New Hampshire MEDICAL SOCIETY

ADVOCATING FOR PHYSICIANS & PUBLIC HEALTH SINCE 1791

OUTLINE FOR THE SELF-STUDY REPORT FOR NHMS Council on Education REACCREDITATION

PROLOGUE

- Provide a brief narrative that tells the history of your continuing medical education (CME) Program.
- Provide an organizational chart that shows the leadership and organizational structure of your CME program.

CRITERION 1

The provider has a CME mission statement that includes expected results articulated in terms of changes in competence, performance, or patient outcomes that will be the result of the program.

 Provide your CME mission statement and <u>underline</u> the expected results of your CME program, articulated in terms of changes in competence, performance, or patient outcomes.

CRITERION 2

The provider incorporates into CME activities the educational needs (knowledge, competence, or performance) that underlie the professional practice gaps of their own learners.

 Describe the process or processes you use to identify the professional practice gaps of your learners and the educational needs that underlie the identified professional practice gap(s).

CRITERION 3

The provider generates activities/educational interventions that are designed to change competence, performance, or patient outcomes as described in its mission statement.

 Describe how your activities are designed to change the competence, performance or patient outcomes of your learners.

CRITERION 5

The provider chooses educational formats for activities/interventions that are appropriate for the setting, objectives, and desired results of the activity.

 Describe how your activities are designed to ensure that the format of the activities is appropriate for the setting, objectives and desired results of the activity.

CRITERION 6

The provider develops activities/educational interventions in the context of desirable physician attributes [e.g., Institute of Medicine (IOM) competencies, Accreditation Council for Graduate Medical Education (ACGME) Competencies].

Describe how your activities/educational interventions are developed in the context of desirable physician attributes.

For a sample list of attributes please refer to the performance in practice structured abstract.

CRITERION 7 SCS 1

The provider develops activities/educational interventions independent of commercial interests. (SCS 1).

SCS 1 Independence

SCS 1.1: A CME provider must ensure that the following decisions were made free of the control of a commercial interest (see the ACCME definition of a "commercial interest". (a) Identification of CME needs; (b) Determination of educational objectives; (c) Selection and presentation of content; (d) Selection of all persons and organizations that will be in a position to control the content of the CME; (e) Selection of educational methods; (f) Evaluation of the activity.

SCS 1.2: A commercial interest cannot take the role of non-accredited partner in a joint provider relationship.

 Describe how all CME activities are planned and implemented independent of the control of any ACCME-defined commercial interest.

The use of employees or owners of ACCME-defined commercial interests as faculty and/or planners of accredited CME is prohibited, except in the specific circumstances permitted by the ACCME that maintain independence as specified on the ACCME website (www.accme.org) related to: 1) reporting about research and discovery; 2) demonstrating the operational aspects of the use of a device; and, 3) controlling content that is not related to the product lines of the commercial interest. A provider must demonstrate that it complies with ACCME requirements to ensure independence in these specific circumstances. (See http://www.accme.org/ask-accme/are-there-any-circumstances-when-employees-accme-defined-commercial-interests-can-be for more information on this topic.)

•	Is your	organization	involved in	these	circumstances?
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If Yes,			

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 Describe the mechanisms implemented to ensure independence in these situations. If No,

Include the statement: "We do not, under any circumstances, use employees of ACCME-defined commercial interests as faculty or planners of accredited CME."

CRITERION 7 SCS 2

SCS 2 Resolution of Personal Conflicts of Interest

SCS 2.1: The provider must be able to show that everyone who is in a position to control the content of an education activity has disclosed all relevant financial relationships with any commercial interest to the provider. The ACCME defines "'relevant' financial relationships" as financial relationships in any amount occurring within the past 12 months that create a conflict of interest.

SCS 2.2: An individual who refuses to disclose relevant financial relationships will be disqualified from being a planning committee member, a teacher, or an author of CME, and cannot have control of, or responsibility for, the development, management, presentation or evaluation of the CME activity.

SCS 2.3: The provider must have implemented a mechanism to identify and resolve all conflicts of interest prior to the education activity being delivered to learners.

Describe all the process(es) and mechanism(s) your organization uses to a) <u>identify</u> and b) <u>resolve</u>
 <u>conflicts of interest</u> for everyone in a position to control educational content specific to their role(s) in the
 activity (e.g., planners, reviewers, faculty, authors and others who control educational content).

CRITERION 7 SCS 6

SCS 6 Disclosures Relevant to Potential Commercial Bias

SCS 6.1: An individual must disclose to learners any relevant financial relationship(s), to include the following information: The name of the individual; The name of the commercial interest(s); The nature of the relationship the person has with each commercial interest.

SCS 6.2: For an individual with no relevant financial relationship(s) the learners must be informed that no relevant financial relationship(s) exist.

SCS 6.3: The source of all support from commercial interests must be disclosed to learners. When commercial support is "in-kind" the nature of the support must be disclosed to learners.

SCS 6.4: 'Disclosure' must never include the use of a corporate logo, trade name or a product-group message of an ACCME-defined commercial interest.

SCS 6.5: A provider must disclose the above information to learners prior to the beginning of the educational activity.

- Describe all of the process(es) and mechanism(s) your organization uses to disclose to learners the
 presence or absence of all relevant financial relationships of all persons in a position to control
 educational content.
- Describe all of the process(es) and mechanism(s) your organization uses to disclose to learners the source
 of support from commercial interests including "in-kind" support.

CRITERION 8

The provider appropriately manages commercial support (if applicable, SCS 3 of the ACCME Standards for Commercial Support).

- SCS 3: Appropriate Use of Commercial Support
- SCS 3.1: The provider must make all decisions regarding the disposition and disbursement of commercial support.
- SCS 3.2: A provider cannot be required by a commercial interest to accept advice or services concerning teachers, authors, or participants or other education matters, including content, from a commercial interest as conditions of contributing funds or services.
- SCS 3.3: All commercial support associated with a CME activity must be given with the full knowledge and approval of the provider.
- SCS 3.4: The terms, conditions, and purposes of the commercial support must be documented in a written agreement between the commercial supporter that includes the provider and its educational partner(s). The agreement must include the provider, even if the support is given directly to the provider's educational partner or a joint provider.
- SCS 3.5: The written agreement must specify the commercial interest that is the source of commercial support.
- SCS 3.6: Both the commercial supporter and the provider must sign the written agreement between the commercial supporter and the provider.
- SCS 3.7: The provider must have written policies and procedures governing honoraria and reimbursement of out-of-pocket expenses for planners, teachers and authors.
- SCS 3.8: The provider, the joint provider, or designated educational partner must pay directly any teacher or author honoraria or reimbursement of out-of-pocket expenses in compliance with the provider's written policies and procedures.
- SCS 3.9: No other payment shall be given to the director of the activity, planning committee members, teachers or authors, joint provider, or any others involved with the supported activity.
- SCS 3.10: If teachers or authors are listed on the agenda as facilitating or conducting a presentation or session, but participate in the remainder of an educational event as a learner, their expenses can be reimbursed and honoraria can be paid for their teacher or author role only.
- SCS 3.11: Social events or meals at CME activities cannot compete with or take precedence over the educational events.
- SCS 3.12: The provider may not use commercial support to pay for travel, lodging, honoraria, or personal expenses for non-teacher or non-author participants of a CME activity. The provider may use commercial support to pay for travel, lodging, honoraria, or personal expenses for bona fide employees and volunteers of the provider, joint provider or educational partner.
- SCS 3.13: The provider must be able to produce accurate documentation detailing the receipt and expenditure of the commercial support

Do you provide honoraria, in any form to planners, teachers, and/or authors?

If Yes,

Provide your written policies and procedures governing honoraria for planners, teachers, and/or authors. If No,

Enter the following text in the box below: "We do not provide honoraria in any form to planners, teachers and/or authors."

Do you provide reimbursement of expenses for planners, teachers, and/or authors?

If Yes,

Upload your written policies and procedures governing reimbursement of expenses for planners, teachers and/or authors.

If No,

Include the statement: "We do not provide reimbursement of expenses in any form to planners, teachers, and/or authors."

• Does your organization accept commercial support for any of its directly or jointly provided activities?

If Yes,

- Describe your process(es) for the receipt and disbursement of commercial support (both funds and in-kind support);
- 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;
- Describe the practices, or procedures, or policies you have implemented to ensure that you do
 not use commercial support to pay for travel, lodging, honoraria, or personal expenses for nonteacher or non-author participants of a CME activity.

If No,

Include the statement: "We do not accept commercial support for any of our directly or jointly provided activities."

CRITERION 9

The provider maintains a separation of promotion from education (SCS 4).

- SCS 4: Appropriate Management of Associated Commercial Promotion
- SCS 4.1: Arrangements for commercial exhibits or advertisements cannot influence planning or interfere with the presentation, nor can they be a condition of the provision of commercial support for CME activities.
- SCS 4.2: Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided.

Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME. For print, advertisements and promotional materials will not be interleafed within the pages of the CME content. Advertisements and promotional materials may face the first or last pages of printed CME content as long as these materials are not related to the CME content they face and are not paid for by the commercial supporters of the CME activity. For computer based, advertisements and promotional materials will not be visible on the screen at the same time as the CME content and not interleafed between computer 'windows' or screens of the CME content. (Supplemented February 2014; the information that follows previously appeared in ACCME policies. No changes have been made to the language.) Also, ACCME-accredited providers may not place their CME activities on a Web site owned or controlled by a commercial interest. With clear notification that the learner is leaving the educational Web site, links from the Web site of an ACCME accredited provider to pharmaceutical and device manufacturers' product Web sites are permitted before or after the educational content of a CME activity, but shall not be embedded in the educational content of a CME activity. Advertising of any type is prohibited within the educational content of CME activities on the Internet including, but not limited to, banner ads, subliminal ads, and pop-up window ads. For computer based CME activities, advertisements and promotional materials may not be visible on the screen at the same time as the CME content and not interleafed between computer windows or screens of the CME content. For audio and video recording, advertisements and promotional materials will not be included within the CME. There will be no 'commercial breaks.' For live, face-to-face CME, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during, or after a CME activity. Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or place of the CME activity.

(Supplemented, February 2014; the information that follows previously appeared in ACCME policies. No changes have been made to the language.) For Journal-based CME, none of the elements of journal-based CME can contain any advertising or product group messages of commercial interests. The learner must not encounter advertising within the pages of the article or within the pages of the related questions or evaluation materials.

SCS 4.3: Educational materials that are part of a CME activity, such as slides, abstracts and handouts, cannot contain any advertising, corporate logo, trade name or a product-group message of an ACCME-defined commercial interest. SCS 4.4: Print or electronic information distributed about the non-CME elements of a CME activity that are not directly related to the transfer of education to the learner, such as schedules and content descriptions, may include product-promotion material or product-specific advertisement.

SCS 4.5: A provider cannot use a commercial interest as the agent providing a CME activity to learners, e.g., distribution of self-study CME activities or arranging for electronic access to CME activities.

• Do you use a commercial interest to distribute your CME activities or provide electronic access to your activities?

If	Yes	Please	- Fxn	lain

If No, state, "We do not use a commercial interest to distribute our CME activities or provide electronic access to our 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.

If No, state, "We do not organize commercial exhibits in association with any of our CME activities."

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.

If No, state, "We do not arrange for advertisements in association with any of our CME activities."

CRITERION 10

The provider actively promotes improvements in health care and NOT proprietary interests of a commercial interest (SCS 5).

- SCS 5: Content and Format Without Commercial Bias
- SCS 5.1: The content or format of a CME activity or its related materials must promote improvements or quality in healthcare and not a specific proprietary business interest of a commercial interest.
- SCS 5.2: Presentations must give a balanced view of therapeutic options. Use of generic names will contribute to this impartiality. If the CME educational material or content includes trade names, where available trade names from several companies should be used, not just trade names from a single company.

It is an expectation of the ACCME that the content of CME activities does not promote the proprietary interests of any commercial interests (i.e., there is no commercial bias) and that your CME activities give a balanced view of therapeutic options.

• Describe how your CME activities and your program of continuing medical education ensure that these two expectations are fulfilled (e.g., in the context of your planning, procedures, policy, and monitoring).

CME Clinical Content Validation Policy

Accredited providers are responsible for validating the clinical content of CME activities that they provide. Specifically,

- 1. 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.
- 2. 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.
- 3. 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. An organization whose program of CME is devoted to advocacy of unscientific modalities of diagnosis or therapy is not eligible to apply for ACCME accreditation.

Definition of CME: Continuing medical education consists of educational activities which serve to maintain, develop, or increase the knowledge, skills, and professional performance and relationships that a physician uses to provide services for patients, the public, or the profession. The content of CME is that body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public.

The ACCME requires that the content of all CME activities meets the ACCME's Clinical Content Validation policy, and that the subject matter is within the ACCME's Definition of CME.

Describe how your CME activities and your program of continuing medical education ensure that these
expectations are fulfilled (in the context of your planning, procedures, policy, and monitoring).

CRITERION 11

The provider analyzes changes in learners (competence, performance, or patient outcomes) achieved as a result of the *overall* program's activities/educational interventions.

Based on data and information from your program's activities/educational interventions, provide your
analysis of changes achieved in your learners' competence, performance, or in patient outcomes. (Please
note that "overall program" refers to all the activities you've offered during your reaccreditation period,
not evaluation of individual activities.)

CRITERION 12

The provider gathers data or information and conducts a *program*-based analysis on the degree to which the CME mission of the provider has been met through the conduct of CME activities/educational interventions.

• 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. (Please note that "program-based" refers to all the activities offered, not individual activities.)

CRITERION 13

The provider identifies, plans and implements the needed or desired changes in the overall program (e.g., planners, teachers, infrastructure, methods, resources, facilities, interventions) that are required to improve on ability to meet the CME mission.

 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. (*Please include examples of identification, planning* and implementation.)

Attendance Records Retention Policy

Attendance Records: An accredited provider must have mechanisms in place to record and, when authorized by the participating physician, verify participation for **six years** from the date of the CME activity. The accredited provider is free to choose whatever registration method works best for their organization and learners. The ACCME does not require sign-in sheets.

- Describe the mechanism your organization uses to record and verify physician participation for six years from the date of your CME activities.
- Provide an example of the information or report(s) your mechanism can produce for an individual participant.