

PERFORMANCE-IN-PRACTICE STRUCTURED ABSTRACT FOR INITIAL ACCREDITATION

#### **CME Activity Information**

You will select two activities completed within the last 24 months. The activities selected may be conducted in joint providership with a CCMEA- or ACCME- accredited provider, or they may be offered without CME credit. In this document, you will provide the information requested in concise narrative explanations and statements, in tables provided, and with uploaded documents to verify that the chosen activity and the CME program as a whole meets the CCMEA’s and ACCME’s requirements. **Complete one form for each of the selected activities**. Please be succinct, answer the questions directly, and avoid extraneous information. Only provide attachments where indicated.

**Note: If Regularly Scheduled Series (RSS) are selected, submit evidence for the series, not just for a single session or a sampling of sessions. The series is the activity. Therefore, you will demonstrate compliance for the RSS in the same manner as for a large annual meeting with multiple sessions.**

#### **Saving and Naming the PIP Document**

* If your activity was approved for CME through joint providership with an accredited organization, save a copy of this document as **[(Year)\_(Provider Name or Acronym)\_PIP\_(Activity ID)].** The Activity ID number can be obtained from the accredited provider.

*Example:* 2022\_MMET\_PIP\_201293276

* If this activity was offered without CME, save a copy of this document as **[(Year)\_(Provider Name or Acronym)\_PIP\_(Brief Title)].**

*Example:* *2022\_MMET\_PIP\_Grand Rounds*

* A copy will need to be saved for each activity being reviewed.

# CME ACTIVITY INFORMATION

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| --- | --- |
| **Organization Name:** |  |
| **Was this activity offered through joint providership?** | *Choose an item.* | **If yes, Name of Accredited Provider:** |  |
| **Activity Title:** |  |
| **ACCME Activity ID (if applicable):** |  | **Activity Date(s):** |  |
| **Activity Type:** |  | **Commercial Support Received for Activity?**  | *Choose an item.* |

# EDUCATIONAL PLANNING AND EVALUATION

## EDUCATIONAL NEEDS (Formerly 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.

1. **State the professional practice gap(s) of your learners on which the activity was based.**

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| Enter Response Here |

1. **Check the educational need(s) that apply to this activity:**

[ ]  **Knowledge**

[ ]  **Competence**

[ ]  **Performance**

1. **State the educational need(s) that you determined to be the cause of the professional practice gap(s).**

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| Enter Response Here |

## DESIGNED TO CHANGE (Formerly Criterion 3)

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

1. **Explain what competence, performance, or patient outcome this activity was designed to change.**

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| Enter Response Here |

## APPROPRIATE FORMATS (Formerly Criterion 5)

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

1. **Explain why the educational format is appropriate for this activity.**

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| Enter Response Here |

## COMPETENCIES (Formerly 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].

1. **Select the desirable physician attribute(s) this activity addresses. The list below includes the Competencies of: ACGME/ABMS, Institute of Medicine, and Interprofessional Education Collaborative, or you may enter other competencies recognized by your organization.**

**Select all that apply:**

[ ]  **Patient Care and Procedural Skills**

[ ]  **Medical Knowledge**

[ ]  **Quality Improvement**

[ ]  **Practice-Based Learning and Improvement**

[ ]  **Interpersonal and Communication Skills**

[ ]  **Professionalism**

[ ]  **Systems-Based Practice**

[ ]  **Provide Patient-Centered Care**

[ ]  **Work in Interdisciplinary Teams**

[ ]  **Employ Evidence-Based Practice**

[ ]  **Utilize Informatics**

[ ]  **Values/Ethics for Interprofessional Practice**

[ ]  **Roles/Responsibilities**

[ ]  **Interprofessional Communication**

[ ]  **Teams and Teamwork**

[ ]  **Other: Please list other competencies, if applicable:** **Enter Response Here**

## ANALYZES CHANGE (Formerly 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.

1. **Describe the strategies used to obtain data or information about changes achieved in learners’ competence or performance or patient outcomes as a result of their participation in this activity, including, for example, questions you asked the learner about changes in competence or performance or other change data such as quality improvement or patient outcomes.**

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| Enter Response Here |

1. **Submit the compiled or summative data or information generated from this activity about changes achieved in learners' competence or performance or patient outcomes. Label the attachment: 1. Learner Change Data\_(Activity ID or Brief Title)**

# STANDARDS FOR INTEGRITY AND INDEPENDENCE IN ACCREDITED CONTINUING EDUCATION

## STANDARD 1: ENSURE CONTENT IS VALID (Formerly CME Clinical Content Validation Policies and Criterion 10 SCS 5.2)

Accredited providers are responsible for ensuring that their education is fair and balanced and that any clinical content presented supports safe, effective patient care.

1. All recommendations for patient care in accredited continuing education must be based on current science, evidence, and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options.
2. All scientific research referred to, reported, or used in accredited education in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation.
3. Although accredited continuing education is an appropriate place to discuss, debate, and explore new and evolving topics, these areas need to be clearly identified as such within the program and individual presentations. It is the responsibility of accredited providers to facilitate engagement with these topics without advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning.
4. Organizations cannot be accredited if they advocate for unscientific approaches to diagnosis or therapy, or if their education promotes recommendations, treatment, or manners of practicing healthcare that are determined to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients.
5. **Submit the required documentation as described below based on the type of the activity.**

**If the activity is a Journal CME/CE or Enduring Material (online or print) CME activity:** Attach instructions to access the CME product itself, so reviewers may experience the activity as your learners experience it. Within your attachment, provide a URL/link to the activity and generic login(s) and password(s), if necessary for access. The product must be available for review from the point of submission through the end of your current accreditation term. If internet activities are no longer available online, you may provide access to an archived website. If this is not an option, then screen shots are acceptable.

**OR**

**If the activity is a Regularly Scheduled Series (RSS)**: Attach a listing of the *dates, faculty, location, and topi*cs of *each session*.

**OR**

**If the activity is Live, a Manuscript Review, Test-Item Writing, Committee Learning, Performance/Quality Improvement, Internet Searching and Learning, Learning from Teaching or Other/Blended Learning activity:** Attach the activity topics/content to include the nature and scope of the CME content (e.g., content outline, agenda, brochure, program book, or announcement).

**Label the attachment:** **2. Clinical Content Validation\_(Activity ID or Brief Title)**

## STANDARD 2: PREVENT COMMERCIAL BIAS AND MARKETING IN ACCREDITED CONTINUING EDUCATION (Formerly Criterion 7 [SCS 1] and Criterion 10 [SCS 5.1])

Accredited continuing education must protect learners from commercial bias and marketing.

1. The accredited provider must ensure that all decisions related to the planning, faculty selection, delivery, and evaluation of accredited education are made without any influence or involvement from the owners and employees of an ineligible company.
2. Accredited education must be free of marketing or sales of products or services. Faculty must not actively promote or sell products or services that serve their professional or financial interests during accredited education.
3. The accredited provider must not share the names or contact information of learners with any ineligible company or its agents without the explicit consent of the individual learner.
4. **We attest that this activity meets the expectations of all three elements of Standard 2.**

[ ]  Check box to attest.

## STANDARD 3: IDENTIFY, MITIGATE, AND DISCLOSE RELEVENT FINANCIAL RELATIONSHIPS (Formerly Criterion 7 [SCS 1, 2 & 6])

Accredited providers must take the following steps when developing accredited continuing education.

Collect information: Collect information from all planners, faculty, and others in control of educational content about all their financial relationships with ineligible companies within the prior **24 months**. There is no minimum financial threshold; individuals must disclose all financial relationships, regardless of the amount, with ineligible companies. Individuals must disclose regardless of their view of the relevance of the relationship to the education. Disclosure information must include:

* The name of the ineligible company with which the person has a financial relationship.
* The nature of the financial relationship. Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual’s institution receives the research grant and manages the funds.

Exclude owners or employees of ineligible companies: Review the information about financial relationships to identify individuals who are owners or employees of ineligible companies. These individuals must be excluded from controlling content or participating as planners or faculty in accredited education. There are three exceptions to this exclusion— employees of ineligible companies can participate as planners or faculty in these specific situations:

* When the content of the activity is not related to the business lines or products of their employer/company.
* When the content of the accredited activity is limited to basic science research, such as preclinical research and drug discovery, or the methodologies of research, and they do not make care recommendations.
* When they are participating as technicians to teach the safe and proper use of medical devices, and do not recommend whether or when a device is used.

Identify relevant financial relationships: Review the information about financial relationships to determine which relationships are relevant. Financial relationships are relevant if the educational content an individual can control is related to the business lines or products of the ineligible company.

Mitigate relevant financial relationships: Take steps to prevent all those with relevant financial relationships from inserting commercial bias into content.

* Mitigate relationships prior to the individuals assuming their roles. Take steps appropriate to the role of the individual. For example, steps for planners will likely be different than for faculty and would occur before planning begins.
* Document the steps taken to mitigate relevant financial relationships.

Disclose all relevant financial relationships to learners: Disclosure to learners must include each of the following:

* The names of the individuals with relevant financial relationships.
* The names of the ineligible companies with which they have relationships.
* The nature of the relationships.
* A statement that all relevant financial relationships have been mitigated.

Identify ineligible companies by their name only. Disclosure to learners must not include ineligible companies’ corporate or product logos, trade names, or product group messages.

Disclose absence of relevant financial relationships. Inform learners about planners, faculty, and others in control of content (either individually or as a group) with no relevant financial relationships with ineligible companies.

Learners must receive disclosure information, in a format that can be verified at the time of accreditation, before engaging with the accredited education.

1. **Did this activity meet one of the exceptions listed below?**
2. **Accredited education that is non-clinical, such as leadership or communication skills training.**
3. **Accredited education where the learner group is in control of content, such as a spontaneous case conversation among peers.**
4. **Accredited self-directed education where the learner controls their educational goals and reports on changes that resulted, such as learning from teaching, remediation, or a personal development plan. When accredited providers serve as a source of information for the self-directed learner, they should direct learners only to resources and methods for learning that are not controlled by ineligible companies.**

*Choose an item.*

**If yes, describe how the activity met the exception.**

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| Enter Response Here |

**IF THIS ACTIVITY DOES NOT MEET ONE OF THE EXCEPTIONS LISTED ABOVE,**

1. **Did owner(s)/employee(s) of ineligible companies participate as planners or faculty in this activity?**

*Choose an item.*

**If yes, describe which of the three situations listed below (Standard 3.2) was applicable to their participation as planners or faculty.**

There are three exceptions to this exclusion—employees of ineligible companies can participate as planners or faculty in these specific situations:

1. When the content of the activity is not related to the business lines or products of their employer/company.
2. When the content of the accredited activity is limited to basic science research, such as pre-clinical research and drug discovery, or the methodologies of research, and they do not make care recommendations.
3. When they are participating as technicians to teach the safe and proper use of medical devices, and do not recommend whether or when a device is used.

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| Enter Response Here |

1. **Did an ineligible company take the role of non-accredited partner in a joint providership relationship in this activity?**

*Choose an item.*

1. **Attach a single completed example of the form(s), tool(s), or mechanism(s) used to collect information from all planners, faculty, and others in control of the educational content of this activity about their financial relationships with ineligible companies.**

*If you use different form(s), tool(s), or mechanism(s) within your process, attach a single copy example of each version used. Do not submit more than a single example of each form used. In each case,* ***the example provided must be one that was actually completed*** *by a person in control of content* ***for this activity****.*

**Label the attachment: 3. Financial Relationships\_(Activity ID or Brief Title)**

1. **Download and complete the spreadsheet linked** [**here**](https://accme.org/publications/excel-spreadsheet-for-documenting-individuals-control-content-performance-practice)**.**

**Then, attach the spreadsheet as an EXCEL file in the field below. In the spreadsheet, provide the information indicated in each of the five columns as follows. For everyone in control of content, list:**

In the spreadsheet, provide the information indicated in each of the five columns as follows. For everyone in control of content, list:

1. the name of the individual,
2. the individual’s role(s) (e.g., planner, reviewer, faculty, author, and/or other roles in control of educational content) in the activity,
3. the name of the ACCME-defined ineligible company(ies) with which the individual has a relevant financial relationship (or if the individual has no relevant financial relationship(s),
4. the nature of the relationship(s), and
5. the mechanism(s) implemented to mitigate all relevant financial relationships appropriate to the role(s) of the individuals in the activity.

PLEASE NOTE: EXCEL spreadsheets formatted differently than the ACCME’s template, or with other information than the ACCME’s template, will not be accepted. (PDF and Word files will not be accepted.)

**Label the attachment: 4. Individuals in Control of Content\_(Activity ID or Brief Title)**

1. **Attach the information, as disclosed to learners, about the presence or absence of relevant financial relationships for all individuals in control of CME content, if applicable. Also, if applicable, attach the statement, as disclosed to learners, that all relevant financial relationships were mitigated.**

**Label the attachment: 5. Disclosure to Learners\_(Activity ID or Brief Title)**

## STANDARD 4: MANAGE COMMERCIAL SUPPORT APPROPRIATELY

## (Formerly Criterion 8 [SCS 3])

Accredited providers that choose to accept **commercial support** (defined as financial or in-kind support from ineligible companies) are responsible for ensuring that the education remains independent of the ineligible company and that the support does not result in commercial bias or commercial influence in the education. The support does not establish a financial relationship between the ineligible company and planners, faculty, and others in control of content of the education.

1. **Decision-making and disbursement**: The accredited provider must make all decisions regarding the receipt and disbursement of the commercial support.
	1. Ineligible companies must not pay directly for any of the expenses related to the education or the learners.
	2. The accredited provider may use commercial support to fund honoraria or travel expenses of planners, faculty, and others in control of content for those roles only.
	3. The accredited provider must not use commercial support to pay for travel, lodging, honoraria, or personal expenses for individual learners or groups of learners in accredited education.
	4. The accredited provider may use commercial support to defray or eliminate the cost of the education for all learners.
2. **Agreement**: The terms, conditions, and purposes of the commercial support must be documented in an agreement between the ineligible company and the accredited provider. The agreement must be executed prior to the start of the accredited education. An accredited provider can sign onto an existing agreement between an accredited provider and a commercial supporter by indicating its acceptance of the terms, conditions, and amount of commercial support it will receive.
3. **Accountability**: The accredited provider must keep a record of the amount or kind of commercial support received and how it was used, and must produce that accounting, upon request, by the accrediting body or by the ineligible company that provided the commercial support.
4. **Disclosure to learners**: The accredited provider must disclose to the learners the name(s) of the ineligible company(ies) that gave the commercial support, and the nature of the support if it was in-kind, prior to the learners engaging in the education. Disclosure must not include the ineligible companies’ corporate or product logos, trade names, or product group messages.
5. **Did this activity receive commercial support?**

Choose an item.

**If yes, complete the table below. List the name(s) of the commercial supporter(s) of this activity and the dollar value of any monetary commercial support and/or indicate non-monetary (in-kind) support.**

|  |  |  |
| --- | --- | --- |
| **Name of Commercial Supporter** | **Type of Support** | **Amount of Monetary Support (in US dollars), if any****(Not applicable for in-kind support)** |
| Enter Response Here | [ ]  Monetary[ ]  Non-Monetary (In-Kind) | $\_\_\_\_\_\_\_\_\_\_\_\_\_  |

1. **Attach each executed commercial support (monetary and non-monetary) agreement for the activity.**

**Label the attachment: 6. Commercial Support Agreement(#)\_(Activity ID or Brief Title)**

1. **Attach the evidence that demonstrates the disclosure of commercial support (monetary and non-monetary), as presented to learners.**

**Label the attachment: 7. Commercial Support Disclosure\_(Activity ID or Brief Title)**