

IMQ/CMA Guide to the Accreditation Process For Accreditation as a Provider of Continuing Medical Education

Important Information ■ Please Read Thoroughly

The Accreditation Process

The accreditation process provides an opportunity for you, as an accredited provider of continuing medical education (CME) or as an initial applicant to become an accredited CME provider, to reflect on your educational program and to show the IMQ/CMA your organization's work. This process assesses your organization's commitment to and role in providing continuing medical education and determining its future direction. Throughout the accreditation process, you are expected to *describe* your organization's practices and provide *verification* of these practices.

The accreditation process consists of three components: written application for accreditation, review of performance in practice (activity files) and the accreditation survey. These comprise the three sources of data the CME Accreditation Program uses to assess the extent to which providers meet the IMQ/CMA CME accreditation requirements.

Initial applicants applying for *provisional accreditation* are required to verify how their organization meets the IMQ/CMA Accreditation Criteria 1- 3, Criteria 7 - 12 and the IMQ/CMA policies.

Accredited providers applying for *continued accreditation* are required to verify how the organization meets the IMQ/CMA Updated Criteria 1 through 15 and the IMQ/CMA policies (Level 2 accreditation status). In addition, the IMQ/CMA encourages accredited providers to take advantage of the opportunities in these data sources to verify how the organization meets Criteria 16 through 22; this information will help the IMQ/CMA evaluate if the organization should receive *accreditation with commendation* (Level 3 accreditation status).

The Application

An outline of the content of your application is specified by IMQ/CMA, but the process of completing your application is unique to your organization. Depending on the size and scope of your CME program, you may involve many or just a few individuals in the process. Regardless of the size or nature of your CME program, however, the application is intended to address:

- The extent to which your organization has met its CME mission (C1, C12).
- An analysis of factors that supported or detracted from the CME mission being met (C11, C12).
- The extent to which, in the context of meeting your CME mission, your organization produces CME that:
 - Incorporates the educational needs that underlie the professional practice gaps of your own learners (C2)
 - Is designed to change competence, performance, or patient outcomes (C3)
 - Includes content matched to your learners' current or potential scopes of practice (C4)
 - Includes formats appropriate for the setting, objectives, and desired results (C5)
 - Is in the context of desirable physician attributes (C6)

- Is independent, maintains education separate from promotion, ensures appropriate management of commercial support, and does not promote the proprietary interests of a commercial interest (C7-10)
- How implemented improvements helped your organization better meet its mission (C13 – C15)
- The extent to which your organization is engaged with its environment (C16-C22)

As you review the application materials, please keep in mind the following definitions which will help you understand what the IMQ/CMA expects of all applicants in the accreditation process:

- **Provide a description** means provide a narrative that gives the reader a picture or understanding of your organization’s practices. While this narrative does not have to be extremely long, it should give IMQ/CMA an idea of your program. One or two sentence answers are traditionally not sufficient.
- **Documentation** means tangible materials (evidence) from which compliance can be determined. This documentation is required, and can be taken from any of your CME activities, not just your selected activity files. You are encouraged to use the best examples of your organization’s compliance with a particular criterion or policy.
- **Attach** means that the IMQ/CMA expects actual documents, documentation, and/or materials that provide verification of the described practices. Unless otherwise noted, when an example is requested in the application, it must verify that a practice was implemented. This means using documentation/documents/materials from activities that have been planned and/or implemented. **Additionally, unless otherwise noted, the IMQ/CMA expects to see actual materials or completed (not blank) forms.**

Prior Survey Recommendations

Please note that IMQ/CMA expects providers to have corrected their prior deficiencies regardless if they were required to submit an interim report. Although a provider may have been most recently surveyed on the old system of the Essential Elements, many of these elements were incorporated into the 2006 Accreditation Criteria, which are the current standards, and should have been corrected during the last accreditation term. This includes the Standards for Commercial SupportSM, approved in 2004, which are reflected in Criteria 7-10.

Performance in Practice (Activity Files) Review

All accreditation applicants are expected to demonstrate and verify that their organization’s educational activities and the administration of the CME program meet all of IMQ/CMA’s accreditation requirements through an activity file review process. After receipt and review of a list of all of the activities planned or conducted during the current accreditation term (or, for initial applicants, the educational activities that are to be used to demonstrate a “track record”), IMQ/CMA will select up to 15 activities that the organization will be expected to submit to IMQ/CMA for review. Traditionally, IMQ/CMA has selected 8 activities for review.

IMQ/CMA expects to receive complete files for each of the activities selected. Each activity file should be placed in a separate “manila” file folder, which should be labeled appropriately. See “Instructions for Preparing Activity Files for Review” for more information. The surveyor will review an organization’s performance in practice by assessing the documentation in the activity files in the context of all of the accreditation requirements (criteria and policies). Please note that the selection of activities for review is at the sole discretion of IMQ/CMA, which may request and require additional information or documentation as it deems necessary to assess an organization’s performance.

Accreditation Survey

All providers and initial applicants are expected to undergo an accreditation survey by IMQ/CMA. The survey presents an opportunity to describe and provide clarification and verification, as needed, on aspects of practice described and verified in the application or activity files. During the survey, the organization may present its practices in a more explicit manner. The surveyor may request that the provider submit additional materials to accurately assess the provider's practice.

While IMQ/CMA does its best to find the most appropriate surveyor, your organization has the right to request from the IMQ/CMA CME Accreditation Program office a change of surveyor prior to the survey if you feel that surveyor has a relationship with your organization that may cause a conflict of interest.

All requests must be made sufficiently in advance of the survey, and no request will be accommodated on the day of or after the survey.

The IMQ/CMA expects that attendance at the survey will include, at a minimum, the director of medical education (CME chair), the CME coordinator (or those of equivalent responsibility) and the **physicians** involved in running the organization's CME program. It also is advisable to invite other key stakeholders, such as members of the CME committee or advisory board, senior leadership or administration and representatives from quality or performance improvement departments.

The survey will take approximately three to four hours. During this time, the surveyor will review the application, activity files, and other items as deemed to be necessary to describe, clarify, and verify the provider's practices and performance relative to the IMQ/CMA accreditation criteria and policies.

After the survey, organization will be asked to evaluate the survey and accreditation process. Feedback responses will have *no bearing on and are considered independent from accreditation decisions*. The IMQ/CMA seeks this feedback to improve its accreditation processes.

Accreditation Decisions

Following the survey, the IMQ/CMA surveyor completes a report that is sent to the IMQ/CMA's Committee on Continuing Medical Education. This committee meets approximately every other month to render accreditation decisions. Your organization will be informed of the committee's accreditation decision approximately four weeks after the meeting.

Additional information on the accreditation process and accreditation decisions can be found in the most recent IMQ/CMA CME Accreditation Standards Manual, available for download at www.imq.org.

Regularly Scheduled Series (RSS)

All providers or initial applicants that offer **Regularly Scheduled Series (RSS)** (formerly referred to as a Regularly Scheduled Conferences), must complete the RSS section of the application, Section X. One Regularly Scheduled Series is defined as a single educational activity that has all of the following characteristics:

- Is planned as a *series* made up of multiple sessions
- Has sessions occur on an ongoing basis (e.g., offered weekly, monthly, or quarterly)
- Is planned by the accredited organization's own professional medical staff
- Is presented to (i.e., has as its target audience) the accredited organization's own professional medical staff

Examples of RSS include Tumor Boards, M&M Series and, sometimes, Grand Rounds. Hospitals, health systems, and medical schools are the only types of CME providers that typically offer RSS

because each of these organization types has in-house, professional staff. Providers must show that their organization has a **system to monitor the RSS** in meeting the IMQ/CMA accreditation criteria and the IMQ/CMA accreditation policies; that the monitoring system provides **actual data and information on the RSS' performance and compliance** with the IMQ/CMA accreditation criteria and policies; and that the **organization analyzes the actual data and information** from the RSS monitoring system, reflecting on its RSS' performance in meeting the IMQ/CMA accreditation criteria and policies.

Please refer to the IMQ/CMA CME Accreditation Standards Manual for the exact requirements for Regularly Scheduled Series as well as ACCME's RSS Toolkit, available for download at www.accme.org, for examples of RSS monitoring systems. Section X of the application requires the applicant to describe and provide documentation for the RSS monitoring system in use. Providers and initial applicants that *do not* produce RSS do not need to complete Section X of the application.

Documentation of Learner Participation in Educational Activities

Your organization must make available and accessible to the learners an information management system (e.g., paper, web or database systems) through which data and information on a learner's participation in CME-designated educational activities can be recorded and retrieved. IMQ/CMA limits the provider's responsibility in this regard to access, availability, and retrieval. Learners are free to choose not to use this available and accessible system.

The critical data and information elements for documentation of learner participation include:

- Learner identifier
- Name/topic of activity
- Date of activity
- Hours of credit *claimed* by the learner (American Medical Association requirement)

Documentation of a system to verify learner participation in educational activities is required in the accreditation process.

Joint Sponsorship

Joint-sponsorship involves the planning and presentation of CME activities in a partnership between an accredited CME provider and one or more non-accredited organizations. IMQ/CMA expects that the accredited CME provider takes all responsibility for educational programming that is done in joint sponsorship such that all of the IMQ/CMA accreditations expectations are met.

Submission of Application Materials

All application materials are due by the specified due date:

- Two hard copies of the application, with attachments, must be submitted separately, in separate binders.
- One copy of the selected activity files must be submitted. Each file must be labeled and placed in its own, separate file folder.
- Please be sure to include payment for the accreditation fee.

Please note the following:

- We suggest starting on all accreditation materials as soon as you possible. If you have any questions, please contact the staff of the CME Accreditation Program. Thank you!
- Although you are not required to paginate your written application, it is strongly suggested.
- You are required to use colored cover sheets for each section of the application for both submitted copies of the written application.

- We suggest shipping the application materials via a service with a tracking feature (e.g., FedEx, UPS, Certified Mail, etc.). You also may hand-deliver the materials before 5 p.m. on the due date—please call first.
- Mailing and physical address for IMQ is the following:

Institute for Medical Quality
Attn: CME Accreditation Program
221 Main Street, Suite 210
San Francisco, CA 94105
(415) 882-3370 or (415) 882-5182