

Introduction

Continuing education (CE) supports health care professionals in maintaining and enhancing competence, performance, and professional practice. Traditional single-profession CE models often conceptualize change as an individual endeavor; however, this emphasis does not fully reflect contemporary health care delivery, which relies on multiple professions working collaboratively in teams. In response, interprofessional continuing education (IPCE) emerged as a form of CE that is collaboratively planned by members of two or more professions and designed to provide learners with opportunities to learn with, from, and about one another. IPCE focuses on developing interprofessional competencies necessary for effective team-based care and collaborative practice. Importantly, IPCE complements—rather than replaces—traditional single-profession CE, requiring CE providers to design, implement, and evaluate a portfolio that includes both CE and IPCE activities.

Both CE and IPCE are widely expected to contribute to patient health, population health, and health system outcomes. However, objective evidence directly linking educational interventions to these distal outcomes remains limited. This limitation reflects the inherent complexity of tracing the influence of education across multiple levels—from learning to practice change, team functioning, and ultimately patient and system-level outcomes. As a result, there is a need for evaluation approaches that more explicitly articulate and examine the connection between education and the health care delivery system.

Accredited CE/IPCE is designed to build competencies that may be applied in practice to influence performance at the individual level, within health care teams (in the case of IPCE), and ultimately at higher-level outcomes. Nevertheless, evaluation approaches capable of demonstrating and supporting these relationships are often limited in scope. This does not suggest that CE or IPCE is ineffective; rather, it highlights persistent gaps in how the impact of accredited education is evaluated and documented.

Measuring educational impact is inherently complex, given the many factors that mediate the relationship between education, individual behavior, team dynamics, and patient outcomes. Because practice and outcomes are shaped by multiple influences, evaluation designs must be intentional about the types of evidence required and the extent to which conclusions rely on learner self-report. Strengthening evaluation approaches that more explicitly link education to practice and the health care delivery system is therefore essential to demonstrating the value of accredited CE/IPCE and provides the impetus for this research.

Organizational Structure

The University of Pittsburgh/UPMC Center for Continuing Education in the Health Sciences (CCEHS) is jointly accredited to provide continuing education for nurses (CNE), physicians (CME), pharmacists (CPE), social workers (ASWB), physician assistants (AAPA), psychologists (APA), and optometrists (COPE). Through these accreditations, CCEHS supports the continuing professional

development of health care professionals across UPMC, the University of Pittsburgh Schools of the Health Sciences, and strategic partners aligned with the CCEHS mission.

As an integrated health system, UPMC is the largest nongovernmental employer in Pennsylvania, with approximately 100,000 employees across its health services and insurance divisions. UPMC includes more than 40 academic, community, and specialty hospitals and operates approximately 800 outpatient sites, including physician offices and ambulatory care centers. UPMC employs more than 5,000 physicians and works with over 6,600 affiliated physicians overall. The system also supports a broad interprofessional workforce that includes nurses, advanced practice providers, allied health professionals, and other health care staff, as well as a regional network of rehabilitation, retirement, and long-term care facilities.

In 2025, CCEHS certified 2,443 CE/IPCE activities, representing over 15,000 hours of instruction and involving more than 260,000 participants across a broad range of health professions.