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GUIDE TO THE ACCME PROGRESS REPORT PROCESS For Progress Reports to be Reviewed in the March, July and November 2024 Cohorts

The ACCME expects providers found to be in noncompliance with Core Accreditation Criteria and/or applicable <u>Standards for Integrity and Independence in Accredited Continuing Education</u> and/or applicable Accreditation Policies to demonstrate compliance through the progress report process. Descriptions of performance issues that must be addressed in the progress report are provided in the decision report from your recent review. Noncompliance findings in the Menu of Commendation Criteria should NOT be addressed in the progress report.

Contents of a Progress Report

For the criteria, standards or policies that were found to be in noncompliance, providers must:

- describe improvements and their implementation; and,
- provide evidence of performance-in-practice to demonstrate compliance.

Expectations of Materials Submitted

All the materials submitted to the ACCME must not contain any untrue statements, must not omit any necessary material facts, must not be misleading, must fairly present the organization, and must be the property of the organization. Materials submitted for accreditation (progress report, evidence of performance-in-practice, other materials) must not include individually identifiable health information, in accordance with the Health Insurance Portability and Accountability Act (HIPAA).

Decision-Making

Providers will receive a decision from the ACCME based on a review of the information and materials submitted for the progress report. A progress report review will result in the following feedback from the ACCME:

- All Criteria in Compliance: The provider demonstrated that it has corrected the criteria, standards, or policies that were found to be in noncompliance.
- All Criteria Not Yet in Compliance: The provider has not yet demonstrated that it has corrected all the criteria, standards, or policies that were found to be in noncompliance.

If all criteria, standards, or policies that were found to be in noncompliance are not corrected, the ACCME may require another progress report, a focused interview, and/or a change of status may result.

There may be circumstances when the ACCME requires clarification at the time of the provider's next review to verify compliance or defers a progress report to a future cohort, because, for example, a provider has not had sufficient time within the context of its CME program to implement improvements or to produce evidence to support compliance.

Submission Instructions

All information and materials for your progress report review will be submitted in the ACCME's Program and Activity Reporting System (PARS) at <u>https://parsa.accme.org/.</u> The primary contact of your organization will be notified by email when the Progress Report Narrative and Performance-in-Practice (PIP) Structured Abstracts are available.

Please provide concise narrative descriptions of policies, processes, and practices that support compliance with ACCME requirements in the cited areas. The text fields accommodate copy/paste functionality and some formatting, but you should not input screenshots, charts, graphs, etc. **Uploads should be included only where requested.**

Make all required submissions according to the ACCME's specifications and by established deadlines. Failure to do so may result in a delay of your progress report review and/or a change of your organization's accreditation status. **Your submission must include:**

- a) In the Progress Report Narrative, descriptions of improvements made in cited areas of noncompliance in the Core Accreditation Criteria and/or applicable Standards for Integrity and Independence in Accredited Continuing Education and/or applicable Accreditation Policies; and,
- b) In the Performance-in-Practice Structured Abstract, evidence of performance-in-practice for each activity selected, as applicable.
 - Address ONLY the criteria, standards or policies found to be in noncompliance.
 - If an activity that has been selected does not offer your organization an opportunity to present evidence that reflects the improvements you have implemented to ensure and demonstrate compliance, please contact the ACCME to discuss possible options in the sampling process.

Resources

The ACCME encourages you to take advantage of the resources and tools available on the ACCME's website, including, for example, <u>Examples of Compiance and Noncompliance</u>, <u>FAQs</u>, and the <u>Standards</u> <u>for Integrity and Independence for Accredited CE Toolkit</u>.

Progress Report Reporting Requirements for ACCME Accreditation Criteria/Standards/Policies

The information below provides a guide for determining the content of the progress report to address noncompliance findings with Core Accreditation Criteria and/or applicable Standards for Integrity and Independence in Accredited Continuing Education (SII) and/or applicable Accreditation Policies. Please contact ACCME staff if you have questions about what to include in your progress report.

	CORE ACCREDITATION CRITERIA	
	CME Mission and Program Improvement	
Area of Noncompliance	Required for Progress Report	
Mission	In the Mission section of the Progress Report Narrative:	
MISSION	1. Enter the expected results component of your CME mission statement. The expected results must be articulated in terms of competence, performance, or patient outcomes.	
	In the Program Analysis section of the Progress Report Narrative:	
Program Analysis	1. Describe your conclusions on the degree to which you have met the expected results of your mission. These conclusions should be based on the data you have obtained in your analysis of learner change across your overall program of accredited activities.	
	In the Analyzes Change section of EACH Progress Report Performance-in- Practice Structured Abstract:	
	1. Describe the strategies used to obtain data or information about changes achieved in learners' competence or performance or patient outcomes as a result of their participation in the activity. Please include, for example, the questions you asked the learner about changes in competence or performance or other change data such as quality improvement or patient outcomes.	
	2. Upload the compiled or summative data or information generated from the activity, specifically about changes achieved in learners' competence or performance or patient outcomes.	
Dream	In the Program Improvements section of the Progress Report Narrative:	
Program Improvements	1. Describe the needed or desired changes in the overall program required to improve on your ability to meet your CME mission that have been identified, planned, and implemented during the accreditation term.	

	Educational Planning and Evaluation	
Area of Noncompliance	Required for Progress Report	
Educational Needs	In the Educational Needs section Progress Report Narrative: Describe what you do to ensure your organization identifies the professional practice gaps of your learners and the educational needs that underlie the practice gaps. In the Educational Needs section of EACH Progress Report Performance-in-Practice Structured Abstract: State the professional practice gap(s) of your learners on which the activity was based. Check the educational need(s) that apply to the activity: knowledge; competence; performance. State the educational need(s) that you determined to be the cause of the professional	
Designed to Change	practice gap(s). In the Designed to Change section of the Progress Report Narrative: Describe what you do to ensure your organization designs activities to change the competence, performance, or patient outcomes of your learners. In the Designed to Change section of EACH Progress Report Performance-in-Practice Structured Abstract: Explain what competence, performance, or patient outcome the activity was designed to change.	
Appropriate Formats	 In the Appropriate Formats section of the Progress Report Narrative: Explain the basis for determining that the formats you choose are appropriate for the setting, objectives, and desired results of your activities. In the Appropriate Formats section of EACH Progress Report Performance-in-Practice Structured Abstract: In addition to identifying the educational format(s) that you have chosen, Explain why these formats are appropriate for the setting, objectives, and desired results of the activity. 	
Competencies	In the Competencies section of the Progress Report Narrative: Describe what you do to ensure your activities/educational interventions are developed in the context of desirable physician attributes (competencies). In the Competencies section of EACH Progress Report Performance-in-Practice Structured Abstract: Select the desirable physician attribute(s) the activity addresses. The list provided includes the Competencies of: ACGME/ABMS, Institute of Medicine, and Interprofessional Education Collaborative, or you may enter other competencies recognized by your organization.	

be the strategies used to obtain data or information about changes achieved in s' competence or performance or patient outcomes as a result of their ation in the activity, including, for example, questions you asked the learner hanges in competence or performance or other change data such as quality ement or patient outcomes. I the compiled or summative data or information generated from the activity, cally about changes achieved in learners' competence or performance or patient

ACCREDITATION POLICIES	
Area of Noncompliance	Required for Progress Report
Accreditation Statement Policy	In the Accreditation Statement Policy section of the Progress Report Narrative: Describe what you do to ensure that your CME activities meet the requirements of the Accreditation Statement Policy. In the Accreditation Statement Policy section of EACH Progress Report Performance-in-Practice Structured Abstract: Upload evidence of the use of the appropriate accreditation statement for the activity, as presented to learners. For RSS activities, present one example of presenting the ACCME accreditation statement to learners when the exact same information is transmitted in the exact same way for each and every session of the RSS. Otherwise, if the information and/or transmission of information varies in any way, please submit evidence for each session.
CME Attendance Records Retention Policy	 (A "batch scan" of documentation for all sessions in one PDF file is preferable to individual uploads for each session.) In the CME Attendance Records Retention Policy section of the Progress Report Narrative: Describe the mechanism your organization uses to record and verify physician participation for six years from the date of your CME activities. Upload an example of the information or report(s) your mechanism can produce for an individual participant.

CME Activity Records	In the CME Activity Records Retention Policy section of the Progress Report Narrative:
Retention Policy	 Describe what your organization does to ensure that your organization retains activity files/records of CME activity planning and presentation during the current accreditation term or for the last twelve months, whichever is longer. In EACH Progress Report Performance-in-Practice Structured Abstract:
	As applicable, Produce the activity files/records of CME planning and presentation as requested for any noncompliance finding(s) being addressed in the progress report.

Standards for Integrity and Independence (SII)	
Area of Noncompliance	Required for Progress Report
SII Standard 1: Ensure Content Is Valid	 In the Standard 1 section of the Progress Report Narrative: Describe what you do to ensure that the content of your CME activities and your accredited CME program meet all four elements of <u>Standard 1</u>. In the Standard 1 section of EACH Progress Report Performance-in-Practice <u>Structured Abstract</u>: Upload the required documentation described based on the type of activity. If the activity is a Journal CME/CE or Enduring Material (online or print) CME activity: Upload instructions to access the CME product itself, so reviewers may experience the activity as your learners experience. It. Provide a URL or direct link and generic username(s) (e.g., ACCMEUSER1, ACCMEUSER2, ACCMEUSER3) and password(s), as necessary, allowing access to the activity for multiple users from the point of submission for the duration of the review period until the decision. Access should not require the use of the personal or professional email accounts of ACCME volunteers or staff. If activities are no longer available online, you may provide access to an archived website. If this is not an option, then screen shots are acceptable. If the activity is Live, a Manuscript Review, Test-Item Writing, Committee Learning, Performance/Quality Improvement, Internet Searching and Learning, Learning from Teaching or Other/Blended Learning activity: Upload the activity topics/content to include the nature and scope of the CME content (e.g., content outline, agenda, brochure, program book, or announcement) If the activity is spontaneous learning or self-directed and/or the content is controlled by the learner: Upload the framework or instructions provided to the learner.

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	In the Standard 2 section of the Progress Report Narrative:
SII Standard 2: Prevent	Describe what you do to ensure that the content of accredited activities and your accredited CME program meet expectations of elements 1 AND 2 of <u>Standard 2</u> .
Commercial Bias & Marketing in	Describe what you do to ensure that names are not shared without the explicit consent of learners.
Accredited CME	In the Standard 2 section of the EACH Progress Report Performance-in-Practice Structured Abstract:
	Attest that the activity meets the expectations of all three elements of Standard 2.
	In the Standard 1 section of EACH Progress Report Performance-in-Practice Structured Abstract:
	Upload the required documentation described based on the type of activity as indicated above in the <u>Standard 1</u> section of this guide.
SII Standard 3:	In the Standard 3 section of the Progress Report Narrative:
Identify, Mitigate, and Disclose Relevant Financial Relationships	Describe the process(es) you have in place to collect information from all planners, faculty, and others in control of educational content about all financial relationships with ineligible companies to meet the expectations of <u>Standard 3.1</u> and that your process includes: a) the complete definition of an ineligible company and b) the individual completing the form/mechanism is instructed to include ALL financial relationships with ineligible companies for the prior 24 months.
	Indicate if your organization uses employees or owners of ineligible companies in its accredited activities. (Yes/No)
	 If YES: Describe the processes you have in place to meet the expectations of <u>Standard 3.2 (a-c)</u>
	Describe the process(es) you use to determine which financial relationships are relevant to the educational content.
	Describe the method(s) you use to mitigate all relevant financial relationships for individuals involved in the planning of CME activities, such as planner /editor / reviewer roles.
	Describe the methods you use to mitigate all relevant financial relationships for individuals with speaker/author/moderator/facilitator roles.
	Describe the method(s) you use to inform learners of the <u>presence or absence</u> of relevant financial relationships of all individuals in control of content.
	Describe the method(s) you use to inform learners that all relevant financial relationships have been mitigated.
	Describe what you do to ensure that your organization does NOT engage in joint providerships with ineligible companies.

SII Standard 3:	In the Standard 3 section of the EACH Progress Report Performance-in-Practice
Identify, Mitigate, and Disclose Relevant Financial	 <u>Structured Abstract</u>: Indicate if the activity meets one of the exceptions listed below? (Yes/No) Accredited education that is non-clinical, such as leadership or
Relationships (CONT.)	 communication skills training. Accredited education where the learner group is in control of content, such as a spontaneous case conversation among peers. Accredited self-directed education where the learner controls their educational goals and reports on changes that resulted, such as learning from teaching, remediation, or a personal development plan. When accredited providers serve as a source of information for the self-directed
	learner, they should direct learners only to resources and methods for learning that are not controlled by ineligible companies.
	 If YES: describe how the activity met the exception. Indicate if owner(s)/employee(s) of ineligible companies participated as planners
	or faculty in the activity? (Yes/No)
	 If YES: for each owner/employee that participated in this activity, Provide information to demonstrate the individual's involvement meets one of the exceptional circumstances listed in <u>Standard 3.2</u>.
	Indicate if an ineligible company took the role of non-accredited partner in a joint provider relationship in this activity? (Yes/No)
	Upload a single example of the form(s), tool(s), or mechanism(s) used to collect financial relationships with ineligible companies from all individuals in control of content, as completed by an individual in control of content for the specific activity.
	Download and Complete the spreadsheet linked <u>HERE</u> . Then, Upload the spreadsheet as an EXCEL file.
	Upload the information, as disclosed to learners, about the presence or absence of relevant financial relationships for all individuals in control of CME content.
	Upload the statement, as disclosed to learners, that all relevant financial relationships were mitigated, if applicable
	In the Standard 1 section of EACH Progress Report Performance-in-Practice Structured Abstract:
	Upload the required documentation described based on the type of activity as indicated above in the <u>Standard 1</u> section of this guide.
SII Standard 4:	In the Standard 4 section of the Progress Report Narrative:
Manage	Indicate if your organization accepts commercial support. (Yes/No)
Commercial Support	If YES: Describe what you do to meet the expectations of all four elements of <u>Standard 4</u> .
	In the Standard 4 section of EACH Progress Report Performance-in-Practice Structured Abstract:
	Indicate if the activity received commercial support. (Yes/No)
	• If YES: Complete the table provided, listing the name(s) of the commercial supporter(s) of the activity and the dollar value of any monetary commercial support and/or indicate non-monetary (in-kind) support and Upload each executed commercial support (monetary and non-monetary) agreement for the activity.

SII Standard 4: Manage Commercial Support (CONT.)	 Upload the information for disclosure of commercial support (monetary and non-monetary), as presented to learners. <u>In the Standard 1 section of EACH Progress Report Performance-in-Practice</u> <u>Structured Abstract</u>: Upload the required documentation described based on the type of activity as indicated above in the <u>Standard 1</u> section of this guide.
Standard 5: Manage Ancillary Activities Offered in Conjunction with Accredited Continuing Education	 In the Standard 5 section of the Progress Report Narrative: Indicate if your organization offers ancillary activities, including advertising, sales, exhibits, or promotion for ineligible companies and/or nonaccredited education in conjunction with your accredited CE activities? (Yes/No) If YES: Describe what you do to meet expectations of all three elements of <u>Standard 5</u>. In the Standard 1 section of EACH Progress Report Performance-in-Practice <u>Structured Abstract:</u> Upload the required documentation described based on the type of activity as indicated above in the <u>Standard 1</u> section of this guide.

Please contact ACCME staff by email at <u>info@accme.org</u> if you have any questions about the ACCME's progress report review process. Please include your ACCME provider number in the subject line of your email.