EASTERN VIRGINIA MEDICAL SCHOOL



CONTINUING MEDICAL EDUCATION POLICY MANUAL



The Office of Continuing Medical Education Policy Manual

Table of Contents

ACCME Essential Areas and Their Elements

Organizational Structure

- A. Policies
 - 1.0 Purpose and Mission
 - 2.0 Educational Planning/Needs Assessment
 - 3.0 Educational Planning/Objectives
 - 4.0 Planning/Design
 - 5.0 Educational Planning/Evaluation
 - 6.0 Regularly Scheduled
 - 7.0 CME Committee Membership and Responsibilities
 - 8.0 Criteria for AMA PRA Category 1 Credit[™] Designation
 - 9.0 Attendance and Record Keeping
 - 10.0 Required Documentation for CME Activity File
 - 11.0 Commercial Support and Disclosure of Relationships
 - 12.0 Joint Sponsorship
 - 13.0 Enduring Materials
 - 14.0 Staff Development
 - 15.0 Case Presentation Standards
 - 16.0 New Procedures and Skills Training
 - 17.0 Internet CME Activities
 - 18.0 Verification of Verbal Disclosure
 - 19.0 Test Item Writing for AMA PRA Category 1 Credit™
 - 20.0 Standards for Manuscript Review
 - 21.0 Honoraria and Expense Reimbursement
 - 22.0 Identifying and Resolving Conflicts of Interest in CME
 - 23.0 Internet Point of Care
 - 24.0 Journal Club Standards

B. Forms

- 1. Needs Assessment
- 2. Planning
- 3. Design and Implementation
- 4. Evaluation
- C. Job Descriptions



OFFICE OF CONTINUING MEDICAL
EDUCATION
NUMBER: 1.0
SUBJECT: Purpose and Mission
ORIGINATION DATE: 4/85
CURRENT REVISION DATE: 5/10
PAGE: 1 OF 1

SUBJECT: Purpose and Mission

Element 1.1 The provider must have a written statement of its CME mission, that includes the CME purpose, content areas, target audience, type of activities provided, and expected results of the program.

To incorporate the organization's philosophy regarding continuing medical education, the Mission Statement embodies the fundamentals and scope of what the CME program will provide. It serves to guide the program along its intended path, protect against the manipulation of the program into educational situations, or otherwise adverse situations, not endorsed by the policies.

The main purpose for any health care organization to establish a program of continuing medical education is the desire to enhance high quality medical care. The physician must be involved as a participant and learner in the active process of learning

In order to apply the guidelines of the Mission Statement, the CME committee considers the following criteria:

- What does this program expect to accomplish? (Purpose)
- What major content areas will be the focus of the program? (Content Areas)
- For whom will the educational activity be intended? (Target Audience)
- What type of activities will be provided? (Activities)
- What are the expected results of the program? (Results)

Expected results should be articulated in terms of change in competence, performance, or patient outcomes as a result of the activity.

The Mission Statement is reviewed and revised regularly by the CME committee.



MISSION STATEMENT Office of Continuing Medical Education

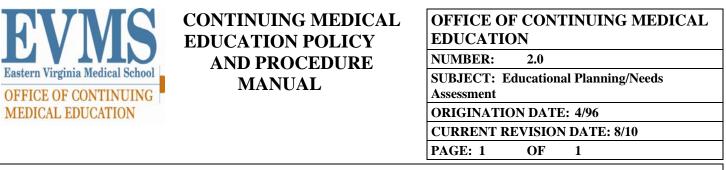
PURPOSE: The Eastern Virginia Medical School is an academic health center dedicated to the highest ethical standards to achieve excellence in medical and health profession education, research and patient care. With the mission and strategic plan of the medical school as its guiding philosophy, the Eastern Virginia Medical School Continuing Medical Education Program is dedicated to improving the health status of the community by enhancing the knowledge, competence, and when applicable, performance of our physicians.

CONTENT AREA: The EVMS-CME Program operates according to established policies and procedures to develop educational programming based upon emerging technology and outcomes research with the goal of improvement of health care quality. It aims to serve the community by providing timely, evidence-based education that integrates ethical and cultural issues.

TARGET AUDIENCE: The primary focus of the EVMS-CME Program is the education of physicians and allied health professionals in Southeast Virginia and adjoining regions. Although most activities target physicians, multidisciplinary attendance is encouraged. When consistent with our mission, the CME Office will work with outside organizations through joint sponsorships.

ACTIVITIES: The EVMS-CME Program organizes and provides a full range of continuing education activities. These include regional and national conferences and symposia, special skill workshops, courses, regularly scheduled series, teleconferences, enduring materials, and Internet based education. The scope of services includes assessment of educational needs, course development and management, evaluation of activities, promotion, and activity logistics.

RESULTS: EVMS-CME will provide high quality educational activities which meet the criteria for *AMA PRA Category 1 Credit*TM as designated by the AMA Physician's Recognition Award, and follow the Essentials Areas, Standards, and Policies of the Accreditation Council for Continuing Medical Education and the AMA Ethical Opinion on Gifts to Physicians. We will measure knowledge, competence and performance through evaluations, electronic medical records, patient health data, surveys, and other health indicators to determine the activity and overall program effectiveness and serve as a needs assessment for future activities. The Continuing Medical Education Program will promote continued improvement in community practice standards, leading to the adoption of new, evidence-based concepts in the individual's field of medical practice to promote excellence in health care throughout the region.



SUBJECT: Educational Planning/Needs Assessment

Element 2.1 The provider must use a planning process(es) that links identified educational needs with a desired result in its provision of all CME activities.

- 1. An initial planning meeting is required in the early stages of planning any CME activity with the Office of CME.
- 2. An application form is completed along with all other supporting documentation in accordance with the Office of CME procedures for planning activities.
- 3. Educational activities are developed around content designed to change competence, performance, or patient outcomes (as described in our mission statement) and should match the learners' current or potential scope of professional activities.
- 4. The CME Committee will approve educational activities after reviewing the needs assessment, content, objectives, supporting documentation, and determination of outcomes measurements.

Element 2.2 The provider must use needs assessment data to plan CME activities.

- 1. Identified educational needs from professional practice gaps are used to initiate and support the planning process and is the first step in planning a CME activity.
- 2. Professional gaps and the educational need can be determined by various methods, including surveys, health data, electronic medical records and other methods which can be facilitated by the Office of CME.
- 3. The CME Office will conduct A learning needs survey on a regular basis to identify educational needs perceived by the area physicians as well as to evaluate performance of the continuing medical education component of the medical school. This data is then summarized and serves as a needs assessment for departments and the Office of CME in planning future activities.



SUBJECT: Educational Planning/Objectives

Element 2.3 The provider must communicate the purpose or objectives of the activity so the learner is informed before participating in the activity.

- 1. Based upon the identified needs, the objectives are developed for each CME activity.
- 2. The target audience is identified and stated in all learning materials.
- 3. Background requirements of the prospective participants are listed when indicated.
- 4. Learning outcomes in terms of knowledge, competence, performance or patient outcomes are indicated and communicated to the learner.
- **5.** The purpose or objectives of the activity describe learning outcomes in terms of physician performance or patient health and are consistently communicated to the learner.



OFFICE OF CONTINUING MEDICAL		
EDUCATION		
NUMBER: 4.0		
SUBJECT: Planning/Design		
ORIGINATION DATE: 4/96		
CURRENT REVISION DATE: 11/10		
PAGE: 1 OF 1		

SUBJECT: Planning/Design

CONTENT DESIGN:

- 1. The selection and organization of content, and decisions about educational formats are based upon the most effective and efficient methods of meeting the stated objectives of the CME activity.
- 2. The types of learning methods appropriate for the group and subject are indicated in the planning process.
- 3. Course faculty is selected by the physician planning group based upon the expertise in the field, and the resources available to fulfill objectives defined for that activity. The CME committee or its designated planning group reviews curriculum vitae.
- 4. Learning aids such as the syllabus, are reviewed by EVMS Office of Continuing Medical Education prior to the activity.
- 5. Time is allowed for audience and faculty interaction at the end of the activity.
- 6. Promotional brochures or flyers are mailed to the target audience, and posted as appropriate.
- 7. Enduring materials for self-directed learning are developed through the EVMS-Office of CME.

BUDGET:

- 1. All expenditures and revenue are documented in a course budget.
- 2. Guest faculty receives reasonable honoraria in addition to hotel, meals and transportation reimbursement. EVMS faculty does not receive honoraria, but are recognized through a letter of appreciation. When appropriate, EVMS faculty is reimbursed for necessary hotel, meal and transportation expenses.
- 3. Activity expenses at off-site locations will include meals or light refreshments for the participants.



SUBJECT: Educational Planning/Evaluation

Element 2.4 The provider must evaluate the effectiveness of its CME activities in meeting identified educational needs.

Element 2.5 The provider must evaluate the effectiveness of its overall CME program and make improvements to the program.

- 1. All educational activities are evaluated for effectiveness in meeting identified educational needs, as measured by knowledge, competence, performance or patient outcomes.
- 2. When applicable, educational activities are evaluated for effectiveness in meeting identified educational needs, as measured by practice application and/or health status improvement.
- 3. The overall CME program is evaluated regularly by the CME committee with review of its mission and activities of the previous fiscal year.
- 4. Annual review of the CME program is included in the annual needs survey by feedback from the community physicians.
- 5. Improvements are made in the CME program by incorporating suggestions of the CME committee into the operating policies of the Office of CME.
- 6. Outcomes in physician behavior which influence the health of the population are measured when applicable by repeated surveys or statistical review of morbidity data.



SUBJECT: Regularly Scheduled Series

- 1. Regularly scheduled series such as grand rounds and cancer conferences are approved on the basis of <u>common needs</u> <u>and goals for each session</u> for a one year period.
- 2. Initial Application for *AMA PRA Category 1 Credit*[™] Designation is to be presented to the committee at <u>least 90 days</u> <u>before</u> the first session is scheduled. For regularly scheduled series currently taking place with *AMA PRA Category 1 Credit*[™], <u>a 60-day time frame</u> for CME Committee review is encouraged.
- 3. An Application for Designation of *AMA PRA Category 1 Credit*TM with attached listing of topics, objectives and speakers for <u>at least the first three months</u> (for weekly series) of the schedule is presented to the CME Committee for review and credit designation, along with the needs assessment and other supporting documentation needed.
- 4. Additional schedules and documentation for each weekly series are due <u>by the 15th of the month</u> for the following month. This is required for accurate documentation and promotion of the sessions.
- 5. Within 30 days of the session date, follow up documentation of evaluation summary, attendance record, and <u>evidence</u> <u>of disclosure</u> having taken place are required in the Office of CME.
- 6. Regularly scheduled series must be at least 60 minutes in length for 1 AMA PRA Category 1 CreditTM.
- 7. Case discussion presentations require compliance with the "Case Presentation Standards" policy and use of the corresponding documentation forms.

The CME Committee will grant annual credit upon receipt of a completed 3 month schedule. Additional schedules are to be submitted by the 15th of each month for the following month.

MONITORING AND IMPROVEMENT

- 1. Each Series is monitored concurrently and audited regularly for compliance with the ACCME Essentials and Elements and Policies, including the Standards for Commercial Support.
- 2. Performance data is collected from required documents, auditing, and the review of files, and evaluated for compliance with the ACCME accreditation elements and policies.
- 3. Out of compliance issues are addressed immediately for correction and once all data is analyzed at the end of the certification period the information is shared with the Course Director at the planning meeting for the coming year.
- 4. A plan for improvement is developed and implemented by the Course Director and the CME Coordinator.
- 5. ACCME Letters of Agreement for each session must be in the Office of CME <u>prior to the session</u> whenever funds are contributed in support of CME.
- 6. All identified conflicts of interest must be resolved PRIOR to the session taking place.



SUBJECT: CME Committee Membership and Responsibilities

The EVMS CME Committee members will provide guidance in developing and implementing an education program that will lead to increased knowledge and competence, change in physician behavior and better patient outcomes. The committee will consist of a chairman, full time and community physicians and faculty, the Associate Dean for CME, the Director of CME, and CME Coordinator.

CME Committee's Charge:

"The charge of the Eastern Virginia Medical School's Committee for Continuing Medical Education (CME) is to advocate for and support professional development of physicians and other healthcare professionals by assessing needs, planning, and reviewing educational programs, and designating credit.

Through the Office of CME, EVMS offers a range of evidence-based educational activities that enhance a practitioner's level of knowledge, competence, performance/skills, and patient outcomes. Outcome measures will assess how these activities influence professional behavior for the purpose of improving healthcare outcomes and patient care."

Responsibilities

- Promote the education of physicians and other healthcare professionals.
- Provide input and guidance on the strategic direction for the EVMS CME program.
- Identify educational/practice gaps and make programming recommendations based on ongoing needs assessment of physicians and other healthcare professionals to improve the health status of the community
- Assist the CME Office in developing, planning and evaluating programming consistent with the ACCME Essentials and policies, the ACCME Standards for Commercial Support and all other regulatory guidelines.
- Evaluate outcome measurements to determine the impact of CME programming.
- Develop and monitor policies and procedures for the overall CME program.
- Review the EVMS CME Mission Statement annually and assist the CME Office in meeting the stated mission as well as support the overall EVMS mission.
- Assist CME Office in identifying collaborators, barriers, appropriate methodologies, and other criterion issues that may enhance or affect activities.
- The Chair will appoint a subcommittee to approve EVMS CME educational activities for *AMA PRA Category 1 CreditTM*. This subcommittee will report activity approvals to the CME Committee on a regular basis.



EDUCATION POLICY AND PROCEDURE MANUAL CONTINUING MEDICAL EDUCATION

NUMBER:	8.0
SUBJECT: Criteria for AMA PRA Category Credit [™] Designation/Content Validation	
ORIGINATION DATE: 4/96	
CURRENT R	EVISION DATE: 5/10
PAGE: 1	OF 1

OFFICE OF CONTINUING MEDICAL EDUCATION

SUBJECT: Criteria for AMA PRA Category 1 CreditTM Designation

CME consists of educational activities that serve to maintain, develop, or increase the knowledge, skills, and professional performance and relationships a physician uses to provide services for patients, the public, or the professional. The content of CME is that body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public.

All CME educational activities developed and presented by a provider accredited by the ACCME system and associated with *AMA PRA Category 1 CreditTM* must be developed and presented in compliance with all ACCME accreditation requirements--in addition to all the requirements of the AMA PRA program. All activities so designated for, or awarded, credit will be subject to review by the ACCME accreditation process as verification of fulfillment of the ACCME accreditation requirements.

Providers are not eligible for ACCME 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. An organization whose program of CME is devoted to advocacy of unscientific modalities of diagnosis or therapy is not eligible to apply for ACCME accreditation.

Formally planned *AMA PRA Category 1 Credit*[™] educational activities must be developed by the organizations that satisfy all accreditation standards, and cover specific and scientifically valid topics. More specifically, the activity must:

- address a physician audience in both the depth and scope of its content;
- be sponsored by a US based, ACCME accredited provider or by a state medical society accredited provider or, in Canada, where special rules apply, by a medical school accredited by the Council on Accreditation of Canadian Medical Schools (CACMS);
- conform to the AMA definition of CME;
- conform to AMA ethical opinions on Gifts to Physicians from Industry and on Ethical Issues in CME as well as the ACCME Standards for Commercial Support of CME;
- address demonstrated educational needs;
- include clearly stated educational purpose and/or objectives;
- have content which will help physician learners meet the stated objectives;
- use learning methodologies appropriate to the activity's content and format;
- define evaluation mechanisms with which to assess program quality and relevance to the stated objectives of the activity; and
- include a means for the provider to record the actual credits claimed by each physician participant
- be designated for AMA PRA Category 1 CreditTM in advance of the activity

CONTENT VALIDATION:

1. All 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 ACCME 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.

References: AMA's Physician's Recognition Award and Credit System, 2006 revision ACCME Policy Compendium, 2002-B-09, 8/07 addendum



SUBJECT: Attendance and Record Keeping

A. Credit for attendance will be granted when the following conditions apply:

- 1. Sign-in on the appropriate attendance form.
- 2. Single multi-day conferences require sign in once at the beginning of the conference.
- 3. For multi-hour conferences, each physician indicates the number of credits claimed and signs the attestation form and returns it to the CME office.
- 4. Physicians should only claim credit commensurate with the extent of their participation in the activity.

B. Record keeping for participation in CME activities:

- 1. Online transcripts are available through the EVMS CME website.
- 2. Records of attendance are maintained in a database for 6 years.
- 3. A Certificate of Attendance or Credit is awarded to participants of single multi-hour CME courses.
- 4. The certificate indicates the maximum number of credits designated for *AMA PRA Category 1 Credit*[™], the title of the program, start date, end date, and the name of the participant with the number of credits claimed.
- 5. The signature of the Director of CME appears on the certificate.



SUBJECT: Required Documentation for CME Activity File

FOR APPROVAL OF THE CME ACTIVITY

The following items are part of the application packet:

- □ Completed application for *AMA PRA Category 1 Credit*[™] designation including proposed budget
- □ Documentation of need
- □ Final program agenda including topics, objectives, and speakers with time frames
- □ Curriculum vitae of all course presenters and planning committee members
- □ Full disclosure declaration for presenters & planning committee members & resolution of conflict of interest

BEFORE THE ACTIVITY

- 1. Brochure, flyer, or other promotional material
- 2. Evaluation methodology/outcomes to be measured
- 3. Letter of Agreement for Commercial Support (if applicable)

AFTER THE CME ACTIVITY - Due within 30 days

- 1. Sign in form/attendance record
- 2. Evaluation summary including one actual participant evaluation with disclosure
- 3. Handout materials
- 4. Complete budget/accounting
- 5. Actual promotional flyer/brochure
- 6. Participant CME fees and other fees per budget

*Required prior to CME Committee consideration



OFFICE OF CONTINUING MEDICAL
EDUCATION
NUMBER: 11.0
SUBJECT: Commercial Support/Disclosure
ORIGINATION DATE: 3/92
CURRENT REVISION DATE: 8/10
PAGE: 1 OF 3

SUBJECT: Commercial Support and Disclosure of Relationships

Element 3.3 The Provider must present CME activities in compliance with ACCME's policies for disclosure and commercial support.

Eastern Virginia Medical School adheres to the ACCME Standards for Commercial Support: Standards to Ensure the Independence of CME Activities. In operational issues, the CME Program at EVMS is guided by what is in the best interest of the public, and decisions are made with the principles of independence from commercial interests, transparency and keeping CME separate from product promotion.

STANDARD 1: Independence

1.1 EVMS-CME ensures that CME activity content is free of control of a "commercial interest" including the identification of CME needs; determination of educational objectives; selection and presentation of content; selection of all persons and organizations that will be in the position to control the content of the CME; selection of educational methods; selection of educational methods, and evaluation of the activity.
1.2 EVMS does not jointly sponsor CME activities with a commercial interest.

STANDARD 2: Resolution of Personal Conflicts of Interest

2.1 Relevant financial relationships with commercial interests of everyone who is in the position to control the activity content must be disclosed. Relationships in any amount and occurring within the past 12 months that create a conflict of interest are to be disclosed.

2.2 Individuals who refuse to disclose relevant financial relationships will be disqualified from being a planning committee member, a teacher, or an author of CME and cannot have responsibility for the development, management, presentation or evaluation of the CME activity.

2.3 EVMS will identify and resolve all conflicts of interest prior to the CME activity taking place, using the policy, "Identifying and Resolving Conflicts of Interest in CME".

STANDARD 3: Appropriate Use of Commercial Support

3.1 EVMS makes all decisions regarding the disposition and disbursement of commercial support.

3.2 EVMS is not required to accept advice or services from the commercial interest regarding teachers or content as conditions of contributing funds or services. Content development must remain beyond the control of the commercial supporter. Content validation by the provider should be established.

3.3 EVMS must be aware of all commercial support associated with the CME activity and must approve all such support. EVMS and its agents (joint sponsors) must decide what commercial support will be accepted and how it will be utilized, not the commercial interest.

Written Agreement documenting terms of support

3.4 EVMS and the commercial supporter will have a written agreement indicating the terms, conditions, and purposes of the commercial support for all <u>directly and jointly sponsored</u> activities.

3.5 The Letter of Agreement specifies the commercial interest as the source of the commercial support.

3.6 The Letter of Agreement must be signed by the commercial supporter and the provider (EVMS CME representative).



SUBJECT: Commercial Support and Disclosure of Relationships

Expenditures for an individual providing CME

3.7 EVMS adheres to its policy "Honorarium and Expense Reimbursement" which governs honoraria and reimbursement of out-of-pocket expenses for planners, teachers, and authors of CME activities. Honorarium amount is set by the course director.

3.8 EVMS CME will manage payment of honoraria and expense reimbursement in compliance with policy governing such.

3.9 No additional payment may be given to the director of the activity, planning committee members, teachers or authors, joint sponsor, or any others involved with the supported activity.

3.10 When teachers or authors also participate as a learner their expenses can be paid for their teacher or author role only.

Expenditures for learners

3.11 Social events or meals at CME activities will not take precedence over the educational events and will be planned by CME staff or designee.

3.12 Commercial support funds are used to underwrite the expenses for developing and presenting the activity, including expenses of teachers and staff working on the activity.

Accountability

3.13 EVMS maintains all income and expense documentation related to its directly and jointly sponsored activities. This will detail the <u>receipt</u> and <u>expenditure</u> of the commercial support.

STANDARD 4: Appropriate Management of Associated Commercial Promotion

4.1 Commercial exhibits or advertisements cannot interfere with the presentation nor be a condition of the provision of commercial support.

4.2 Product promotion material or product specific advertisement of any type is prohibited during CME activities. Staffed exhibits and/or presentations or enduring printed or electronic ads must be kept separate from CME. Adherence to the ACCME Standards for Commercial Support is required.

4.3 Educational materials such as slides, abstracts, or handouts cannot contain any advertising, trade name or product message.

4.4 The program book or other print or electronic information which contains non-CME elements that are not directly related to the transfer of education <u>may include</u> product promotion material or product specific advertisement.

4.5 Commercial interests <u>cannot provide a CME activity</u> to learners either by distribution of self-study activities or arranging for electronic access to CME activities. The commercial supporter <u>may distribute</u> promotional materials developed by the provider.



CONTINUING **MEDICAL AND PROCEDURE** MANUAL

OFFICE OF CONTINUING MEDICAL
EDUCATION
NUMBER: 11.0
SUBJECT: Commercial Support/Disclosure
ORIGINATION DATE: 3/92
CURRENT REVISION DATE: 08/10
PAGE: 3 OF 3

SUBJECT: Commercial Support and Disclosure of Relationships

STANDARD 5: Content and Format without Commercial Bias

5.1 The content or format of a CME activity or its related materials must promote improvements or quality in healthcare and not a specific proprietary business interest of a commercial interest. 5.2 Presentations must give a balanced view of therapeutic options and use generic names when possible; or use multiple trade names, not the trade name from a single company. CME must be free of commercial bias and not promote products or services, but promote improvements in healthcare.

STANDARD 6: Disclosures Relevant to Potential Commercial Bias

Relevant financial relationships of those with control over CME content

6.1 Individuals must disclose to the learners all relevant financial relationships, including the name of the individual, the name of the commercial interest, and the nature of the relationship. Disclosure is preferred to be written and available to all learners. Verbal disclosure may be used to supplement written disclosure when the event is televised.

6.2 Disclosure must also be made when the individual has indicated no relevant financial relationships.

Commercial support for the CME activity

6.3 The source of commercial support must be disclosed to learners, and the "in-kind" support must include specific information about the actual support, e.g. equipment loan.

6.4 Trade names or product group message must never be included in such disclosure.

Timing of disclosure

6.5 Disclosure of relationships and support by a commercial interest must be provided to the learners prior to the beginning of the educational activity.



AL Y OFFICE OF CONTINUING MEDICAL EDUCATION NUMBER: 12.0 SUBJECT: Joint Sponsorship ORIGINATION DATE: 6/87 CURRENT REVISON DATE: 6/00 PAGE: 1 OF 1

SUBJECT: Joint Sponsorship

Joint Sponsorship: Activity Planning and Presentation with Non-Accredited Providers Intent: The accredited provider shall accept responsibility that the ACCME's Accreditation Policies and Procedures are met when educational activities are planned and presented in joint sponsorship with nonaccredited providers.

- 1. The non-accredited organization should have as its primary interest the dissemination of health care information or the findings of medical research.
- 2. The non-accredited organization agrees to follow all procedures outlined by EVMS and contained in the EVMS-CME Policy Manual.
- 3. The Course Director should be a physician with an affiliation in the non-accredited organization.
- 4. The program planning request should be received at least 6 months before the scheduled date of the activity. Timing for the activity should not conflict with other CME activities sponsored by EVMS.
- 5. A course coordinator should be designated by the non-accredited organization to manage the administrative details.
- 6. All aspects of commercial support should be disclosed prior to approval of the activity. The Office of CME will administer commercial support.
- 7. Jointly sponsored activities shall be consistent with the EVMS CME Mission Statement.
- 8. EVMS, through its CME Committee, shall participate in the planning and implementation of these activities. A representative from the non-accredited entity should attend the EVMS-CME Committee meeting to discuss progress.
- 9. EVMS planning forms are to be completed and submitted as part of the course file.
- 10. All promotional material shall follow the **Publicity Material Guidelines** and be submitted for approval to EVMS-Office of CME before being distributed. Appropriate accreditation statements will be used and all materials must indicate joint sponsorship with EVMS-CME as the accredited sponsor.
- 11. All activity expenses are the responsibility of the organization seeking joint sponsorship. Evidence of a proposed neutral budget, with a signed **Financial Risk Agreement** is to be completed before expenses are incurred.
- 12. Attendance information should be submitted to the Office of CME within 2 weeks of the activity in order to provide timely distribution of CME certificates.
- **13.** The proposed CME activity CANNOT be advertised prior to CME Committee approval and the designation of *AMA PRA Category 1 Credit*TM.



REQUEST FOR JOINT SPONSORSHIP

Name of organization requesting Joint Sponsorship:						
Tit	Title of Activity (tentative):					
	· · · · <u> </u>					
1.	Explain briefly the purpose of the	proposed educational activity:				
2.	Course Director (physician):					
	Affiliation with organization:					
3.	Estimated Expenses:					
4.	Commercial Support anticipated:					
CN		licies and procedures of the Eastern Virginia Medical School ancial risk for the activity. We understand that failure to do and CME credit for the activity.				
Со	urse Director:	Date:				
Ph	Signature one:Fa	:E-mail:				
Co	ourse Coordinator: Signature	Date:				
Po	sition:					
Ph	one:Fa	:E-mail:				
	eceived in CME Office:	Date:				
CN	IE Coordinator assigned:					
Dir	rector of CME: Signature	Date:				



OFFICE OF CONTINUING MEDICAL EDUCATION
NUMBER: 13.0
SUBJECT: Enduring Materials
ORIGINATION DATE: 4/96
CURRENT REVISION DATE: 11/10
PAGE: 1 OF 3

SUBJECT: Enduring Materials for AMA PRA Category 1 CreditTM

Enduring Materials: Printed, recorded, or computer-assisted instructional materials which may be used over time at various locations and which constitute a planned activity of continuing medical education. Examples of such materials for independent learning by physicians include programmed texts, audiotapes, videotapes, and computer assisted instructional materials, which are used alone, or in combination with written materials. The Essential Areas, Elements and Policies of the Accreditation Council for Continuing Medical Education will be adhered to, as well as the policies and procedures established by the Eastern Virginia Medical School - Office of Continuing Medical Education.

Procedure:

- 1. Review the Mission Statement of EVMS-CME to insure appropriate alignment of the proposed content.
- 2. Complete the Application for AMA PRA Category 1 CreditTM and attach applicable documentation.
- 3. Provide documentation of the learning need.
- 4. List faculty and credentials. Provide curriculum vitae and speaker disclosure statement for each.
- 5. Communicate to the learner the types of media used.
- 6. Describe the method of physician participation in the learning process; for example, "read the monograph", "complete the post test".
- 7. Describe evaluation methods to be used in content review of the draft materials to determine hours of CME credit, as well as comprehension of the learning content. This will typically consist of a review and evaluation by at least three individuals from the anticipated audience.
- 8. Describe the methods for promotion and distribution.
- 9. Enduring materials are to be reviewed for current application at least once every three (3) years.



SUBJECT: Enduring Materials for *AMA PRA Category 1 Credit*TM Learning Materials:

- 1. Printed, recorded, or computer-assisted instructional materials will include all of the following elements:
 - a. Title, target audience, accreditation and credit statement.
 - b. Indicate the date of release and the expiration date, after which no credit will be issued.
 - c. Course Director and faculty with credentials listed. Speaker disclosure information will be stated.
 - d. Acknowledgment of commercial support, if applicable
 - e. Listing and acknowledgment of content specialist reviewers.
 - f. Table of contents.
 - g. Educational objectives.
 - h. Theoretical content in format.
 - i. Bibliography.
 - j. Participant evaluation and registration form to be completed and returned to Office of CME.
 - k. Participant post test with the passing grade indicated, and procedure for submitting it.
- 1. After approval for AMA PRA Category 1 CreditTM the following statements (for directly sponsored activities) are to be used on all promotional materials.

Accreditation:

Eastern Virginia Medical School is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

Credit Designation:

Eastern Virginia Medical School designates this continuing medical education activity for a maximum of ______ AMA PRA Category 1 CreditsTM. Physicians should only claim credit commensurate with the extent of their participation in the activity.

2. Include the following statement on the enduring material: *This CME activity was planned and produced in accordance with the Accreditation Council for Continuing Medical Education Essential Areas, Elements and Policies*



SUBJECT: Enduring Materials for AMA PRA Category 1 CreditTM

Follow-up Procedure:

- 1. Participation will be recorded and a certificate issued when the registration form, post test, and evaluation forms are returned to the EVMS-CME Office.
- 2. A passing grade is to be achieved before a certificate is issued.

Commercial Acknowledgment in Enduring Materials:

- 1. Product specific advertising of any type is prohibited <u>within</u> the enduring material.
- 2. Commercial support must be acknowledged in order to comply with the Standards for Commercial Support.
- 3. This acknowledgment must be **placed** <u>only</u> at the beginning of the enduring material.
- 4. The institutional acknowledgment may state the name, mission, and areas of clinical involvement of the company or institution, and may include corporate logos and slogans, <u>if</u> they are not product promotional
 - in nature.

5. No specific products may be referenced, even if they are not related to the topic of the enduring material.

This policy shall apply to all enduring materials with release dates or review dates of July 1, 1996 and beyond.

Reference: ACCME Policy on Commercial Acknowledgment in Enduring Materials



SUBJECT: STAFF DEVELOPMENT

Eastern Virginia Medical School is supportive of staff education for all employees. With this framework the Office of CME encourages continued development of the staff.

- 1. The CME leadership maintains membership in the Alliance for Continuing Medical Education (ACME) and shares knowledge with regional peers as well as the CME Committee.
- 2. Workshops sponsored by the Accreditation Council for Continuing Medical Education (ACCME) shall be attended periodically by the Office of CME staff.
- 3. The Director of CME will hold membership in the Society for Academic Continuing Medical Education.
- 4. Additional state and/or national workshops or conferences which serve to meet a specific learning need for the CME staff will be recommended for attendance.
- 5. Staff will develop their own personal professional development plan. The Office of CME administration will assist staff in managing and completing this development plan.
- 6. Staff will meet on a regular basis to review CME activities and determine ways of improving CME Activity programming, as well as the functions of the Office of CME, including communication, systems based practices, etc.



SUBJECT: Case Presentation Standards

Case Presentations are an integral component in clinical practice and continuing medical education, and directly provide theoretical and scientific bases of medicine. In order to meet the criteria for AMA PRA Category 1 CreditTM the design must evidence the following criteria:

EDUCATIONAL PREPLANNING

- 1. Plan each session one to two weeks prior to the scheduled presentation.
- 2. Incorporate a theoretical/scientific framework for case discussions into each session.
- 3. One case, at a minimum, should reflect a comprehensive review with its scientific basis.
- 4. The "teaching" case may highlight a particular dilemma in diagnosis or treatment, or define a classic presentation for a specific clinical problem.

HANDOUT MATERIALS

- 1. A brief written summary of the case should be distributed to participants along with a statement of the learning objective.
- 2. A list of pertinent references for the highlighted case should also be presented to the participants.

PROMOTIONAL MATERIALS

- 1. Learning objectives may be global for the series of conferences, but one objective per presentation is to be developed and included in the promotional material.
- 2. A brochure or flyer with appropriate information per CME policy is to be adequately distributed for promotion.

All policies and procedures of EVMS-Office of CME are to be followed in the planning, implementation, evaluation, and follow up of the conferences.

*Application for Designation for *AMA PRA Category 1 Credit*TM with appropriate documentation is to be completed annually and presented to the CME Committee for approval.

Reference: "Case Presentation Seminars" 1997 Alliance for Continuing Medical Education Annual Meeting. January 28-February 2, 1997, New Orleans, LA



MALE Medical School	CONTINUING MEDICAL EDUCATION POLICY	OFFICE OF CONTINUING MEDICAL EDUCATION
NTINUING AND DDOCEDUDE N	NUMBER: 16.0	
ICATION	MANUAL	SUBJECT: New Procedures and Skills Training
		ORIGINATION DATE: 4/98
		CURRENT REVISON DATE: 6/00
		PAGE: 1 OF 1

SUBJECT: New Procedures and Skills Training in CME

This policy refers to all CME activities which are conducted as educational programs in new procedures and which are designated for *AMA PRA Category 1 Credit*TM.

As the accredited sponsor EVMS-CME is responsible for the following:

1. **FACULTY:** Identify and select expert faculty who will determine the specific educational and training requirements established in each specialty and incorporate these into the program. The selected faculty will have the demonstrated ability and expertise in the area being taught.

2. **RESOURCES:** Provide adequate resources, including necessary facilities to conduct and assess the achievement of the educational objectives by the participants.

3. DOCUMENTATION: Indicate to the potential participant physician and to the evaluating body the level of education and training achieved in the CME activity. Promotional material will indicate the level of achievement expected and certificates will indicate the level of achievement attained.

4. **CME CERTIFICATE:** Issue a certificate which indicates the level of achievement met by the participant as well as the number of hours of *AMA PRA Category 1 Credit*TM. After completion, the physician can then present the credential to the appropriate authority as documentation of his or her education and training.

5. **LEVELS:** A system of descriptive levels for education and training courses in procedural skills which are used by accredited sponsors and identified to the potential participant **in advance**.

Level 1: Verification of attendance: the physician attended and completed the course.

Level 2: Verification of satisfactory completion of course objectives: the physician satisfactorily met all specified learning objectives.

Level 3: Verification of "proctor readiness": the physician is "proctor ready", which includes Levels 1 and 2, and the physician is able to perform the procedure under proctor supervision.

Level 4: Verification of physician competence to perform the procedure: the physician is competent to perform the procedures without further supervision.

Reference: AMA PRA New Credit Designation Requirements for Sponsors of Continuing Medical Education for Physicians in New Procedures and Skills. January, 1998



SUBJECT: Internet CME Activities

- 1. All CME activities developed and/or delivered for Internet usage will be in compliance with ACCME Essential Areas, Elements, and Policies.
- 2. EVMS will NOT post any of its CME activities on the website of pharmaceutical or device manufacturers.
- 3. If EVMS chooses to allow links to the pharmaceutical and device manufacturers' product websites, then clear notification must be provided that the learner is leaving the educational website.
- 4. Product website links are permitted BEFORE or AFTER the educational content of a CME activity, but shall not be imbedded in the educational content of the activity.
- 5. Advertising of any type is prohibited within the educational content of CME activities on the Internet including, but not limited to, banner ads, subliminal ads, and Pop-up window ads.
- 6. Each Internet activity will indicate in the beginning, the hardware and software required for the learner to participate.
- 7. The Internet activity will have a mechanism in place that allows the learner to contact the provider if there are questions about the activity.
- 8. The EVMS policy on privacy and confidentiality will be communicated to the learner and will be adhered to throughout CME activities on the Internet.
- 9. EVMS will document copyright ownership, or permission granted for use of all copyrighted materials contained within the Internet CME activity.

Reference: ACCME Policy 2002-A-11 May 2002



SUBJECT: Verification of Verbal Disclosure

When information about faculty/provider relationships is disclosed to participants verbally, it is required that the file include verification that this disclosure to the learners actually occurred at the activity. The ACCME policy 2003-B-12 states the following:

- 1. A representative of the provider (e.g. Course Director) who was in attendance at the time of the verbal disclosure must attest <u>in writing</u> on the <u>Evaluation Summary:</u>
 - That verbal disclosure did occur; and
 - Itemize the content of the disclosed information; or that there was nothing to disclose; or that the faculty member/speaker had refused to disclose.
- 2. The documentation that verifies that adequate verbal disclosure did occur must be completed within <u>one month of the activity</u>.

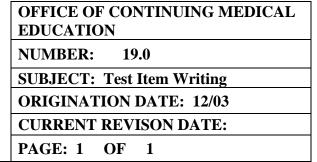
Information to include in verbal disclosure:

- Speaker's name
- Nature of the relationships (speakers' list, grant recipient, stockholder, etc)
- Entities with which he/she has a relationship
- Or, if he/she had nothing to disclose

This policy applies to verbal disclosure only. Written disclosure requires verification on the Evaluation Summary (and a copy of the Evaluation Form with the appropriate disclosure of relationships) with signature of Course Director.

Reference: ACCME Policy 2003-B-12 November, 2003





SUBJECT: Test Item Writing for AMA PRA Category 1 CreditTM

Standards for Designating Test Item Writing for AMA Category 1 CreditTM

The test item writing activity must meet the guidelines for AMA PRA Category 1 CreditTM as detailed in the AMA Physician's Recognition Award: Requirements for Accredited Providers booklet (version 3.2). Also:

- 1. Test item writing activities must be sponsored by an accredited provider (existing requirement).
- 2. The questions must be developed for examinations given by the National Board of Medical Examiners (NBME) or a member board of the American Board of Medical Specialties (ABMS). Or for peer reviewed published, self-assessment educational activities from a national medical specialty society.
- 3. The process for this activity must document guidance for the physician question writers on how to use evidence for writing quality questions.
- 4. The assignments must be at a depth and scope that require a review of the literature and a knowledge of the evidence base for the questions. Physician question writers should document their review of evidence based literature.
- 5. The physician question writers must personally participate in a group peer review of the questions. The questions writers should revise their questions, when necessary, based on feedback from the peer group.
- 6. Providers may designate each test item writing activity (as described above) for a maximum of 10 AMA *PRA Category 1 Credits*TM.

Reference: American Medical Association 2003, Division of CPPD



OFFICE OF CONTINUING MEDICAL EDUCATION		
NUMBER: 20.0		
SUBJECT: Standards for Manuscript Review		
ORIGINATION DATE: 12/03		
CURRENT REVISON DATE:		
PAGE: 1 OF 1		

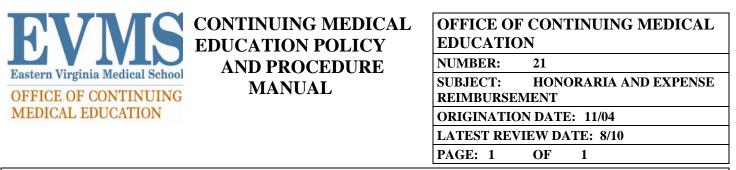
SUBJECT: Standards for Manuscript Review

Standards for Designating Manuscript Review for AMA PRA Category 1 CreditTM

The manuscript review activity must meet the guidelines for *AMA PRA Category 1 Credit*TM as detailed in the <u>AMA Physician's Recognition Award: Requirements for Accredited Providers</u> booklet (version 3.2). Additionally:

- 1. Manuscript review activities must be sponsored by an accredited provider working collaboratively with a medical journal indexed by the *Index Medicus*.
- 2. The texts to be reviewed must be original contributions to the medical literature that require multiple reviewers, e.g., not book reviews.
- 3. The journal editor, working with the accredited provider, will need to educate reviewers about the CME process-establish objectives and criteria for content review, and provide all needed instructions.
- 4. Manuscript review assignments must be at a depth and scope that require a review of the literature and a knowledge of the evidence base for the manuscripts reviewed. To the extent possible, this review of the evidence base should be documented.
- Providers may designate each accepted manuscript review, as documented by the journal editor, for a maximum of three AMA PRA Category 1 CreditsTM. Physicians may claim credit for a maximum of five reviews per year.
- 6. The accredited provider, working with the journal editor, should have an oversight mechanism to evaluate the quality of reviews submitted. This process should assure that physicians who submit substandard reviews do not continue to participate or receive credit for subsequent activities.
- 7. Organizations that are not accredited providers, but that publish journals indexed by the *Index Medicus*, may arrange joint sponsorship agreements with an accredited provider so that their manuscript reviewers can obtain *AMA PRA Category 1 Credit*TM.

Reference: American Medical Association 2003, Division of CPPD



SUBJECT: HONORARIA AND EXPENSE REIMBURSEMENT

1. Participation in continuing medical education sponsored by Eastern Virginia Medical School is considered to be a responsibility of both full time and community faculty.

2. Honoraria for full time and community EVMS faculty are not appropriate for continuing medical education presentations in departmental Regularly Scheduled Series (grand rounds and series), but may be paid for presentations at multi hour conferences which involve an extensive investment of time in preparation and planning.

3. Visiting faculty may be paid honoraria for Regularly Scheduled Series and for multi hour conferences.

4. EVMS and Visiting Faculty may be reimbursed for direct expenses associated with a presentation, such as media production, mileage reimbursement, or other travel expenses, based upon submission of original receipts. This must be agreed upon prior to the activity.

5. All payment of honoraria and reimbursement of travel and accommodations must be auditable. The Office of CME facilitates commercial support for CME activities. This will be in compliance with EVMS travel policies and the ACCME Standards for Commercial Support.

6. The Course Director/Planner for conferences may receive compensation which is budgeted in the planning phase and auditable in CME documentation.

7. Honorarium amount should be determined by the following:

a. The credentials of the speaker, expertise, and time and distance away from home should be considerations when deciding upon the honorarium amount.

b. Honorarium amount is determined by the Course Director and is not linked to commercial support, or to specific requests of the commercial interest. Usual and customary honoraria are as follows:

- Regularly Scheduled Conferences Visiting Faculty: Local up to \$500; traveling, up to \$1500. EVMS Faculty: None
- Multi hour conferences

Visiting Faculty: Up to \$1500 per presentation. EVMS Faculty: Up to \$500 per presentation.

c. Honorarium beyond \$2000 must be approved by the CME Committee.

Eastern Virginia Medical School OFFICE OF CONTINUING MEDICAL EDUCATION CONTINUING MEDICAL EDUCATION POLICY AND PROCEDURE MANUAL	OFFICE OF CONTINUING MEDICAL EDUCATION NUMBER: 22 SUBJECT: Identifying and Resolving Conflicts of Interest in CME ORIGINATION DATE: 2/05 CURRENT REVIEW DATE: 8/10 PAGE: 1 OF 1
--	--

SUBJECT: Identifying and Resolving Conflicts of Interest in CME

In order to meet the Standards for Commercial Support the provider must have a mechanism in place to identify all relevant financial relationships with any commercial interest, determine whether these relationships create a conflict of interest with the individual's control of content, and if so have a mechanism to resolve all conflicts of interest prior to the education activity.

1. EVMS CME requires that all individuals involved in planning, authoring, or presenting a CME activity complete the form "Disclosure of Relationships, Identifying and Resolving Conflict of Interest in CME".

2. All presenters are given information describing "content validation" and the expectation that their presentation will be compliant. This is clearly stated on the "Disclosure of Relationships" form.

3. When relevant relationships are disclosed <u>and</u> when the content may be influenced by such a relationship, a conflict of interest is determined to exist.

4. Conflicts of interest forms will be reviewed <u>prior</u> to the CME activity by the Office of CME and the appropriate course of action will be determined. This may include review by the course director, planning committee, CME Committee, and/or the specific department.

- 5. Conflicts of interest can be resolved by
 - A. <u>Altering the financial relationships</u>. Individuals may change their relationships with commercial interests (e.g. discontinue contracted services). This way, no duty, loyalty, or incentive remains to introduce bias into the CME content.
 - B. <u>Altering control over CME content</u>. An individual's control of CME content can be altered in several ways to remove the opportunity to affect content related to the products and services of a commercial interest. These include the following:
 - Choosing someone else to control that part of the content.
 - Change the focus of the CME activity.
 - Change the content of the person's assignment so that it is no longer about products or services of the commercial interest.
 - Limit the content to a report without recommendations by limiting it to data and results of research, and assigning someone else to address broader implications and recommendations.
 - Request a peer review to validate content. This is to ensure that all scientific research referred to, reported or used in CME in support or justification of patient care recommendations conforms to the generally accepted standards of experimental design, data collection and analysis.
 - C. Disqualifying the speaker, author or planner and select a replacement.

6. Disclosure of all relationships and the resolution of conflicts of interest will be provided to the CME participants.

2/05



CONTINUING MEDICAL EDUCATION POLICY AND PROCEDURE MANUAL OFFICE OF CONTINUING MEDICAL EDUCATION NUMBER: 23.0 SUBJECT: Internet Point of Care CME ORIGINATION DATE: 12/05 CURRENT REVISON DATE: 12/05 PAGE: 1 OF 1

SUBJECT: Internet Point of Care CME

Internet Point of Care describes structured, self directed, online learning by physicians on topics relevant to their clinical practice. Learning for this activity is driven by the reflective process in which physicians must document their clinical question, the sources they consulted and how the topic applies to their practice. To award AMA PRA Category 1 credit for this activity Eastern Virginia Medical School will:

- 1. Comply with all standards for AMA PRA Category 1 activities.
- 2. Oversee content integrity, with responsibilities that include but are not limited to the appropriate use and selection of professional, peer reviewed literature and keeping search algorithms unbiased.
- **3.** Provide clear instructions to the physician learner on how to access the portal/database, how their online activities will be tracked and how the provider will award credit for their participation.
- 4. Verify physician participation by tracking the topics and sources searched.
- 5. Require that participants complete the online evaluation/feedback form on overall system effectiveness and evaluate whether the activity met the participants learning objectives, or resulted in a change in knowledge, competence or performance as measured by physician practice application or patient health status improvement.
- 6. In order to qualify for AMA PRA Category 1 CreditTM for the learning cycle the participant must:
 - Review the original clinical question(s).
 - Identify the <u>relevant</u> sources from among those consulted.
 - Describe the application of their findings to practice.

Credit is awarded as follows:

- **1.** Structured online searches on clinical topics earn .5 *AMA PRA Category 1 Credits*TM for documented completion (either at the point of care or later) of the 3 step learning cycle defined above.
- 2. For the AMA Physician's Recognition Award, physicians my claim up to twenty (20) AMA PRA Category 1 CreditsTM per year for this activity.



SUBJECT: Journal Club Standards

Journal Club can be an integral component in clinical practice and continuing medical education, and directly provide theoretical and scientific bases of medicine. Journal Club CME must comply with the ACCME's Essential Areas and Elements (including the Standards for Commercial Support). In order to meet the criteria for *AMA PRA Category 1 Credit*TM the design must evidence the following criteria:

EDUCATIONAL PREPLANNING

- 1. Plan each session at least two weeks prior to the scheduled journal club.
- 2. The educational content of journal CME must be within the ACCME's Definition of CME.
- 2. Incorporate a theoretical/scientific framework for reflection/discussion or debate into each session.
- 3. One journal article, at a minimum, should reflect a comprehensive review with its scientific basis.

HANDOUT MATERIALS

- 1. Journal club articles should be selected and distributed in an appropriate timeframe.
- 2. Before the journal club takes place, disclosure information, disclosure of commercial support and objectives must be communicated to the target audience.

EVALUATION OF ACTIVITY

- 1. A pre-determined set of questions or tasks (content specific post-test) relating to the content of the material must be completed by the learner.
- 2. This activity must be evaluated.

DOCUMENTATION

1. A journal based CME activity must document participation in the activity.

PROMOTIONAL MATERIALS

- 1. A brochure or flyer with appropriate information per CME policy is to be adequately distributed for promotion which includes learning objectives.
- 2. None of the elements of journal-based CME can contain any advertising or product group messages of "commercial interests". Disclosure information cannot contain trade names. The learner should not encounter advertising within the pages of the article or within the pages of the related questions or evaluation materials.

All policies and procedures of EVMS-Office of CME are to be followed in the planning, implementation, and evaluation of Journal Club CME.

*Application for Designation for AMA PRA Category 1 CreditTM with appropriate documentation is to be completed annually and presented to the CME Committee for approval. Reference: <u>http://www.accme.org</u> (Journal CME)