowledge transfer.

Finally, a critical remark should not be missing. The flourishing, but at the same time financially demanding development of digital medical education is increasingly promoted in areas in proximity to industrial companies. For this reason, the Austrian Medical Chamber has currently launched an e-learning offensively supporting those areas with scarce resources aiming to prevent a shift to industry-supported digitisation. Acting as an executive arm of this initiative, the Academy of Physicians will be focused on providing a balanced portfolio of high-quality e-learning materials. In general, it will be a challenging but essential task for whoever is in a position to influence this, to enable a balanced set of unbiased digital medical education materials that includes content with no influence from industry.

**Disclosure Statement**

No potential conflict of interest was reported by the authors.