

*Learn to Thrive 2026*

# **Quick Tips for Regularly Scheduled Series (RSS): A Reference Guide for CE Professionals**

A product of the Learn to Thrive 2025 Working Group *Help Us Help You: RSS Coordinator Best Practices.*



# Introduction

Regularly scheduled series (RSS) are courses planned as a series with multiple, ongoing sessions, e.g., offered weekly, monthly, or quarterly; and are primarily planned by and presented to an accredited continuing education (CE) provider's professional staff. Examples include grand rounds, tumor boards, and morbidity and mortality conferences.<sup>1</sup> In 2024, accredited CE providers delivered 27,812 RSS activities for 593,676 AMA PRA Category 1 Credits™. These activities touched more than 5 million physicians and more than 3 million other learners,

Accredited CE providers share a common goal: deliver quality education to healthcare providers while upholding the compliance expectations for Accreditation Council for Continuing Medical Education (ACCME®) and Joint Accreditation for Interprofessional Continuing Education (Joint Accreditation™) requirements for all accredited CE activities. CE professionals who support RSS—often with titles such as CME Coordinator or RSS Coordinator—play a central role in educational planning, administration, and collaboration to make these series successful. With their high-volume sessions and unique support staff, RSS activity planning and implementation is often managed differently than other accredited CE activities. This working group was formed to recognize the special role that these CE professionals who manage RSS play and to provide helpful tips and insights to support their important work.

The 2026 ACCME Working Group launched at ACCME's 2025 Learn to Thrive meeting and continued to meet virtually for four months with an average of 60 participants representing both US domestic and international accredited CE providers. Robust discourse occurred on topics such as how RSS activities are managed; workforce challenges for recruiting, onboarding, retaining, and supporting the professional development of RSS coordinators, department RSS coordinators, and faculty; and the group shared resources from their own local institutions.

This publication includes a summary of survey results from two groups of accredited CE providers: the members of the working group and an additional 130 respondents primarily representing schools of medicine/health sciences. The outcome of this work includes practice-informed tips and insights that RSS coordinators can use in their own organization.

## Suggested Citation

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<sup>2</sup> See ACCME/AMA Shared Glossary of Terms. <https://accme.org/resource/accmeama-glossary-terms-and-definitions/>

# 2026 ACCME Working Group

## Working Group Leaders

Annette Donawa, PhD, MEd  
Jennifer Turner

Chanise Reese-Queen, EdD, MSA

## Working Group Members

Cece Abbey  
Mahjabeen Ahmed  
Sheila Allen  
Michelle Alley  
Shaun Ayon  
Amanda Bartels  
Karen Bertucci  
Kenneth Black  
Myra Boaden  
Terri Boudreaux  
Missy Bowles  
Kelly Boyd  
Charmagne Branch-Price  
Bianca Bulliner  
Karen Busse  
Chelsey Cambra  
Allen Cantrell  
LeeAnne Carlson  
Christine Catts  
Amy Czech  
Regina Damon  
Julie Day  
Scymone DeVent  
Jaime Dominguez  
Elizabeth Drury  
Jeannie Dwyer  
Misty Easton  
Leila Ekbia  
Nancy Eleftheratos  
Kristi English  
Cindy Freeland  
Callie Gallet

Alison Gehre  
Theresa Gilbane  
Liane Giles Leblanc  
Kori Hacker  
Fatma Hamdan  
Elysa Hausmann  
Jen Hawkins  
Haley Hendricks  
Suzanne Hockenberry  
Leann Hotchkiss  
Courtney Hugo  
Macy Jackson  
LaQusia Jackson  
Corissa Kessler  
Melissa Kupczynski  
Piper Lang  
Sabrena Lary  
Annalee Locke  
Jennifer Lopes  
Jaime Luther  
Wendy Macias  
Stacy Mallory  
Aimee Meissner  
Kara Melin  
Katherine Merchant  
Rose Mettlen  
Farrah Nettleton  
Karin Pearson  
Stephanie Perez  
Heidi Petree  
Kaitlynn Philbin  
Junie Pierce

Sharon Plucker  
Mindy Pollock Troy  
Betty Reid  
Pamela Reyes  
Marsha Reynolds  
Elisabeth Rice  
Priscilla Rodriguez  
Ozzie Rodriguez  
Joanne Rodriguez  
Alyssia Rosa  
Courtney Samples  
Lorrie Santos  
Fiza Scaletty  
Heather Sebest  
Joyce Shelby  
Jamie Silverstein  
Kiersten Smith-Gaston  
Kimberly Sprecker  
Alyssa Stadtler  
Sonia Syed  
Valerie Tokatli  
Nadine Valme  
Ashley Walker  
Tom Weber  
Alaina West  
Thomas Wheeler  
Jan Wong  
Laura Yasso  
Jean Yodis  
Kelly Zarwell

# Surveying Accredited Providers on RSS Practices

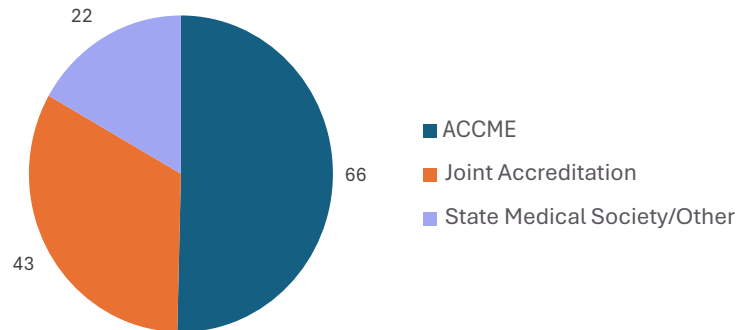
To gain institutional perspectives on RSS planning and implementation, the working group administered a survey in September 2025 to 300 accredited CE providers within the ACCME System. A brief summary of key results from the survey are presented below.

## Results

### Respondents

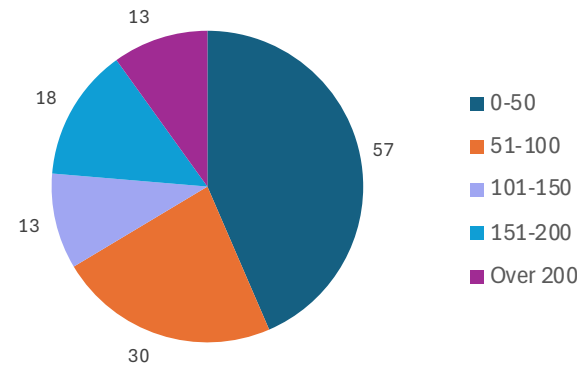
80 of 300 (27%) accredited CE providers responded to the survey.

Half of the respondents are accredited by ACCME.



### Managing RSS

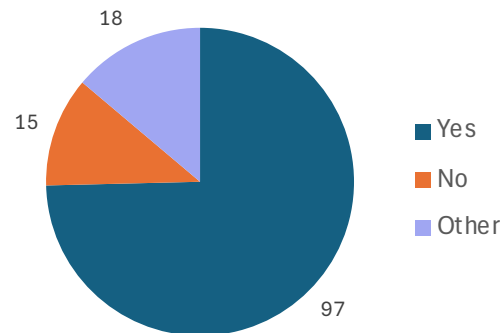
Almost half of the respondents indicated they manage 0-50 RSS activities.



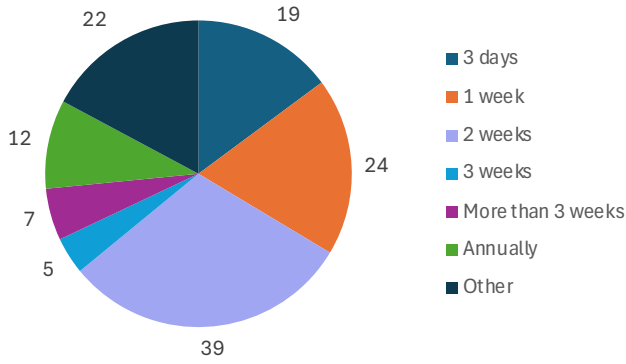
42% of the providers have 1 person in their CE department who manages RSS, while 28% have at least 2 people, 12% have 3 people; 4% have 4 people; 5% have 5 people; and 2% have 6 people. 6% indicated 'Other'.

For over half of the provider-respondents, RSS are planned using a decentralized approach (i.e., specific departments manage meeting logistics/coordination) and 21% are centrally planned (i.e, where the CE department manages RSS).

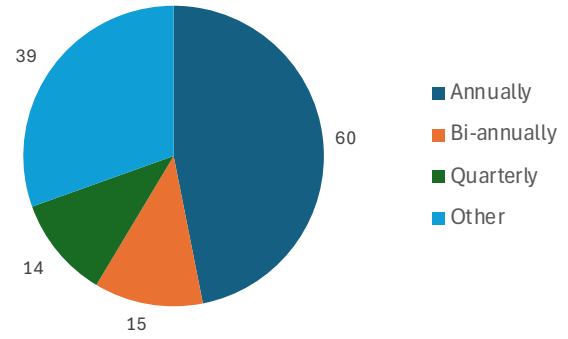
Most providers use a learning management system (LMS) to manage RSS activities.



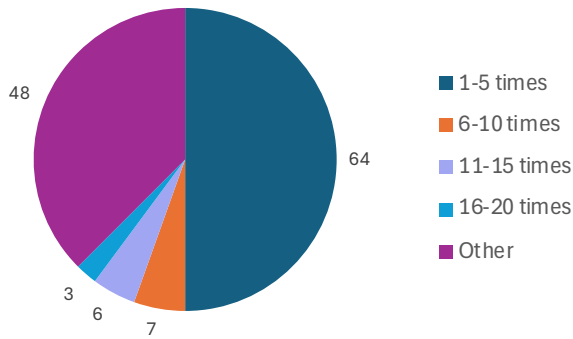
A majority of the respondents indicated they collect disclosures 2 weeks before each RSS session.



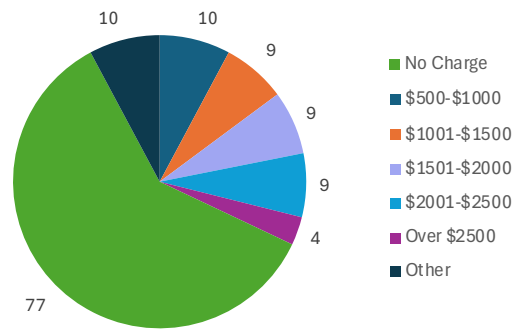
Almost half of the providers conduct annual evaluations for their RSS activities.



Half of the providers conduct training sessions for course directors, faculty and RSS department coordinators 1-5 times per year.



Majority of the providers do not charge a fee for RSS education.



## Insights

This section includes best practices identified by the working group that were informed by the survey responses. Note that each accredited provider may follow their own internal processes and workflows based on the needs of their local institutions and health systems.

## A Unique Opportunity

Regularly scheduled series (RSS) activities are accredited activities designed to meet the local needs of the institutions and the healthcare teams that they serve. RSS activities are managed differently from the other accredited educational activity formats, such as live and enduring materials. RSS activities occur more frequently, and in most cases, weekly, bi-weekly, monthly, and quarterly. It is important to note that when referring to an RSS activity, the **activity** refers to the entire series that is usually accredited annually or bi-annually. When referring to a specific weekly RSS, the term **session** is typically used. For example, one RSS **activity** may have 52 **sessions** during the year.

## Improving the Educational Value of RSS Sessions

Because RSS activities are recurring, they offer a unique opportunity not only to meet compliance requirements, but also to strengthen learning over time. In addition to delivering content, RSS sessions can be designed to promote reflection, discussion, application to practice, and interprofessional team-based learning.

- Build in active learning strategies such as reflection, brainstorming, case discussion, low-stakes quizzes, think-pair-share, problem-solving, role-playing, drawing, or gamification.
- Begin sessions with a powerful, open-ended question that invites discussion and reasoning rather than recall alone.
- For case-based conferences, encourage discussion of key decision points, what information was available at the time, and what alternative approaches could have been considered.
- Use the recurring nature of RSS to identify patterns across sessions over time, including recurring clinical questions, teamwork issues, cognitive challenges, technical difficulties, or opportunities for improvement.
- When appropriate, involve the broader healthcare team and other perspectives to support interprofessional learning and improve relevance to practice.
- Consider ways to support psychological safety so participants can ask questions, acknowledge uncertainty, and learn from mistakes in a respectful environment.

## Managing RSS

Typically, 1-2 people manage RSS activities at the academic schools of medicine that were surveyed. These activities involve hands-on management, tracking and monitoring daily. In ensuring the expectations of the Standards for Integrity and Independence are met, special attention is required to ensure that (1) they collect all financial relationships that those in control of the content of RSS activities possess with ineligible companies **before** they take their role in the activity; (2) staff determine whether the disclosed financial relationships are **relevant** to the content of the activity, and; (3) ensure that those relevant financial relationships (RFR) are mitigated prior to the start of the activity.<sup>2</sup>

RSS coordinators use frequent communications and reminders, particularly when managing these processes across multiple other departments. Continuous training (including onboarding for new staff and faculty) helps to ensure compliance with accreditation requirements.

### Tips for Managing RSS

- Create timelines for milestones: cycle for accrediting RSS activities; due dates for materials.
- Create a schedule to manage tasks and weekly check-ins, e.g., every Friday, check speaker disclosures.
- Create checklists to assist with accreditation compliance.
- Develop standardized templates that communicate important information—such as accreditation statements and disclosure language—for distribution to RSS coordinators.
- Learners receive transcripts/certificates from attending RSS activities, while learners from other accredited educational activities receive certificates.
- Develop a Frequently Asked Questions (FAQ) resource on the website for staff, faculty, and RSS coordinators to provide clear guidance and centralized support.

## Ensuring Compliance with Accreditation Requirements

Survey respondents use ongoing training and monitoring of RSS activities to ensure compliance with accreditation requirements—and particularly the Standards for Integrity and Independence of Accredited Continuing Education (Standards). The practices below summarize some of the mechanisms that providers use to monitor RSS and ensure compliance.

### Standards-related Tips

- Collect financial relationships, determine relevance, and mitigate relevant financial relationships (RFRs) for planners **before** they begin their work to plan the activity/sessions.

<sup>2</sup> For more information about the Standards for Integrity and Independence in Accredited Continuing Education, visit <https://accme.org/rules/standards/>.

- Require completed speaker disclosures within 1-2 weeks prior to RSS session. Some providers monitor and track disclosures daily, every few days, and weekly depending on the number of RSS activities being managed and the frequency of those activities.
- For **disclosure of relevant financial relationships**, ensure that those in control of content (e.g., speakers, facilitators) disclose to learners prior to start of each session. Some providers use flyers to communicate disclosures and others may post information on their websites/ course pages.
- Allow sufficient time to mitigate RFR for those in control of content. Oftentimes, emails are sent to the speakers to clarify and confirm financial relationships that they report on their disclosure forms.
- Use ACCME resources—such as the [Standards Toolkit](#)—no need to create your own forms!

### Other Tips

- Learner evaluations are conducted by providers at different intervals. Some providers conduct evaluations annually, biannually, quarterly, and at the end of each RSS session. For example, one institution conducts biannual evaluations. The first evaluation reflects department-level assessments administered through its learning management system in July/August and the second evaluation is an organization-wide evaluation, which collects aggregate data, and is distributed electronically in December to assess goal attainment and learners' intent to implement strategies into practice.
- Record learner attendance for each RSS session. Methods for recording and verifying attendance include the use of QR codes, texting a code, and sign-in sheets to check-in for each RSS session.
- Engage greater participation by registering RSS activities for American Board of Medical Specialties (ABMS) Maintenance of Certification/Continuing Certification (MOC/CC) credit in ACCME's Program and Activity Reporting System (PARS; or, JA-PARS for jointly accredited providers). Activities registered for MOC/CC must adhere to the requirements of the specific board's MOC/CC program. Documentation must include the evaluation mechanism used, details describing how the evaluation was implemented and how feedback was provided to learners, a record of physician learners who met the minimum participation requirements, and the correct answers with accompanying rationale.<sup>3</sup>
- If jointly accredited and including Accreditation Council for Pharmacy Education (ACPE) credit, report ACPE credits in CPE Monitor within 60 days of the activity.
- Annual data reporting requirements must be completed and submitted by the end of March in PARS. However, the best practice approach would be to report activity data throughout the year and review data annually. In addition, providers have the opportunity to list RSS activities on CME Passport. Some providers use RSS data and outcomes to conduct research to inform learner preferences on activity formats, burnout, etc.

<sup>3</sup>For more information about registering RSS activities for MOC/CC, visit <https://accme.org/data-reporting/maintenance-of-certification/>

# Training and Professional Development for RSS Coordinators

To ensure compliance for RSS activities, many accredited providers offer ongoing training and professional development to their course directors, faculty, staff, and RSS department coordinators. Almost half of the accredited providers offer training 1-5 times per year to: resolve recurring Standards-related issues (e.g., collecting disclosures prior to the start of each RSS session), helping them to understand the Standards, and providing guidance on adult learning principles. Here are a few additional recommendations:

- Conduct internal training sessions for faculty, RSS department coordinators, and staff throughout the year.
- Engage and encourage external training offerings (e.g., ACCME Academy, CME Palooza).
- Use flexible training formats: videos, web-based, one-on-one and small groups.
- Define terms for target audience.
- Define roles and responsibilities for RSS coordinators and planning committees.
- Conduct an “RSS Coordinator Office Hour” as a designated one-hour drop-in session where RSS coordinators can ask questions related to their RSS activities and/or the LMS. This approach can streamline communication and significantly reduce the volume of individual emails.
- Develop an RSS newsletter that is distributed to faculty and RSS coordinators. Include an accreditation update section highlighting regulatory changes, spotlight an ‘RSS Coordinator of the Month,’ provide key deadline reminders, and feature a dedicated FAQ section for ongoing guidance and support.

## Common Acronyms You Should Know

- ACCME: Accreditation Council for Continuing Medical Education
- ACPE: Accreditation Council for Pharmacy Education
- ANCC: American Nurses Credentialing Center
- CC: Continuing (or Continuous) Certification)
- CE: Continuing Education
- CME: Continuing Medical Education
- RFR: Relevant financial relationships
- IPCE: Interprofessional Continuing Education
- JA: Joint Accreditation
- LMS: Learning management system

- MOC: Maintenance of Certification
- PARS: ACCME Program and Activity Reporting System
- RSS: Regularly Scheduled Series
- NCPD: Nursing Continuing Professional Development
- AOA: American Osteopathic Association

For a list of additional key terms, visit the [ACCME/AMA Shared Glossary of Terms](#).



## RSS Barriers

The survey solicited information about barriers that staff encountered managing RSS activities. Common challenges are described below with some insights to overcoming them.

### **Time**

Having insufficient time to manage RSS was the primary barrier identified. Some CE departments implement time management strategies, such as holding virtual office hours, creating a dedicated CE email box, and setting aside specific dates/times during the week to respond to emails and monitor disclosers.

### **Turnover**

Another barrier identified was staff turnover in the departments who sponsor RSS education. Providing ongoing training, creating video training modules, and expanding access to information such as virtual office hours and an RSS newsletter may address staff turnover concerns. In addition, a written RSS procedural manual can be useful to provide continuity, consistency, and clarity on roles and responsibilities.

### **Delays in Submitting Materials**

Some CE departments indicated reluctance and delays in submitting disclosures, as well as delays in submitting materials such as presentations. Some CE departments provide earlier due dates instead of actual due dates to ensure materials are submitted in a timely fashion. Educating planning teams about next steps is critical if disclosures are not received and sufficient time is not given to mitigate relevant financial relationships (RFR).