# OUTLINE FOR THE SELF-STUDY REPORT

# FOR ACCME REACCREDITATION

## I) Self Study Report Prologue

**A)** **Provide a** brief narrative that tells the ACCME the history of your continuing medical education (CME) Program.

**B)** **Describe** the leadership structure and organizational structure of your CME Program in an organizational chart.

## II) Purpose And Mission (Criterion 1)

**A)** **Attach** your CME mission statement.

**B)** **Highlight** each of the required components (i.e., (1) purpose, (2) content areas, (3) target audience, (4) types of activities, and (5) expected results of the program, articulated in terms of changes in competence, performance, or patient outcomes. *(C1)*

## III) Educational Activities (Criteria 2-7 and Policies)

*The next set of items is designed to gather information on your incorporation of the ACCME's requirements into your program of continuing medical education.*

**A)** Tell us the 'story' of how you develop continuing medical education. Pick **two** of your CME activities as examples. Using these examples, within the context of your organization's processes and mechanisms, describe for us all of the steps you went through to create these educational activities.

In your narrative for Section III **(A)** the ACCME will be looking for,

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| **1.** | The professional practice gap that the activities were addressing | *(C2)* |
| **2.** | The educational need(s) that you determined were underlying the gap(s) for your learners | *(C2)* |
| **3.** | What competence or performance or patient outcome the activity was designed to change. | *(C3)* |
| **4.** | How the activity matched the current or potential scope of professional practice (research, educational, administrative or clinical) of your learners. | *(C4)* |
| **5.** | Your explanation of why the format of the activity you chose was appropriate for the setting, objectives and desired results of the activity | *(C5)* |
| **6.** | The desirable physician attribute(s) you associated with the activity | *(C6)* |

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| **7.** | **The mechanism(s) your organization used to a) identify and b) resolve conflicts of interest for everyone in a position to control educational content (i.e., teachers, authors, planners, reviewers, and others who controlled content).** | ***(C7 SCS2)*** |
| **8.** | **i.** A description of your planning process that is independent of the control of any ACCME-defined commercial interest and the mechanisms implemented to ensure that you, as provider, retain complete control of the CME content. Relate your description to each element of SCS 1.<br>**ii.** Under very rare circumstances, an accredited provider might choose to develop activities that include the presentation of discovery, research or new knowledge by employees of ACCME-defined commercial interests. When that happens, it is important that you demonstrate through your description that there are mechanisms in place that provide appropriate safeguards to the independence of the activity. (See http://accme.org/ask-accme/can-provider-allow-oral-or-written-reporting-scientific-research-employee-commercial for more information on this topic.) If your organization is involved in these rare circumstances, please:<br>**a.)** Describe the factors you consider in determining an appropriate role of an ACCME-defined commercial interest employee in planning and/or presenting accredited CME; and<br>**b.)** Describe the mechanisms implemented to ensure that you, as provider, retain complete control of the CME content. | *(C7 SCS1)* |
| **9.** | Your organization's process(es) and mechanism(s) for disclosure to the learners of relevant financial relationships of all persons in a position to control educational content. | *(C7 SCS 6.1 – 6.5)* |
| **10.** | Your organization's process(es) and mechanism(s) for disclosure to the learners of the source of support from commercial interests, including "in-kind" support. | |

**B)** You may feel that the two examples in Section III **(A)** do not provide you with adequate opportunity to sufficiently describe how you apply the ACCME's requirements in the development of your CME activities. Please feel free, in Section III **(B)**, to provide other examples and descriptions that provide the ACCME with DIFFERENT information or DIFFERENT strategies that were not available in the two examples chosen in Section III **(A),** above. This is especially important for a description of your implementation of the **ACCME Standards for Commercial Support*: Standards to Ensure Independence in CME Activities***[SM].

## Recording and verifying physician participation

**A)** **Describe** the mechanism your organization uses to record and verify physician participation for six years from the date of your CME activities.

**B)** Using the information from one of the example activities in Section III **(A) or (B)**, above, **show** the ACCME the information or reports your mechanism can produce for an individual participant.

## IV) Regarding your Program of CME, your Educational Activities and the ACCME Standards for Commercial Support: Standards to Ensure Independence in CME Activities (Criteria 8 -9)

**A)** **Attach** your written policies and procedures governing honoraria for planners, teachers, and/or authors – or enter here, **"We do not provide honoraria in any form to planners, teachers, and/or authors."** *(C8 SCS 3.7-3.8)*

**B)** **Attach** your written policies and procedures governing reimbursement of expenses for planners, teachers, and/or authors – or enter here, **"We do not provide reimbursement of expenses in any form to planners, teachers, and/or authors."** *(C8 SCS 3.7-3.8)*

**C)** **Describe** what policy, procedure, or communications you employ to ensure that no direct payment from an ACCME-defined commercial interest is given to the director of an activity, any planning committee members, teachers or authors, joint sponsor, or any others involved in an activity. *(C8 SCS 3.3; 3.9)*

**D)** **Describe** your process(es) for the receipt and disbursement of commercial support (both funds and in-kind support). *(C8 SCS 3.1)* – or enter here, **"We do not accept commercial support for any of our directly or jointly sponsored CME activities."**

**E)** **Describe** what policy, procedure or communications you employ to ensure that all commercial support is given with your organization's full knowledge and approval). *(C8 SCS 3.3)* – or enter here, **"We do not accept commercial support for any of our directly or jointly sponsored CME activities."**

**F)** **Describe** the practices or procedures or policies you have implemented to ensure that social events, or meals, at commercially supported CME activities cannot compete with or take precedence over educational events. *(C8 SCS 3.11)* – or enter here, **"We do not accept commercial support for any of our directly or jointly sponsored CME activities <u>or</u>** enter here, **"We do not provide social events or meals for any of our directly or jointly sponsored and commercially supported CME activities."**

**G)** Do you organize ***commercial exhibits*** in association with any of your CME activities? If "No," write in this section, **"We do not organize *commercial exhibits* in association with any of our CME activities."** If yes, **describe** how your organization ensures that arrangements for commercial exhibits do not (1) influence planning or interfere with the presentation and (2) are not a condition of the provision of commercial support for CME activities. *(C9 SCS 4.1)*

**H)** Do you arrange for ***advertisements*** in association with any of your CME activities? ? If "No," write in this section, **"We do not arrange for *advertisements* in association with any of our CME activities."** If yes, **describe** how your organization ensures that advertisements or other product-promotion materials are kept separate from the education. In your description, distinguish between your processes related to advertisements and/or product promotion in each of the following types of CME activities: (1) print materials, (2) computer-based materials, (3) audio and video recordings, and (4) face-to-face. *(C9 SCS 4.2, 4.4)*

## V) Regarding the Content of your Continuing Medical Education Activities (Criterion 10 and Policy on Content Validation)

**A)** It is an expectation of the ACCME that,

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| *The content of CME activities does not promote the proprietary interests of any commercial interests. (i.e., there is not commercial bias)* | *(C10 SCS 5.1)* |
| *CME activities give a balanced view of therapeutic options, and that* | *(C10 SCS 5.2)* |
| *The content of CME activities is in Compliance with the ACCME's content validity value statements** | *(Policy on Content Validation)* |

***ACCME's Policy on Content Validation:** All the recommendations involving clinical medicine in a CME activity must be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients. All scientific research referred to, reported or used in CME in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection and analysis. Providers are not eligible for ACCME accreditation or reaccreditation if they present activities that promote recommendations, treatment or manners of practicing medicine that are not within the definition of CME, or known to have risks or dangers that outweigh the benefits or known to be ineffective in the treatment of patients.

**Describe** how your CME activities and your program of continuing medical education ensure that these three expectations are fulfilled (e.g., planning, procedures, policy, monitoring).

## VI) Evaluation and Improvement (Criteria 11-13)

**A)** Based on data and information from your program's activities/educational interventions, provide your analysis of changes achieved in your learner's competence, performance, or in-patient outcomes. (C11)

**B)** Based on data and information gathered, provide your program-based analysis on the degree to which the expected results component of your CME mission has been met through the conduct of your CME activities/educational interventions. (C12)

**C)** **Describe** the needed or desired changes in the overall program (e.g., planners, teachers, infrastructure, methods, resources, facilities, interventions) required to improve on your ability to meet your CME mission that have been identified, planned, and implemented. (C13)

## VII) Accreditation with Commendation (Criteria 23-38)

If your organization chooses to submit for Accreditation with Commendation, you must demonstrate compliance with any seven criteria from any category—plus one criterion from the Achieves Outcomes category—for a total of eight criteria. Please do not include descriptions/evidence for more than eight criteria.

Based on the number of activities we will implement in the current term of accreditation; our organizational program size is:

- Small: <39
- Medium: 40-100
- Large: 101-250
- Extra Large: > 250

### CRITERION 23

Members of interprofessional teams are engaged in the planning and delivery of interprofessional continuing education (IPCE). If your organization engages members if interprofessional teams in the planning and delivery of interprofessional education, attest to the following by checking the box:

☐ I attest that our organization has met the Critical Elements for Criterion 23 in at least 10% of the CME activities (but no less than two activities) during the accreditation term.

Submit evidence for your activities in the table below: (Small: 2; Medium: 4; Large: 6; Extra Large: 8)

| Activity Name | Activity Date | Please list:<br>A. Professions of Planners<br>B. Professions of Faculty | Description of what the activity was designed to change in terms of the competence or performance of the healthcare team<br>(maximum 250 words per example). |
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### CRITERION 24

Patient/public representatives are engaged in the planning and delivery of CME. If your organization engages patient /public representatives in the planning and delivery of CME, attest to the following by checking the box:

☐ I attest that our organization has met the Critical Elements for Criterion 23 in at least 10% of the CME activities (but no less than two activities) during the accreditation term.

Submit evidence for your activities in the table below: (Small: 2; Medium: 4; Large: 6; Extra Large: 8)

| Activity Name | Activity Date | Activity Type | Describe in what way the planners and presenters of the activity represent the patient or public, along with the role they played in the planning AND delivery of your CME activity.<br>(maximum 250 words per example). |
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## CRITERION 25

Students of the health professions are engaged in the planning and delivery of CME. If your organization engages health professions' students in the planning and delivery of CME, attest to the following by checking the box:

☐ I attest that our organization has met the Critical Elements for Criterion 25 in at least 10% of the CME activities (but no less than two activities) during the accreditation term.

Submit evidence for your activities in the table below: (Small: 2; Medium: 4; Large: 6; Extra Large: 8)

| Activity Name | Activity Date | Activity Type | Describe the health professions' students involved in the activity, including their profession and level of study and how they participated as both planners and faculty of the activity,<br>(maximum 250 words per example). |
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## CRITERION 26

The provider advances the use of health and practice data for healthcare improvement. Describe how your organization incorporates health and practice data into your educational program through teaching about the collection, analysis, or synthesis of health/practices AND how your organization use health/practice data to teach about healthcare improvement.

Submit evidence for your activities in the table below: (Small: 2; Medium: 4; Large: 6; Extra Large: 8)

| Activity Name | Activity Date | Activity Type | Describe how the activity taught learners about collection, analysis, or synthesis of health/practice data and how the activity use health/practice data to teach about healthcare improvement. |
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| | | | (maximum 250 words per activity description). |
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## CRITERION 27

The provider addresses factors beyond clinical care that affect the health of populations.

☐ I attest that our organization has met the Critical Elements for Criterion 27 in at least 10% of the CME activities (but no less than two activities) during the accreditation term.

Submit evidence for your activities in the table below: (Small: 2; Medium: 4; Large: 6; Extra Large: 8)

| Activity Name | Activity Date | Activity Type | Describe the strategy or strategies used to achieve improvements in population health.<br>(maximum 250 words per example). |
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## CRITERION 28

The provider collaborates with other organizations to more effectively address population health issues. Describe four collaborations with other organizations during the current terms of accreditation and show how these collaborations augmented your organization's ability to address population health issues. (maximum of 250 words per collaboration)

## CRITERION 29

The provider designs CME to optimize communication skills of learners.

Submit evidence for your activities in the table below: (Small: 2; Medium: 4; Large: 6; Extra Large: 8)

| Activity Name | Activity Date | Activity Type | Describe the evaluation of communication skills used for learners in this activity<br>(maximum of 250 words per example) | Attach an example of the formative feedback provided to a learner about communication skills (this may be a written description if the feedback was provided verbally) |
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## CRITERION 30

The provider designs CME to technical and procedural skills of learners.

Submit evidence for your activities in the table below: (Small: 2; Medium: 4; Large: 6; Extra Large: 8)

| Activity Name | Activity Date | Activity Type | Describe the evaluation of observed technical or procedural skills used for learners in this activity.<br>(maximum of 250 words per example) | Attach an example of the formative feedback provided to a learner about technical or procedural skills (this may be a written description if the feedback was provided verbally) |
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## CRITERION 31

The provider creates individualized learning plans for learners. Provide a brief explanation and upload evidence of repeated engagement and feedback for the number of learners that matches the size of your CME program. (maximum of 250 words per collaboration)

## CRITERION 32

The provider utilizes support strategies to enhance change as an adjunct to its CME. If your organization utilizes support strategies to enhance changes as an adjunct to its CME, attest to the following by checking the box:

☐ I attest that our organization has met the Critical Elements for Criterion 32 in at least 10% of the CME activities (but no less than two activities) during the accreditation term.

Submit evidence for your activities in the table below: (Small: 2; Medium: 4; Large: 6; Extra Large: 8)

| Activity Name | Activity Date | Activity Type | Describe the support strategies that were adjunctive to this activity. Provide your analysis of the effectiveness of the support strategies and describe planned or implemented improvements.<br>(maximum 250 words per example). |
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## CRITERION 33

The provider engages in CME research and scholarship.

Describe at least two scholarly projects your organization completed during the accreditation term relevant to CME and the dissemination method used for each one (e.g. poster, abstract, manuscript) (maximum 250 words for each project).

## CRITERION 34

The provider supports the continuous professional development of its CME team.

If your organization supports the continuous professional development of its CME team, please describe your organization's CME team, the CPD needs that you identified for the team during the term of accreditation and the learning plan implemented based on the needs identified, including the activities external to your organization in which the CME team participated (maximum 500 words for each project).

## CRITERION 35

The provider demonstrates creativity and innovation in the evolution of its CME program.

If your organization demonstrates creativity and innovation in the evolution of its CME program, please present four examples of innovations implemented and describe each innovation and how it contributed to your organization's ability to meet your mission (maximum of 250 words per innovation).

## CRITERION 36

The provider demonstrates improvement in the performance of learners. If your organization demonstrates improvement in the performance of learners, attest to the following by checking the box:

☐ I attest that in at least 10% of my organization's activities, the majority of learner's performance improved.

Describe the method(s) used to evaluate learner performance (maximum of 500 words).

Submit evidence for your activities in the table below: (Small: 2; Medium: 4; Large: 6; Extra Large: 8)

| Activity Name | Activity Date | Activity Type | Mechanism to determine change in performance of learners | Number of learners that participated in the activity | Number of learners that participated in the evaluation | Number of learners that improved their performance |
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## CRITERION 37

The provider demonstrates healthcare quality improvement.

Describe at least two examples in which your organization collaborated in the process of healthcare quality improvement, along with the improvements that resulted. Include data (qualitative or quantitative) that demonstrates those improvements (maximum 500 words per collaboration).

## CRITERION 38

The provider demonstrates the impact of the CME program on patients or their communities.

Describe at least two examples of your organization's collaboration in the process of improving patient or community health that includes CME, along with the improvements that resulted. Include data (qualitative or quantitative) the demonstrates those improvements (maximum 500 words per collaboration).