



# NEW HAMPSHIRE MEDICAL SOCIETY

## Council on Education

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### Application for Accreditation as a CME Provider – Fee \$2000

#### Organizational Information

1	Name of organization	
2	ACCME ID Number	
3	Contact Person for NH Medical Society Communications	
4	Signature	
5	Date	

#### Director of Medical Education

6	Name	
7	Title	
8	Address	
9	Telephone number	
10	Fax number	
11	e-mail address	

#### CME Staff Coordinator

12	Name	
13	Title	
14	Address	
15	Telephone number	
16	Fax number	
17	e-mail address	

#### Chief Executive Officer

18	Name	
19	Title	
20	Address	
21	Telephone number	
22	Fax number	
23	e-mail address	
24	<b>Type of organization</b>	

Please indicate what classification most accurately describes your organization by placing an X to the left of the most appropriate item.			
		Hospital	Education Company (Physician Owned & Operated)
		Clinic (single or multi-specialty)	Education Company, Other
		Physician Member Organization (specialty based)	Consortium/Alliance
		Physician Member Organization (non-specialty)	Government or Military
		Health Care Delivery System	Not For Profit Foundation (501 c 3)
		Voluntary Health Association	Other _____ (please specify)
		Insurance Company/Managed Care	

<b>The CME program of the organization (One X per line)</b>							
25		<u>does</u> receive commercial support		<u>does not</u> receive commercial support			
26		<u>Has</u> adopted ACCME 2006 SCS		<u>Has not</u> adopted ACCME 2006 SCS			
27		<u>does</u> participate in Joint Sponsorship		<u>does not</u> Participate in Joint Sponsorship			
28		<u>does</u> produce Enduring Material		<u>does not</u> produce Enduring Material			
29		<u>does</u> produce Journal-based CME		<u>does not</u> produce Journal-based CME			
30		<u>does</u> produce Internet CME		<u>does not</u> produce Internet CME			
<b>The organization</b>							
31		Is <u>not</u> accredited					
		Is accredited by the NH Medical Society <u>until</u>			Accreditation status? (check one)		
			Month	Year		Full	Provisional
						Full	Provisional
							Probation

## NHMS ACCREDITATION APPLICATION FORM

<b>Provider #</b>		<b>Provider Name</b>	
<b>Survey Chair</b>		<b>Survey Co-Chair</b>	
<b>Survey Date</b>		<b>NHMSCOE Reviewer</b>	

1. **Describe** a brief history of your CME Program.
2. **Describe** the leadership and structure of your CME Program.
3. **Describe** your organization's process and timeline for transitioning to the ACCME's 2006 Accreditation Criteria during the current term of accreditation.

### Criterion 1



**Attach** your CME mission statement. Identify and highlight each required component (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)

### Criterion 2

The next set of items is designed to gather information on your educational planning process. **Describe** the following components of your planning process:

**How** you identify the professional practice gap(s) of your own learners. (C2)

**How** you identify the educational needs of your learners that underlie the professional practice gap(s) that you have identified. (C2)

**That** you incorporate these needs into CME activities.(C2)

### Criterion 3

**What** your activities are designed to change: competence, and/or performance, and/or patient outcomes? (C3)

### Criterion 4

**How** your organization matches the content of your activities to what your learners currently or may do? (i.e., their current or potential scope of practice). (C4)

### Criterion 5

**What** educational formats (i.e., activity type and methodology) you use and why you use them. (C5)

**How** the formats are appropriate to the setting, objectives, and desired results of an activity. (C5)

### Criterion 6

**That** your activities are planned within the context of desirable physician attributes (e.g., ABMS/ACGME Competencies, IOM Competencies). (C6)

### Criterion 7, SCS1

**How** your organization ensures independence from commercial interests in the above planning steps, and others, as listed here: (a.) identification of needs; (b.) the determination of educational objectives; (c.) the selection and presentation of content; (d.) the selection of all persons and organizations in a position to control the content; (e.) the selection of educational methods, and (f.) the evaluation of the activity. (C7 SCS1)

#### Additional Materials

Please attach examples of items listed below



**Include two activity examples** that illustrate all of the steps of the planning process you have described. For both of the activity examples, explicitly identify and/or describe:

- (1) The problem, or professional practice gap, the activity was addressing (C2)
- (2) The educational need that was underlying this gap for your learners (C2)
- (3) What the activity was designed to change (competence, performance, or patient outcomes) (C3)
- (4) That the activity matched the current or potential scope of practice of your learners (C4)
- (5) The format of the activity (C5)
- (6) The desirable physician attribute associated with the activity (C6)
- (7) That the activity was designed to ensure independence from commercial interests (C7 SCS1.1)

## Criterion 7, SCS2

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



Include **one example** that demonstrates your practice to **record and verify physician participation**.

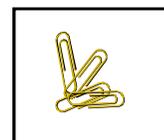
**Describe** the mechanism(s) your organization uses to ensure that everyone in a position to control educational content (e.g., faculty, planners, reviewers, and others who controlled content) has disclosed to your organization relevant financial relationships with commercial interests. Include in your description your organization's mechanism(s) for disqualifying individuals who refuse to disclose. (C7 SCS 2.1, 2.2)

**Describe** the mechanism(s) your organization uses to identify conflicts of interest prior to an activity. (C7 SCS 2.3)

**Describe** the mechanism(s) your organization uses to resolve conflicts of interest prior to an activity. (C7 SCS 2.3)

## Criterion 7, SCS6

**Describe** your organization's process(es) and mechanism(s) for disclosure to the learners prior to the activity of (1) relevant financial relationships of all persons in a position to control educational content and (2) the source of support from commercial interests, including "in-kind" support, if applicable. (C7 SCS 6.1-6.5)



**Include two activity examples** that illustrate your descriptions above.  
For each activity example, explicitly show and/or describe:

- (1) Who was in a position to control educational content, specifying their role (e.g., planner, faculty, reviewer, staff) (C7 SCS 2.1)
- (2) That all individuals in control of content disclosed to your organization relevant financial relationships with commercial interests, including verification that individuals who refuse to disclose are disqualified; (C7 SCS 2.1)
- (3) The mechanisms you implemented to identify and resolve conflicts of interests prior to the activity; (C7 SCS 2.3)
- (4) Disclosure to learners, prior to the beginning of the activity, of the presence or absence of relevant financial relationships of all who controlled content. (C7 SCS 6.1, 6.2, 6.5)
- (5) If applicable, disclosure to learners, prior to the beginning of the activity, of the source(s) of support, including "in-kind" support, from commercial interests. (C7 SCS 6.3-6.5)

## Criterion 8 (SCS3)

**NOTE: ALL ORGANIZATIONS must respond to items A - B, regardless of whether or not your organization accepts commercial support.**



- A. **Attach** your written policies and procedures governing honoraria and reimbursement of expenses for planners, teachers, and/or authors. (C8 SCS 3.7-3.8)
- B. **Describe** how you ensure that social events do not compete with or take precedence over educational activities. (C8 SCS 3.11)

**NOTE: If your organization accepts commercial support, respond; if not, go to Criterion 9.**

- C. **Describe** your process(es) for the receipt and disbursement of commercial support (both funds and in-kind support). (C8 SCS 3.1)
- D. **Describe** how you ensure that all commercial support is given with your organization's full knowledge and approval. Include in your response your policies and processes to ensure that no other payment is given to the director of the activity, planning committee members, teachers or authors, joint sponsor, or any others involved in the activity. (C8 SCS 3.3; 3.9)



- E. **Attach** a completed written agreement documenting terms, conditions, and purposes of commercial support used to fulfill relevant elements of the SCS. (C8 SCS 3.4-3.6)

## Criterion 9

**NOTE: ALL ORGANIZATIONS must respond to this section, regardless of whether or not your organization accepts commercial support or arranges for commercial exhibits or promotion in your activities.**

Do you organize **commercial exhibits** in association with any of your 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)

Do you arrange for **advertisements** in association with any of your 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)

### Criterion 10

**Describe** the planning and monitoring your organization uses to ensure that:

- (1) The content of CME activities does not promote the proprietary interests of any commercial interests. (C10 SCS 5.1) (*i.e., there is not commercial bias*)
- (2) CME activities give a balanced view of therapeutic options. (C10 SCS 5.2)
- (3) The content of CME activities is in Compliance with the ACCME's content validity value statements<sup>1</sup>. (*Policy on Content Validation*)

<sup>1</sup>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.

### Criterion 11

What were the conclusions you drew from your analysis of changes in learners competence, performance, or patient outcomes achieved as a result of your overall program's activities/educational interventions. (C11)



Provide a summary of the data upon which you based your analysis of changes in learners. (C11)

### Criterion 12

Based on your review of the data and information provided in the responses to questions A-B, **describe** your conclusions regarding your organization's success at meeting its CME mission, including the degree to which your organization has: (C12)

- (1) fulfilled its purpose
- (2) provided CME on the content areas outlined in the mission
- (3) reached its target audience
- (4) produced the types of activities stated in the mission
- (5) achieved its expected results, in terms of competence, performance, or patient outcomes.

### Criterion 13

As a result of your program-based analysis, what changes did you **identify** that could help you better meet your CME mission? (C13)

#### Criterion 14

Based on the changes you identified that could be made, **describe** the changes to your program that you have **implemented** (C14)?

#### Criterion 15

How have you **measured** the impact of these implemented changes on your organization's ability to meet its CME mission? (C15)

#### Criterion 16

**NOTE: The information gathered through your organization's responses here will be used to determine eligibility for Accreditation with Commendation.**

If your organization integrates CME into the process for improving professional practice, **describe** how this integration occurs. Include **examples** of explicit organizational practices that have been implemented. (C16)

#### Criterion 17

If your organization utilizes non-education strategies to enhance change as an adjunct to its educational activities, **describe** the strategies that your organization has used as adjuncts to CME activities and how these strategies were designed to enhance change. Include in your description an explanation of how the non-education strategies were connected to either an individual activity or group of activities. Include

**examples** of non-education strategies that have been implemented. (C17)



#### Criterion 18

If your organization identifies factors outside of its control that will have an impact on patient outcomes, **describe** those factors.

Include **examples** of identifying factors outside of your organization's control that will have an impact on patient outcomes. (C18)



### Criterion 19

If your organization implements educational strategies to remove, overcome, or address barriers to physician change, **describe** these strategies. Include **examples** of educational strategies that have been implemented to remove, overcome, or address barriers to physician change. (C19)

### Criterion 20

If your organization is engaged in collaborative or cooperative relationships with other stakeholders, **describe** these relationships.



Include **examples** of collaboration and cooperation with other stakeholders. (C20)

### Criterion 21

If your CME unit participates within an institutional or system framework for quality improvement, **describe** this framework.



Include **examples** of your CME unit participating within an institutional or system framework for quality improvement. (C21)

### Criterion 22

If your organization has positioned itself to influence the scope and content of activities/educational interventions, **describe** organizational procedures and practices that support this.



Include **examples** of how your organization is positioned to influence the scope and content of activities/educational interventions. (C22)