

I. Introduction

- A. Demographic Information Form (form to complete can be found on the MSNJ Website (www.msnj.org))
- B. Summary of CME Activities (form to complete can be found on the MSNJ Website (www.msnj.org))
- C. CME Activity List (a list of your CME activities for the current term of accreditation as submitted to the MSNJ and updated, if necessary).
- D. Self-Study Report Prologue
 1. Describe a brief history of your CME Program.
 2. Describe the leadership and structure of your CME Program.
- E. Describe your organization's change process for incorporating the MSNJ's 2006 Updated Accreditation Criteria.
- F. Provide **a list** of the current members of your CME Committee
- G. Provide **a list** of the dates of all CME Committee Meetings held during the current accreditation term and provide copies of the meeting minutes. You may make reference to the meeting minutes as evidence whenever necessary.
- H. Provide a CME Program **budget** for each year of the current accreditation term.

II. Essential Area 1: Purpose and Mission (Criterion 1)

- A.** Attach your CME mission statement to verify it has all the required components. Identify and highlight each required component: (1) purpose, (2) content areas, (3) target audience, (4) types of activities, and (5) expected results of the program.

Note: It is important that MSNJ can identify in the expected results section of your mission statement the changes that are the expected results of your CME program (i.e., changes in competence, or performance, or patient outcomes).
(C1)

III. Essential Area 2: Educational Planning (Criteria 2-3)

- A. Describe** how you incorporate into your CME activities the educational needs (knowledge, competence, or performance) that underlie the professional practice gaps of your own learners. Use the following as an outline of your descriptions:
1. *how you identify the professional practice gaps* (for professional practice gaps that are identified in methods other than direct measurement of your own learners -- e.g. national trend data, state level data-- explain how you connect these gaps to your own learners);
 2. *how the need(s) that you identify are based on those gaps*; and,
 3. *how the need(s) are articulated in terms of knowledge, competence, or performance*.
 4. *how you incorporate these needs into activities or a set of activities* (C2)
- B. Include two examples** that demonstrate your practice(s), as described in A above. In your examples, **make the professional practice gaps explicit** and the educational needs that you identified for the activities. (C2)
- C. Describe** your process of designing activities to change competence, performance, or patient outcomes, as described in your CME mission statement. (C3)
- D. Include two examples** that demonstrate your practice(s), as described above, of designing activities to change competence, performance, or patient outcomes. (C3)

IV. Essential Area 2: Educational Planning (Criteria 4-6) and MSNJ Policies

- A. **Describe** how your organization, at the CME program or activity planning level, matches the content of your activities to your learners' current or potential scope of practice. (C4)
- B. Include **two examples** that demonstrate your practice, as described above, of matching content of your activities to your learners' current or potential scope of practice. (C4)
- C. **Describe** the different educational formats (i.e., activity type and methodology) you have utilized for your activities. Explain the rationale or criteria you used in the selection of formats to ensure a format is appropriate for the setting, objectives, and desired results of an activity.
- D. Include **two examples** that demonstrate your practice, as described in C above. (C5)
- E. **Describe** that you have developed CME activities in the context of desirable physician attributes (e.g., IOM competencies, ABMS competencies, specialty specific competencies).
- F. Include **two examples** that demonstrate your practice, as described in D above. (C6)
- G. **Describe** the mechanism your organization uses to **verify physician participation** for six years from the date of your CME activities.
- H. Include **two examples** that demonstrate your practice, as described in G above.

V. Essential Area 2: Educational Planning (Criterion 7: MSNJ's Standards for Commercial Support - Independence)

- A. Describe** how your organization makes the following decisions free of the control of a commercial interest: (a) identification of needs; (b) the determination of educational objectives; (c) the selection and presentation of content; (d) the selection of all persons and organizations in a position to control the content; (e) the selection of educational methods, and (f) the evaluation of the activity. *(SCS 1.1)*
- B.** If your organization enters into joint sponsorship relationships with non-accredited providers, describe the process you use to ensure that these organizations are not commercial interests. *(SCS 1.2)*
- C.** Provide **a list** of joint sponsors and a brief description of each joint sponsor's purpose, function or mission. *(SCS 1.2)*
- D. Describe** the mechanism(s) your organization uses to ensure that everyone in a position to control educational content has disclosed to your organization relevant financial relationships with commercial interests. Include in your description your organization's mechanism(s) for disqualifying individuals who refuse to disclose. *(SCS 2.1, 2.2)*
- E. Describe** the mechanism(s) your organization uses to identify conflicts of interest prior to an activity. *(SCS 2.3)*
- F. Describe** the mechanism(s) your organization uses to resolve conflicts of interest prior to an activity. *(SCS 2.3)*
- G. Describe** your organization's process(es) and mechanism(s) for disclosure to the learners prior to the activity of (1) relevant financial relationships of all persons in a position to control educational content and (2) the source of support from commercial interests, if applicable. *(SCS 6.1-6.5)*
- H.** Include **two examples** to demonstrate that:
- (1) Your organization makes decisions free of the control of a commercial interest; *(SCS 1.1)*
 - (2) Everyone in a position to control educational content has disclosed to your organization relevant financial relationships with commercial interests, including verification that individuals who refuse to disclose are disqualified; *(SCS 2.1, 2.2)*
 - (3) Your organization identifies and resolves conflicts of interests prior to an activity; *(SCS 2.3)* and,
 - (4) Your organization discloses relevant financial relationships and the source(s) of support from commercial interests to learners prior to the activity. *(SCS 6.1-6.5)*

VI. Essential Area 2: Educational Planning (Criterion 8: ACCME's Standards for Commercial Support – Management of Funds)

NOTE: ALL ORGANIZATIONS must respond to items A - C, regardless whether or not your organization accepts commercial support.

- A. Attach** your written policies and procedures governing honoraria and reimbursement of expenses for planners, teachers, and/or authors. *(SCS 3.7-3.8)*
- B. Describe** how you ensure that social events do not compete with or take precedence over educational activities. *(SCS 3.11)*
- C.** Include **two examples** of income and expense statements from CME activities that itemize the receipt of all sources of income and expenses related to the activity. If your organization accepts commercial support, your two examples should be from activities with commercial support and the income statement should itemize the commercial support received. *(SCS 3.1, 3.3, 3.12)*

NOTE: If your organization accepts commercial support, respond to D - F; if not, go to Section VII.

- D. Describe** your process(es) for the receipt and disbursement of commercial support (both funds and in-kind support). *(SCS 3.1)*
- E. Describe** how you ensure that all commercial support is given with your organization's full knowledge and approval. Include in your response your policies and processes to ensure that no other payment is given to the director of the activity, planning committee members, teachers or authors, joint sponsor, or any others involved in the activity. *(SCS 3.3; 3.9)*
- F.** Attach an **example** of a written agreement documenting terms, conditions, and purposes of commercial support used to fulfill relevant elements of SCS. *(SCS 3.4-3.6)*
- G.** Attach a copy of your written Policy on Commercial Support *(MSNJ Policy)*

VII. Essential Area 2: Educational Planning (Criteria 9-10: ACCME’s Standards for Commercial Support – Separation of Education from Promotion; Promotion of Improvements in Healthcare)

- A.** 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. *(SCS 4.1)*

- B.** 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. *(SCS 4.2, 4.4)*

- C.** **Describe** the process or procedure your organization uses to ensure that educational materials that are part of a CME activity, such as slides, abstracts and handouts, do not contain any advertising, trade names or product group messages. *(SCS 4.3)*

- D.** Besides the provision of commercial support, **describe** what role commercial interests play in providing access to CME activities for your learners. *(SCS 4.5)*

- E.** **Describe** the planning and monitoring your organization uses to ensure that:
 - 1. The content of CME activities does not promote the proprietary interests of any commercial interests. *(SCS 5.1)*
 - 2. CME activities give a balanced view of therapeutic options. *(SCS 5.2)*
 - 3. The content of CME activities is in compliance with MSNJ's content validity value statements¹. *(Policy on Content Validation)*

- F.** Using **one example**, show how the planning and monitoring processes your organization uses detected commercial bias and/or invalid content and what your organization did to correct this situation.

¹ MSNJ's Policy on Content Validation: 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. 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. Providers are not eligible for MSNJ 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.

VIII. Essential Area 3: Evaluation and Improvement (Criteria 11-15)

- A. You are required to have data about the changes your activities have achieved. Provide MSNJ with a summary of those data. (C11)
- B. What were the conclusions you drew from your analysis of these data? (C11)

NOTE: The MSNJ expects each provider to conduct a program-based analysis on the degree to which its CME mission has been met. In Section II of this self-study report, you attached your organization's CME mission statement. That mission statement is required to have five components (purpose, content areas, target audience, types of activities, and expected results). Your learner change data and the conclusions you reached about those data will help you determine the degree to which the expected results of your CME mission have been met. The following items are designed to elicit information on *what other information* you reviewed to help you determine if your CME mission was met and *your conclusions* regarding your success at meeting your mission.

- C. *In addition to learner change data*, **describe** and include **examples** of the other data and information you gathered as a part of your overall program evaluation.
- D. Based on your review of the data and information provided in the responses to questions A-C, describe your conclusions regarding **your organization's success at meeting its CME mission**, including the degree to which your organization has:
 - 1. reached its target audience;
 - 2. provided CME on the content areas outlined in the mission;
 - 3. produced the types of activities stated in the mission;
 - 4. fulfilled its purpose; and,
 - 5. achieved its expected results (C12)
- E. Your organization may have implemented practices that demonstrate your fulfillment of Criteria 16-22. How have you evaluated the impact of these practices on your organization's ability to meet its mission? If so, **describe** how these initiatives helped your organization meet its CME mission by responding to items 1-7 below (C12)
 - 1. Did the manner and degree to which your organization integrated CME into the process for improving professional practice (C16) help your organization meet its CME mission? If so, how?
 - 2. Did the manner and degree to which your organization utilized non-educational strategies to enhance change as an adjunct to your activities/educational interventions (e.g., reminders, patient feedback) (C17) help your organization meet its CME mission? If so, how?
 - 3. Did the manner and degree to which your organization identified factors outside of your control that impact on patient outcomes (C18) help your organization meet its CME mission? If so, how?
 - 4. Did the manner and degree to which your organization implemented educational strategies to remove, overcome, or address barriers to physician change (C19) help your organization meet its CME mission? If so, how?

VIII. Essential Area 3: Evaluation and Improvement (Criteria 11-15) CONTINUED

5. Did the manner and degree to which your organization built bridges with other stakeholders through collaboration and cooperation (C20) help your organization meet its CME mission? If so, how?
 6. Did the manner and degree to which your organization participated within an institution or system framework for quality improvement (C21) help your organization meet its CME mission? If so, how?
 7. Did the manner and degree to which your organization has been positioned to influence the scope and content of activities/educational interventions (C22) help your organization meet its CME mission? If so, how?
- F.** As a result of your program-based analysis, what changes did you identify that could help you better meet your CME mission? In your response, explain how each change, if implemented, could impact a component of your CME mission (purpose, content areas, target audience, type of activities, or expected results).
- G.** Based on the changes you identified that could be made, describe the changes to your program that you **implemented**. For any potential changes (as described in question F above) that you did not implement, please explain why they were not implemented and plans to address them in the future. (C14)
- H.** Describe how your organization measured, or will measure, the impact of the improvements that you have described in G.
- I.** If the data are available, include information on whether or not the changes made to your program have fulfilled the intended purpose. Include evidence (e.g. data) to support those conclusions. (C15)

Essential Area 3: Engagement with the Environment (Criteria 16-22)

NOTE: The information gathered through your organization's responses here will be used to determine eligibility for Accreditation with Commendation.

- A.** If your organization integrates CME into the process for improving professional practice, **describe** how this integration occurs. Include **examples** of explicit organizational practices that have been implemented. (C16)
- B.** If your organization utilizes non-education strategies to enhance change as an adjunct to its educational activities, **describe** the strategies that your organization has used as adjuncts to CME activities and how these strategies were designed to enhance change. Include in your description an explanation of how the non-education strategies were connected to either an individual activity or group of activities. Include **examples** of non-education strategies that have been implemented. (C17)
- C.** If your organization identifies factors outside of its control that will have an impact on patient outcomes, **describe** instances of this practice. These instances might be specific to the planning of a CME activity or at the overall CME program level. Include **examples** of identifying factors outside of your organization's control that will have an impact on patient outcomes. (C18)
- D.** If your organization implements educational strategies to remove, overcome, or address barriers to physician change, **describe** instances of this practice. These instances might be specific to the planning of a CME activity or at the overall CME program level. Include **examples** of educational strategies that have been implemented to remove, overcome, or address barriers to physician change. (C19)
- E.** If your organization is engaged in collaborative or cooperative relations with other stakeholders, **describe** instances of these practices. These instances might be specific to the planning of a CME activity or at the overall CME program level. In your description, indicate the *nature* (e.g., held meetings, planned activities, shared information) and *rationale* (e.g., to reach shared goals, to meet our missions, to reach larger physician audiences, to share resources) of the collaboration and cooperation. Include **examples** of collaboration and cooperation with other stakeholders. (C20)
- F.** If your CME unit participates within an institutional or system framework for quality improvement, **describe** this framework. For example, your organization's framework may link the CME committee with a quality or performance improvement committee. Include **examples** of your CME unit participating within an institutional or system framework for quality improvement. (C21)
- G.** If your organization has positioned itself to influence the scope and content of activities/educational interventions, **describe** organizational procedures and practices that support this. Include **examples** of your organization positioned to influence the scope and content of activities/educational interventions. (C22)