

Activity Planning Process – For additional information see Tab 2 and Tab 13 FAQ's section

Section I - #1 - What is the problem or issue(s) occurring in practice that you want to affect/change with this activity?

- Describe the professional practice gap(s) or practice problem(s) that will be addressed by this activity and what information was used to identify the gap in professional practice. Why do the issues exist? What do you want to change? **A professional practice gap, or quality gap, is the difference between what physicians are currently doing and what could or should be done/achieved using best practices.** These performance areas may go beyond patient care and include systems-based practice, informatics, leadership, and administration.

Section II - #2, 3, 4 – How do you know this issue(s) is a concern for or relevant to your learners and their practice of medicine?

- Cause of Gap-** Indicate the types of educational needs associated with the practice gaps/problems that you have identified: (Check all that apply) **For additional information see Tab 13 FAQ's section**

- Knowledge-based (Information- need for knowledge about a particular topic)
- Competence-based (Know when to apply new information and skills in practice)
- Performance-based (Actual implementation or application of the new information or skills)

- What data sources were used to identify **learners' need(s)** related to these issues? (Check all that apply)

- Evaluation Data from Prior Activities
- Medical Literature/Web Research
- Regulatory Requirements
- Performance Improvement Activity
- Pre/Post Tests
- Recommendation of Experts
- Other, please specify:
- Epidemiologic Trends
- State or National Patient Care Data
- Medical Specialty Association Recommendations
- Quality Improvement Analysis
- Survey of Physicians
- Medical Specialty Board – Maintenance of Licensure

- Summarize the Need-** with reference to the data sources identified above, summarize the educational needs related to the practice gaps. In other words, what information did you extrapolate from these sources?

- Indicate all the medical specialties and subspecialties being targeted by this educational activity as well as any other healthcare professions included in the target audience. (Check all that apply)

<input type="checkbox"/>	Adolescent Medicine	<input type="checkbox"/>	Otolaryngologists	<input type="checkbox"/>	Neurosurgeons
<input type="checkbox"/>	Allergy & Immunology	<input type="checkbox"/>	Pathologists	<input type="checkbox"/>	Oral Max. Surgeons
<input type="checkbox"/>	Anesthesiologists	<input type="checkbox"/>	Pediatrics	<input type="checkbox"/>	Plastic Surgeons
<input type="checkbox"/>	Cardiologists	<input type="checkbox"/>	Pediatric Cardiology	<input type="checkbox"/>	Trauma Surgeons
<input type="checkbox"/>	Dermatologists	<input type="checkbox"/>	Pediatric Gastroenterologists	<input type="checkbox"/>	Vascular Surgeons
<input type="checkbox"/>	Emergency Medicine		Child & Adolescent Psychiatrists	<input type="checkbox"/>	
<input type="checkbox"/>	Endocrinologists	<input type="checkbox"/>	Perinatology		OTHER DISCIPLINES:
<input type="checkbox"/>	Family Practice	<input type="checkbox"/>	PM&R	<input type="checkbox"/>	Certified Diabetes Ed.
<input type="checkbox"/>	Gastroenterologists	<input type="checkbox"/>	Podiatrists	<input type="checkbox"/>	CRNA
<input type="checkbox"/>	Geriatricians	<input type="checkbox"/>	Psychiatrists	<input type="checkbox"/>	Nurse Practitioners
<input type="checkbox"/>	GYN-Oncology	<input type="checkbox"/>	Pulmonary Medicine	<input type="checkbox"/>	Nutritionists
<input type="checkbox"/>	Hematologists	<input type="checkbox"/>	Radiologists	<input type="checkbox"/>	Pharmacists
<input type="checkbox"/>	Oncologists	<input type="checkbox"/>	Rheumatologists	<input type="checkbox"/>	Physician Assistants
<input type="checkbox"/>	Infectious Disease	<input type="checkbox"/>	Sports Medicine	<input type="checkbox"/>	Registered Nurses
<input type="checkbox"/>	Internal Medicine	<input type="checkbox"/>	Urologists	<input type="checkbox"/>	Social Workers
<input type="checkbox"/>	Neonatologists	<input type="checkbox"/>		<input type="checkbox"/>	Medical Students
<input type="checkbox"/>	Nephrologists		SURGERY:	<input type="checkbox"/>	Interns
<input type="checkbox"/>	Neurologists	<input type="checkbox"/>	Burn Surgeons	<input type="checkbox"/>	Residents
<input type="checkbox"/>	OB/GYN	<input type="checkbox"/>	Cardiac Surgeons	<input type="checkbox"/>	
<input type="checkbox"/>	Ophthalmologists	<input type="checkbox"/>	Colon & Rectal Surgeons	<input type="checkbox"/>	OTHER: <input type="checkbox"/>
<input type="checkbox"/>	Orthopedists	<input type="checkbox"/>	General Surgeons		

6. How does the educational content of this activity relate to the current or potential scope of professional activities of the target audience?

Section III - #7 – What do we need to cover as far as content? For additional information See File Tab 4 Learning Objectives and Tab 13 FAQ Section

7. **Instructional Objectives(s):** Provide 3-5 global/overall learning objectives which describe the educational outcomes for this CME activity. Use active, measurable statements written to reflect the performance that you expect learners should be able to exhibit as a result of their participation in the activity.

At the conclusion of this activity, participants should be able to:

- 1.
- 2.
- 3.

Please note: For activities with more than one session/presentation, activity organizers must also obtain specific learning objectives for each session/presentation on the conference or the series. The **CME Speaker Agreement** is designed to facilitate collection of these session-specific learning objectives from individual presenters.

**Section IV - #8 – What desirable physician attributes are addressed with this activity?
For additional information see our Tab 13FAQ's section**

8. Which of the ACGME/ABMS competencies will be primarily addressed by this CME activity?

- Patient Care - compassionate, appropriate, and effective for the treatment of health problems and the promotion of health
- Medical Knowledge – sound knowledge of biomedical, clinical, and cognate sciences and the application to patient care
- Practice-based Learning and Improvement – investigation and evaluation of the physician's own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care
- Interpersonal and Communication Skills – effective information exchange and teaming with patients, their families, and other health professionals
- Professionalism – commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse population
- Systems-based Practice – actions that demonstrate awareness of and responsiveness to the larger context and system for health care and the ability to effectively call on system resources to provide care that is optimal

Section V - #9,10, 11 – Do we have the right structure and people to accomplish what we need to do?

9. What is the format and education design for this activity?

Formats: Live Conference / Seminar / Workshop On-line Conference (ex: Zoom) Web-based Audio

Educational Design components: (check all that apply)

- Presentation / On line Lecture
- Panel Discussions
- Role Playing/ Standardized Patient
- Literature Review, Video/Audio Archives
- Case Studies and Discussion
- Demonstration / Skills Development
- Round Table / Breakout Discussions
- Other:

10. How did you identify the appropriate format and educational design for this activity?

11. Describe the process for curriculum development and faculty selection for this activity.

12. **Teaching Staff:** Please complete the grid below for all individuals who will serve a *faculty* for this activity. If the requested credit designation for this activity is more than 2.00 credit hours, please also include the invited faculty on the required program Agenda. **A *Disclosure Form* for each faculty member must be submitted to the Office of CME at least 6 weeks prior to the activity. ALL CONFLICTS MUST BE RESOLVED PRIOR TO THE ACTIVITY. A Conflict of Interest Reporting Form for each identified conflict is due at least 2 weeks prior to the activity. Please See File: Tab 3 Disclosure-Form**

Name/Title (MD, DO, PhD, etc.) & Presentation Title on Agenda	CME Office Use	Name/Title (MD, DO, PhD, etc.) & Presentation Title on Agenda	CME Office use
	<input type="checkbox"/> D <input type="checkbox"/> SA <input type="checkbox"/> CR		<input type="checkbox"/> D <input type="checkbox"/> SA <input type="checkbox"/> CR
	<input type="checkbox"/> D <input type="checkbox"/> SA <input type="checkbox"/> CR		<input type="checkbox"/> D <input type="checkbox"/> SA <input type="checkbox"/> CR
	<input type="checkbox"/> D <input type="checkbox"/> SA <input type="checkbox"/> CR		<input type="checkbox"/> D <input type="checkbox"/> SA <input type="checkbox"/> CR
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	<input type="checkbox"/> D <input type="checkbox"/> SA <input type="checkbox"/> CR		<input type="checkbox"/> D <input type="checkbox"/> SA <input type="checkbox"/> CR

13. **Faculty Confirmations:** Signed ***CME Speaker Agreements***, including the faculty name, topic, date/time of presentation, session-specific learning objectives, and acknowledgement of the Standards for Commercial Support, must be submitted to the Office of CME **at least 6 WEEKS PRIOR to the activity.**

Check to acknowledge your understanding of this requirement.

Please See File: Tab 5 Speaker Agreement

#14 – Should we involve anyone else internally or externally in planning and implementing this activity?

14. Are there other organizations/departments involved in the planning and implementation this activity? **(nursing, allied health, other specialties, outside institutions).**

- No
 Not at this time. We are exploring collaboration with:
 Yes. Please describe the collaboration:

#15 - 16 – Are there other materials or resources not associated with this activity that we should tie in or develop?

15. Is there potential to link this activity to patient or community education? **Please place copies in the file.**

No

- Not at this time. We may explore the possibility in future.
- Yes. Please describe: There may be the opportunity for physicians to learn about community resources that are available to our patients that they can then use in their practice.

16. Are there any associated non-educational strategies planned to support this activity? Non-educational strategies can include items like reminders, patient satisfaction questionnaires, physician incentives, peer-to-peer feedback, and newsletters. **Please place copies and notations in the file.**

- No
- Not at this time. We may explore the possibility in future.
- Yes. Please describe:

#17 - 19 – What change do you want to occur as a result and is there something that might inhibit this despite this education? Please See File: Tab 13 FAQ's for additional help

17. **Activity Outcomes-** This activity is designed to change (check all that apply):

- Competence
- Performance
- Patient Outcomes

18. Describe the anticipated changes in learners' competence, performance and/or patient outcomes as a result of their participation in this activity. How will this activity benefit the physician learners and/or their patients:

19. Have you identified any potential barriers outside of your control or the learners' control that could limit or block the desired changes/ outcomes? If so, do you have any strategies to address those barriers? **Please See File: Tab 13 FAQ's for additional help (Ways to address barriers could be: order sets, computer prompts, signage, Care Pathways**

- No
- Yes. Please describe:

#20 – How will you determine if the activity will make a difference in the delivery of patient care?

20. What mechanism will you use to measure if changes in competence, performance or patient outcomes have occurred? (Check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Post Activity Evaluation (required) | <input type="checkbox"/> Follow-up Outcomes Survey or Skills Assessment |
| <input type="checkbox"/> Pre/Post Tests | <input type="checkbox"/> Formal Study / Case Based Studies |
| <input type="checkbox"/> Performance Improvement/Chart Audits | <input type="checkbox"/> Quality Improvement Analysis / Statistical Review |
| <input type="checkbox"/> Patient Surveys | <input type="checkbox"/> Public Perception / Media perception |
| <input type="checkbox"/> Measure mortality / morbidity rates | <input type="checkbox"/> Other: (specify) |

21. **Agenda: If available, please attach a draft Program Agenda that lists the topic, scheduled time for each presentation, invited faculty, and objectives for each presentation.**

22. **Commercial Support:** Will this activity receive commercial support (financial or in-kind grants or donations) from a company such as a pharmaceutical or medical device manufacturer? (note: exhibit fees are not considered commercial support)

- Yes
- No

A **Commercial Interest** is defined as “any proprietary entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients, with the exemption of non-profit or government organizations and non-health care related companies.” The ACCME does not consider providers of clinical services directly to patients, such as group practices or for-profit hospitals, to be commercial interests.

All financial or in-kind support from a commercial interest for an activity certified for *AMA PRA Category 1 Credit™* must comply with the ACCME's Standards for Commercial Support and must be paid in the form of an educational grant to Crozer-Chester Foundation.

If your activity receives support from a commercial interest, a Commercial Support Letter of Agreement must be executed by a representative of the CCMC CME Office and a representative of the commercial supporter at least one week prior to the activity. No exceptions! See File: Tab 7 Commercial Support

n.b. Fees provided by companies for promotional exhibits or advertising are not considered commercial support and do not require the execution of Commercial Support Letters of Agreement.

22. Projected Budget:

Attach a projected budget itemizing estimated revenues (e.g., registration fees, unrestricted educational grants, exhibit fees, instructional support) and expenses (e.g. speaker honoraria and expenses, facilities, marketing, educational and promotional materials, food and beverage) for the activities.

Post-activity wrap up materials including an attendee list, evaluation summary, verification of disclosure of commercial support to the learners, and a financial report are due to the CME Office no later than 90 days following the close of the CME activity. Questions may be addressed to the CME Office via email at diane.wysocki@crozer.org or phone-610-447-2767.

New Criteria for Accreditation with Commendation

Please answer the questions below in each of the 5 categories. If you answer yes to any of the questions below, please provide detail descriptions as to how the activity will address the question in the appropriate category comment field.

1. Team-Based Education: (C23-25)

Is this activity designed to change competence/performance of the healthcare **team**? (i.e., at least one outcomes is specific to improving **team** interaction). Will this activity include representatives from **more than one** health care professional as planners and faculty? Yes
 No

Will this activity include patients and/or the public as planners or faculty (i.e., panelists, speakers, etc.)? Yes
 No

Will this activity include students of the health professions as planners and/or faculty? Yes
 No

Team-based Education Comments:

2. Public Health Priorities: (C26-28)

Will this activity teach about the collection, analysis, or synthesis of health/practice data and use health care data to teach about healthcare improvement? Yes
 No

Will this activity address factors beyond clinical care that affect the health of populations (e.g., healthcare and payer systems, access to care, health disparities, or the population's physical environment) or teach strategies that learners can use to achieve improvements in population health? Yes
 No

Have you collaborated with healthcare or community organizations to augment the ability to address population health issues and can you demonstrate that the collaborations augment the organization's ability to address population health issues? Yes
 No

Public Health Priority Comments:

3. Enhances skills: (C29-C32)

Will this activity improve communication skills of learners and include via demonstration, practice and feedback to the learner and does it include an evaluation of observed communication skills and formative feedback to the learner about their skills? Yes
 No

Will this activity improve technical and procedural skills of learners, (e.g., operative skill, device use, procedures, physical examination, specimen preparation, resuscitation, and critical incident management and does it include an evaluation of observed technical skills and formative feedback to the learner about their skills? Yes
 No

This criterion recognizes providers that develop individualized educational planning for the learner; customize an existing curriculum for the learner, track learners through a curriculum; or with learners to create a self-directed learning plan where the learner assesses their own gaps and selects content to address those gaps. Yes
 No

Will this activity utilize support strategies to enhance change as an adjunct to the education to reinforce or sustain changes, (e.g., reminders, supplemental resources, etc.) and do you plan to measure the success of these strategies? If yes, are you willing to work with PAMED to initiate a follow-up mechanism to assess the effectiveness of any support strategies? Yes
 No

Enhances Skills Comments:

4. Demonstrate Educational Leadership (C33-35)

Will the provider engage in CME research and scholarship? Engagement by CME providers in the scholarly pursuit of research related to the effectiveness of and best practices in CME supports the success of the CME enterprise. Participation in research includes developing and supporting innovative approaches, studying them, and disseminating the findings. Yes
 No

Does the provider support the continuous professional development of its CME team? The participation of CME professionals in their own continuing professional development (CPD) supports improvement in their CME programs and advances the CME profession. This criterion recognizes providers that enable their CME team to participate in CPD in domains relevant to the CME enterprise. The CME team are those individuals regularly involved in the planning and development of CME activities, as determined by the provider. Yes
 No

This criterion recognizes CME providers that meet the evolving needs of their learners by implementing innovations in their CME program in areas such as education approaches, design, assessment, or use of technology. **Yes**
 No

Educational Leadership Comments:

5. Achieves Outcomes (C36-C38)

Does this activity include a mechanism to measure changes in learner performance and show evidence of improvement? **Yes**
 No

Does this activity include collaboration in the process of health care quality improvement and include a mechanism to measure and demonstrate quality healthcare improvement? **Yes**
 No

Does this activity include collaboration in the process of improving patient or community health and demonstrate improvement in patient or community outcomes? **Yes**
 No

Achieves Outcomes Comments: