**MMA DOCUMENTATION REVIEW FORM**

**Use this form to review each of the activities submitted for the Performance-in-Practice Review. Include the compilation of this information on the Surveyor Accreditation Materials Review Form.**

**Y = Y**es,there is evidence that the provider’s practice meets the MMA accreditation requirement.

**N = N**o, the evidence does **not** demonstrate that the provider’s practice meets the MMA accreditation requirement.

**ENP** = **E**vidence **N**ot **P**rovided (i.e. the provider included NO evidence in the file to demonstrate compliance with the MMA accreditation requirement.)

**N/A** = **N**ot **A**pplicable and requires an explanation.

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| **Provider #** |  | **Provider Name** |  |
| **Activity Name** |  |
| **Activity Date** |  | **Activity Type** |  | **Sponsorship** | **Directly or Jointly** | **Commercial Support Received?** | **Yes/No** |

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| ***For THIS ACTIVITY does the provider’s evidence demonstrate that the provider*** | Y | N | ENP | N/A | Explanations: |
| C2 | … incorporated needs (knowledge, competence, or performance) that underlie a professional practice gap(s) of their own learners?  |  |  |  |  |  |
| C3 | … activity designed to change competence, performance, or patient outcomes (as described in its mission statement)?  |  |  |  |  |  |
| C5  | … activity format was appropriate for the activities’ setting, objectives, and desired results?  |  |  |  |  |  |
| C6  | … developed the activity in the context of desirable physician attributes (e.g., IOM competencies, ACGME competencies)?  |  |  |  |  |  |
| C7 Q1  | … made all decisions… free of the control of commercial interests? (SCS1) |  |  |  |  |  |
| C7Att. 1 | … uses proper time frames and definitions when collecting disclosure information from individuals in control of content? (SCS2.1) |  |  |  |  |  |
| C7Att. 2  | … had disclosure information from all individuals in control of CME content regarding their relevant financial relationships? (SCS2.1) |  |  |  |  |  |
| C7 Att. 2  | … disqualified anyone that refused to disclose? (SCS2.2) |  |  |  |  |  |
| C7 Att. 2 | … implemented a mechanism(s) to identify and resolve conflicts of interest prior to the activity? (SCS2.3) |  |  |  |  |  |
| C7 Att. 3 | … disclosed to learners prior to the activity relevant (or no) financial relationships (with all required information) for all individuals in control of CME content? (SCS6.1, 6,2, 6,4, and 6.5) |  |  |  |  |  |
| C7 Att. 4  | … disclosed commercial support for the activity to learners prior to the activity (SCS6.3, 6,4, and 6.5) |  |  |  |  |  |
| C8 Att. 5 | … paid honoraria and reimbursement in compliance with the provider’s policies? (SCS 3.8) |  |  |  |  |  |
| C8 Att. 5  | … has written agreements that (1) specify terms and conditions ...; (2) are signed …., (3) executed prior to …, (4) for all commercial supporters? (SCS 3.8) |  |  |  |  |  |
| C10Att. 6 | … ensures that education is fair and balanced and that any clinical content presented supports safe, effective patient care? |  |  |  |  |  |
| C10Att. 6 | … ensures that accredited education is separate from marketing by ineligible companies and nonaccredited education? |  |  |  |  |  |
| C 11Att. 7 | … evaluated changes in learners’ competence **or** performance **or** patient outcomes that resulted from the CME activity? |  |  |  |  |  |
| PoliciesAtt. 8 | … utilizes the appropriate **Accreditation Statement**(s) for its activities. |  |  |  |  |  |

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| If the material you have reviewed for this activity raises a concern regarding the provider’s compliance with any MMA expectation not explicitly addressed in the above questions, please explain your concern(s) and describe the material that you reviewed that led to your concern(s).ORIf you need to elaborate further on a comment from one of the above questions, please specify here the Criterion you are referencing and continue your comment. |  |