

## Mobile Infirmiry Medical Center's Continuing Medical Education (CME) Activity Request

CME Activity Request requirements are based on (C1-C22) criteria of the ACCME® Essential Areas and Elements and (six SCS) of THE ACCME STANDARDS FOR COMMERCIAL SUPPORT<sup>SM</sup>. **Instructions: Please complete this form and return with a detailed activity outline plus all required documentation (all bold items in this form) by Fax: 435-3072 or mail: Mobile Infirmiry Medical Center, CME Coordinator/Education Department, P.O. Box 2144, Mobile, AL 36652 If questions arise during completion of this request, call 435-2578.**

### A. Proposed Activity Title: \_\_\_\_\_

**Activity Type (Select one):**  Directly Sponsored (MIMC provides CME credit for MIMC) -- or --  
 Jointly-Sponsored (MIMC provides credit for non-CME entity) -- or --  
 Co-Sponsored (MIMC works with another accredited CME provider)

**Activity Format (C5) (Select one):**  Live activity  Enduring Material\*  Journal-based CME activity\*  
 Internet point-of-care  PI-CME  Manuscript review  Test-item writing

\*must include learner's performance assessment; credit may be awarded only to those that meet a minimum performance level

Proposed Activity Dates: \_\_\_\_\_ Times: \_\_\_\_\_

Proposed Activity Location: \_\_\_\_\_

Number of AMA PRA Category 1 Credit(s)<sup>TM</sup> requested: \_\_\_\_\_ Est. Attendance: \_\_\_\_\_

Target Audience: \_\_\_\_\_ Other groups activity will be open to: \_\_\_\_\_

**Activity (Physician) \*Director/Consultant:** \_\_\_\_\_

(\*Individual involved in planning, organizing and conducting activity; *attach additional sheet if multiple people are involved*)

Title: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

**Activity \*\*Coordinator (if different from Director above):** \_\_\_\_\_

(\*\*Individual responsible for logistics/paperwork-objectives, outline, rosters, arrangements, etc. of activity)

Title: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address/Department: \_\_\_\_\_ Fax: \_\_\_\_\_

**Attach a list of all individuals (C7, SCS 2.1) assisting with planning the activity. NOTE: Each person in a position to control an education activity's planning, approval or content is required to complete and submit a "Disclosure & Attestation" form; see Appendix Exhibit D. (C7, SCS 2.1) Individuals refusing disclosure will be disqualified from planning and/or implementation. (C7, SCS 2.2) If a conflict of interest is evident upon committee review, resolution must occur. (C7, SCS 2.3) Relevant disclosures must be made known to participants prior to activity. (C7, SCS 6.1-6.2, 6.4-6.5)**

**Presenter: (Note: Attach additional sheets if necessary for multiple speakers.)**

Name of Speaker \_\_\_\_\_ Title: \_\_\_\_\_

Speaker Address \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Submit a curriculum vita for each speaker which validates expertise in the specified area. Each activity speaker must sign a "Disclosure & Attestation" form (see Appendix Exhibit D).**

### B. Activity Funding - Attach a separate activity budget. (Check all statements that apply):

(Note: An Income/Expense statement detailing receipts and expenditures is required at activity completion (C8, SCS 3.13).)

- Commercial Support **will not** be involved.  Fees will be collected (registration, exhibits, meals, etc.)  
 \*Commercial Support **will** be involved.  Institutional/ \_\_\_\_\_ Department funds

(C8, SCS 3.4-3.6) Name of Company: \_\_\_\_\_

- Other funding sources (specify): \_\_\_\_\_

\*Regarding the oversight of funds from a commercial supporter:

- Funds received **must** be in the form of an educational grant payable to Mobile Infirmiry Medical Center.
- Terms, conditions, and purposes of the educational grant are documented in a **signed Letter of Agreement** (C8, SCS 3.4-3.6) between Mobile Infirmiry and each supporter (see Appendix Exhibit E);
- Honoraria and expenses are reasonable; paid in compliance with provider policies (C8, SCS 3.8; 3.10)
- No other funds are paid by the proprietary company to the director of the activity, faculty, or others involved with the supported activity.
- Disclosure of commercial support must be made to learners prior to activity. (C7, SCS 6.3-6.5)

**C. Needs Assessment**

Will this activity integrate CME into the process of improving physicians' professional practice? (C16)  Yes  No

Statement of Need: (C2) ***(Why is this activity necessary, what needs to change? How will it improve patient care?)*** \_\_\_\_\_

Select one or more source of best practice/desired physician attribute: (C6) ***(Describe/attach source of evidence.)***

<input type="checkbox"/> Review of changes in quality of care as revealed by medical audit or other patient care reviews: <input type="checkbox"/> QI reports, <input type="checkbox"/> chart reviews, <input type="checkbox"/> audits <input type="checkbox"/> other (describe): _____
<input type="checkbox"/> Ongoing census of diagnoses made by staff, as evidenced by: <input type="checkbox"/> note summaries, <input type="checkbox"/> meeting minutes
<input type="checkbox"/> Advice from authorities of the field or relevant medical societies, as evidenced by: <input type="checkbox"/> attached expert list, <input type="checkbox"/> _____ medical society, <input type="checkbox"/> recommended summary of _____
<input type="checkbox"/> Formal or informal requests or surveys of the target audience, faculty or staff, as evidenced by: <input type="checkbox"/> _____ survey, <input type="checkbox"/> other (describe): _____
<input type="checkbox"/> Committee discussion, evidenced by _____ committee meeting minutes
<input type="checkbox"/> Evidence from peer-reviewed journals, government sources (Medicare, Health Dept, etc.), census reports: <input type="checkbox"/> journal articles, <input type="checkbox"/> government documents, <input type="checkbox"/> website: _____
<input type="checkbox"/> Review of board examinations and/or re-certification requirements, as evidenced by <input type="checkbox"/> reviews, <input type="checkbox"/> updates
<input type="checkbox"/> New procedure, technology, equipment, methods of diagnosis/treatment, specifically: _____
<input type="checkbox"/> Legislative, regulatory or organizational changes affecting patient care, specifically: _____
<input type="checkbox"/> Joint Commission Patient Safety Goal/Competency (include copy of goal and/or Institute of Medicine (IOM) Core Competencies, The Accreditation Council for Graduate Medical Education (ACGME)/American Board of Medical Specialties (ABMS) competencies, ABMS Maintenance of Certification)
<input type="checkbox"/> National priorities: <input type="checkbox"/> MRSA, <input type="checkbox"/> Disaster Preparedness/Response Plan, <input type="checkbox"/> Cultural Competency, <input type="checkbox"/> Fall Risk, <input type="checkbox"/> other (describe): _____

What is the quality gap—or the professional practice gap (C2)—the difference between health care **processes or outcomes** observed in practice, and those **potentially achievable** on the basis of current professional knowledge?

(C3) This is a gap in physician **(select all that apply)**:

**knowledge** (awareness or understanding),  **competence** (ability or skill),  **performance** (practice or on the job)

What are potential or real **barriers** –Why are participants doing things differently than what is desired-- why are they not able to translate new knowledge/competence into new performance/patient outcomes?-- facing physicians if this need (gap) is addressed? (C4) (e.g. lack of funding, need new equipment, poor client communication, lack required training):

What strategy can be implemented to remove, overcome or address the barrier to physician change? (C19) \_\_\_\_\_

In terms of effects on patients, safety or systems, what is activity designed to change (desired result)? (C3) \_\_\_\_\_

**D. Attach Educational Objectives : ( Attach additional sheet with activity goals stated on it.)**

What are desired results of the activity? (Objectives support the attainment of desired result.)

Fill in the blanks: As a result of attending the activity, a participant will be able to \_\_, to \_\_, and to \_\_. **Avoid verbs like understand, appreciate, believe, know and learn as these are not measurable.** Some acceptable verbs indicative of critical thinking include: state, list (for knowledge); describe, discuss, explain (for comprehension); apply, practice (for application); analyze, compare (for analysis); design, plan (for synthesis); and assess, compare, measure (for evaluation).

**Collaboration and cooperation with other stakeholders (organizations/groups sharing same interests) (C20):**

What other groups within MIMC are you working with on this issue? \_\_\_\_\_

Does activity address working within our system framework for quality improvement (C21)?  Yes  No

If yes, describe how: \_\_\_\_\_

Which outside organizations are working on this issue that could be partnered with? \_\_\_\_\_

What ways could these groups help address or remove barriers identified in "needs assessment" above? \_\_\_\_\_

What non-educational ways can issue be addressed? -- (A non-educational strategy to enhance or facilitate change as an adjunct to activities or educational interventions could be 1) sending reminders to participants following CME activities (e.g., "Don't forget to..." or "Have you incorporated...?"), or 2) working with others to facilitate a peer to peer feedback system to reinforce new practices, or 3) incorporating new questions about the new practices into patient satisfaction questionnaires. (C17) \_\_\_\_\_

What outside factors impact patient outcomes that cannot be controlled? (C18): \_\_\_\_\_

**E. Activity Content**

Attach a copy of a proposed activity outline (e.g. detailed outline of content to be presented or entire PowerPoint) designed to meet the objectives. Include exact times for each presentation or activity.

What is the proposed format (C5) that is appropriate to objectives and desired results? (**Check all that apply**)

- Presentation  Case Study  Round Table  Simulation  
 Other (describe) \_\_\_\_\_

**F. Activity Evaluation (C11)**

Aside from presentation evaluation, what other types of evaluation method(s) will be used to know if the activity met the need and created a change in competence, performance, or patient outcomes? (**Check all that apply**)

- Pre- and Post-Quiz  Audience Response System  Observation of changes in \_\_\_\_\_  
 Chart Audits  Patient Feedback/Surveys  3-6 month post-activity survey  
 Other (describe) \_\_\_\_\_

**G. Acknowledgements**

If activity is approved for AMA PRA Category 1 Credit™, I acknowledge the following:

- Yes  No I have read and agree to abide by THE ACCME STANDARDS FOR COMMERCIAL SUPPORT™.  
 Yes  No I will provide information in a timely manner, as requested by the CME staff.  
 Yes  No I will obtain approval of all advertisements/brochures/marketing materials by CME staff before use.  
 Yes  No I understand that all content will be reviewed by the Medical Education Committee prior to activity.  
 Yes  No I understand a CME staff member/ medical education committee member will attend CME activity.

\_\_\_\_\_  
Signature of Activity Director/Consultant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Activity Coordinator

\_\_\_\_\_  
Date

**CME/EDUCATION DEPARTMENT USE ONLY**

\_\_\_\_\_  
Signature of Medical Education Committee Chair

\_\_\_\_\_  
Date

Date Rec'd: \_\_\_\_\_ CME Committee Date: \_\_\_\_\_ Approved: \_\_\_\_\_ # Credits: \_\_\_\_\_ Deferred: \_\_\_\_\_

Disapproved: \_\_\_\_\_ Reasons: \_\_\_\_\_

**AMA PRA ACTIVITY FORMAT DEFINITIONS:**

**Live activity** is an activity that occurs at a specific time as scheduled; may be offered by a variety of mechanisms such as conferences, workshops, seminars, regularly scheduled series (RSS), journal clubs, simulation workshops, structured learning activities during a committee meeting and live Internet webinars.

**Enduring Material** is activity that endures over a specified time. It can include print, audio, video and Internet materials, such as monographs, podcasts, CD-ROMs, DVDs, archived webinars, as well as other web-based activities. It must include learner instructions on how to complete the activity. It must include an assessment of learner that measures achievement of the educational purpose and/or objectives with an established minimum performance level. It must include bibliographic sources to allow for further study.

**Journal-based CME activity** is an article, within a peer-reviewed, professional journal, certified for credit prior to publication of the journal. An assessment of the learner that measures achievement of educational purpose and/or objectives must be provided with an established minimum performance level. This may include patient-management case studies, a post-test and/or application of new concepts in response to simulated problems.

**Test-item writing activity** is where physicians learn through their contribution to the development of high stakes exams, or certain peer-reviewed self-assessment activities, by researching, drafting and defending potential questions. This activity must be developed only for National Board of Medical Examiners (NBME) exams; American Board of Medical Specialties (ABMS) board certification; national medical specialty society peer-reviewed, published, self-assessment activities.

**Manuscript review** is a critical review of an assigned journal manuscript that has been submitted for journal publication that is included in the MEDLINE bibliographic database..

**Performance Improvement Continuing Medical Education (PI CME)** is a three-stage process of evidence-based performance measures that may address any facet (structure, process or outcome) of a physician's practice with direct implications for patient care.

**Internet point-of-care (PoC) activity** is self-directed online learning on topics relevant to clinical practice. It must have a process to oversee content integrity, including appropriate selection and use of professional, peer-reviewed literature, and ensuring that search algorithms are unbiased. It must provide clear instructions on how to access the portal/database. Participation must be verified by tracking topics and sources searched. This activity requires completion and documentation of a three-step cycle: 1) review/document clinical question, 2) identify relevant sources among consultants, and 3) describe application to practice and the change in knowledge, competence or performance as measured by physician practice application or patient health status improvement. Each structured Internet PoC cycle should be designated for one-half (0.5) *AMA PRA Category 1 Credit™*.

**ACCME ACCREDITATION CRITERIA TERMS AND DEFINITIONS:**

**Competence** is the simultaneous integration of knowledge, skills and attitudes required for performance in a designated role and setting. Is knowing how to do something...a combination of knowledge, skills and performance...the ability to apply knowledge, skills and judgment in practice.

**Competency** is an underlying characteristic... causally related to effective or superior performance in a job.

**Performance** is what one actually does, in practice. Performance is based on one's competence but is modified by system factors and the circumstances.

**Professional Practice Gap** is the difference between actual and ideal performance and/or patient outcomes. In patient care, the quality gap is "the difference between present treatment success rates and those thought to be achievable using best practice guidelines." It can go beyond patient care, for example, systems' base practice, informatics, leadership and administration.

**Scope of Practice** is the range or breadth of a physician's actions, procedures, and processes. Health care services a physician or other healthcare practitioner is authorized to perform by virtue of professional license, registration or certification. "It is the definition of the rules, the regulations, and the boundaries within which a fully qualified practitioner, with substantial and appropriate training, knowledge, and experience may practice in a field of medicine or surgery, or other specifically defined field. Such practice is also governed by requirements for continuing education and professional accountability."