

Continuing Medical Education

Planning Process: Courses

The CME planning process occurs in six major stages:

1. Identification of Practice Gap/Planning/Conflict of Interest Review
2. CME Application Process
3. Program development/Faculty/Logistical Planning/Promotion
4. Delivery
5. Final Report and Follow-Up Meeting
6. Outcomes Evaluation

A designated "Activity Director" (physician required) is responsible for overseeing all six stages of this process. In addition, the appointment of an individual to provide administrative support as an "Activity Coordinator" is required. The Office of CME can provide meeting/project management services for some activities, subject to time frame and resources available.

Practice Gap Identification & Planning

The Practice Gap Identification and Planning process usually begins with the identification of an Activity Director, a Planning Committee of health professionals, made up mostly of physicians, a representative of the Office of CME or Education and Library Committee, quality improvement or outcomes department representative, pharmacy, physician assistant, technologist, and nursing, as appropriate. In the first instance, an Activity Director (physician required) must be identified for the activity and his/her Conflict of Interest (COI) is reviewed.

An effective Needs Assessment examines the GAP (in knowledge, skills and behaviors) between "What is" (actual patient care) and "What Should Be." A review of Needs Assessment materials (outcomes data, national guidelines, national patient safety goals, medical staff surveys, library search requests, previous CME evaluation summaries, Hospital specific data and clinical outcomes, CORE measure outcomes, results of Ongoing Professional Practice Evaluation, Quality Assurance and Utilization Review Committee reports, Morbidity & Mortality reports, literature/web searches) takes place to determine the need for the activity.

Planning for CME activities demonstrates the linkage between the documented needs assessment, desired educational results, learning objectives, and outcomes of the education in terms of improved/changed physician practice and/or patient health status.

The CME Activity Planning tool or thorough minutes are completed as documentation of this process. The CME Activity Planning tool encompasses the following steps:

- The target audience is identified as a result of the needs assessment process
- Learning objectives are developed

- Outlines the major topics to be covered
- Identifies potential faculty, and begins the process of obtaining, reviewing and resolving any real or perceived COI (as stated in the Conflict of Interest Reporting forms)
- Determines method(s) of educational delivery
- Sets the location and dates for the activity
- Establishes a budget to support the activity
- Drafts and executes promotional plans
- Identifies if commercial support will be sought (a red flag for the Office of CME)

CME Application

During later phases of planning, a CME Activity Application for the designation of CME credit is prepared, using information gathered during the Planning Committee process.

When the CME Activity Application is complete, including the necessary supplementary material, it is submitted to the SHS Office of CME for review. Once the Office of CME determines the application meets all policies and standards, it is submitted to the Education and Library Committee for review and possible approval for designation of credit.

Once approval is received, promotional material containing the proper CME designation statements can be distributed. The Office of CME is responsible for generating the initial sign in sheet, evaluation and attestation form, pre-/post-test form (if applicable), announcement, faculty letter (speaker agreement), and post-activity survey templates.

Development/Organizing

This is an extension of planning and often occurs concurrently with the preparation and submission of the application. Organizing usually continues right up until the program is actually delivered, although the most intense work is usually at the beginning, right around the planning and application stages. The Office of CME staff is appointed to monitor and guide this process as needed.

Some of the important organizing tasks are:

- Recruiting faculty and conducting a rigorous COI process, including the conduct of a "Clinical Content Review and Validations"
- Preparation of the syllabus for distribution
- Contracting for meeting management services, meeting rooms, food and beverage, and audio-visual services
- Collecting necessary CME documentation (faculty COI Reporting Forms)
- Preparing, printing, and mailing/emailing promotional materials (once they have been approved by the Office of CME staff)
- Planning the logistics of the activity
- Recruiting and training conference management staff

Required Final Report & Follow-up

In order for the Office of CME to award *AMA PRA Category 1 Credit(s)TM* to physicians who attend, the Final Activity Report must be received in the Office of CME no later than 4 weeks after the conclusion of the activity.

The Final Budget for the activity must be submitted no later than 8 weeks after the conclusion of the activity.

Failure to submit the required documentation will result in the withdrawal of CME designation for the activity and the attendees will not receive CME credit for their attendance.

Outcomes Evaluation

The Activity Director is responsible for describing the method(s) and tools that will be used to evaluate whether the CME activity had an impact on physician learning, practice change, and patient health status outcomes. Documentation of the outcomes evaluation is required no later than 8 weeks after the conclusion of the activity.

The Final Activity Report must contain the following documentation:

- Attendance sheet/roster
- List of Faculty
- Completed Faculty letter
- Signed Activity Directors, planning committee, and faculty COI reporting forms
- Documentation of Review and Resolution of Faculty COI reporting form(s)
- Clinical Content Review and Validation Forms
- Documentation of Review and Resolution of Faculty COI form
- Samples of handouts or syllabus with required language
- Activity Director Review form
- Summarized Evaluation forms
- Program brochures, flyers, or announcement
- Final budget

May be submitted up to eight weeks after the activity takes place:

- Final budget
- Post activity meeting minutes
- Outcomes surveys

When the Final Report is received and it is determined that all the necessary information is included, then the Office of CME will issue a CME certificate to the physician participants and maintain a record of their participation transcript in the Office of CME database (MD Staff). Certificates of Attendance will be issued for non-physician attendees, but their attendance is not tracked. Failure to submit the Final Report on time will result in credit not being awarded to CME participants.

The Office of CME will issue a summary of the Final Report for review by the Education and Library (E & L) Committee at the quarterly meetings. If an opportunity for improvement is identified by the Office of CME, the E & L Chair is notified and options are discussed. Options include (but not limited to): Office of CME staff mentoring, attending, and monitoring the program, one-on-one counseling between the E & L Chair and Activity Director, and withdrawal of CME designation for the activity.