

MEDICAL SOCIETY OF THE STATE OF NEW YORK
Policy 2000.5
A SYSTEM TO ACCREDIT AND MONITOR PROVIDERS OF
CONTINUING MEDICAL EDUCATION



ADOPTED BY
MSSNY'S COMMITTEE ON CONTINUING MEDICAL EDUCATION –
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MSSNY'S APPROACH TO ACCREDITATION

The Medical Society of the State of New York (MSSNY) collects, reviews, and analyzes data for 3 Essential Areas: Purpose and Mission, Educational Planning and Evaluation and Improvement.

- The **Purpose and Mission *Essential Area*** describes why the organization is providing CME.
- The **Education Planning *Essential Area*** describes the organizational process for developing and providing CME activities and how well the organization is accomplishing its mission.
- The **Evaluation and Improvement *Essential Area*** defines how CME programs and activities are evaluated and improved.

Within each Essential Area are required *Elements* for which accreditation survey decision-making *Criteria* have been established.

- The **Elements** are descriptors of performance for each of the three Essentials.
- The **Criteria** describe the levels of performance and/or accomplishment for each Element.

To make accreditation decisions, MSSNY's Committee on Continuing Medical Education will review the data collected for the three Essential Areas to determine if the CME provider is in compliance with the appropriate level of performance.

THE ESSENTIAL AREAS AND THEIR ELEMENTS

The Medical Society of the State of New York recognizes that the professional responsibility of physicians requires continuous learning throughout their career. MSSNY's CME program aligns the providers' goals with the learners' goals so that both are seeking practice-based learning and improvement.

Accreditation standards support learning and improvement by the physician that can be directly tied to maintenance of competence, licensure, board certification and credentialing by hospitals.

Providers and physicians will be asked to identify their own areas for improvement – and to improve in these areas. CME programs will focus their educational efforts on enhancing knowledge, competence, or performance in support of excellent professional practice. All providers will be positioned to support physicians who are trying to implement their own improvements in the quality and safety of the patient care they deliver.

The Essential Areas, therefore, are designed to compel providers to consider the needs of physician participants in planning their CME activities and to encourage the physicians to assume active roles in the CME planning process.

CME can make an important contribution to the system-based initiatives being implemented to narrow the practice gap. The focus now is on enhancing one or more of the physician's strategies for patient care, enhanced knowledge, competence or their actual performance-in-practice, and/or their patient outcomes. MSSNY will now be asking providers to establish a specific enhancement mission – providing education interventions to meet that mission - and then to focus on assessing their program's impact at meeting that mission and improving their program, using internal and/or external strategies.

The Essential Areas and their Elements, along with MSSNY implementation and review policies, are the requirements that a provider must meet for CME accreditation.

MSSNY CME ACCREDITATION ESSENTIAL AREAS and ELEMENTS

ESSENTIAL AREA 1: PURPOSE AND MISSION

The provider must,

- 1.1 Have a written statement of its CME mission, which includes the CME purpose, content areas, target audience, type of activities provided and expected results of the program.

ESSENTIAL AREA 2: EDUCATIONAL PLANNING

The provider must,

- 2.1 Use a planning process or system that links identified educational needs with desired result in its provision of all CME activities.
- 2.2 Use needs assessment data to plan CME activities.
- 2.3 Communicate the purpose or objectives of the activity so that the learner is informed before participating in the activity.
- 3.3 Present CME activities in compliance with ACCME/MSSNY policies for disclosure and commercial support as stated in the Standards for Commercial Support.

ESSENTIAL AREA 3: EVALUATION AND IMPROVEMENT

The provider must,

- 2.4 Evaluate the effectiveness of its CME activities in meeting identified educational needs.
- 2.5 Evaluate the effectiveness of its overall CME program and make improvements to the program.

COMPLIANCE WITH THE FOLLOWING WILL BE DETERMINED AT PRE APPLICATION AND, AS REQUIRED, DURING THE PROVIDER'S TERM OF ACCREDITATION

ADMINISTRATION

The provider must,

- 3.2 Operate the business and management policies and procedures of its CME program (related to financial affairs, legal obligations and human resources) so that its obligations and commitments are met.

MSSNY DECISION-MAKING CRITERIA

RELEVANT TO THE ESSENTIAL AREAS

For each **Element** in the three **Essential Areas**, **criteria** have been established to determine provider compliance. The criteria for each Element are listed below in three levels.

Level 1 requires compliance with nine criteria (see page 4 – Criteria 1 to 3 and 7 to 12). Level 1 is the basic, entry level set of criteria that all new applicants must achieve in order to achieve **Provisional Accreditation**.

Level 2 requires compliance with Level 1 criteria **plus** six additional criteria (see page 4 – Criteria 1 to 15) – which must also be met by accredited providers in order to maintain their **Accreditation** status. Level 2 criteria require the provider to refine its educational interventions and to improve on its ability to meet its own mission. A provider at this level will have a plan in place to improve on their ability to meet their CME mission as identified in the Level 1 criteria. The plan will be implemented and improvements will be underway. The impact of the program improvements will be measured. Educational interventions, of appropriate format, will be designed around the knowledge, strategy or performance issues that underlie the professional practice gaps of the learners. The content of the interventions will be related to the scope of practice of the learners and associated with current desirable physician attributes. This provider is a change agent who is actively engaged in the improvement of the quality of their CME program while facilitating practice-based learning and improvement.

Level 3 requires compliance with Level 2 Criteria **plus** seven additional criteria (see page 4 – Criteria 1 to 22.). Level 3 criteria reward the provider for engaging in the system in which it operates beyond the provision of CME interventions- as a strategic asset to quality and safety initiatives. Level 3 will be the basis for achieving **Accreditation with Commendation**. This provider has mechanisms in place to identify and overcome barriers to physician change and to integrate CME into health care improvement initiatives. This provider does not work in isolation and takes advantage of non-educational strategies to enhance the learning and change process.

Essential Area and Element(s)		Criteria for Compliance
Essential Area 1: Purpose and Mission	The provider must have E 1 Written statement of CME mission, including CME purpose, content areas, target audience, type of activities provided, and expected results of program.	C 1 The provider has a CME mission statement that includes all of the basic components (CME purpose, content areas, target audience, type of activities, expected results) with expected results articulated in terms of changes in competence, performance, or patient outcomes that will be the result of the program
Essential Area 2: Educational Planning	The provider must, E 2.1 Use a planning process(s) that links identified educational needs with a desired result in its provision of all CME activities. E 2.2 Use needs assessment data to plan CME activities. E 2.3 Communicate the purpose or objectives of the activity so the learner is informed before participating in the activity. E 3.3 Present CME activities in compliance with the ACCME/MSSNY's policies for disclosure and commercial support.	C 2 The provider incorporates into CME activities the educational needs (knowledge, competence, or performance) that underlie the professional practice gaps of their own learners. C 3 The provider generates activities/educational interventions that are designed to change competence, performance, or patient outcomes as described in its mission statement. C 4 Eliminated C 5 The provider chooses educational formats for activities/ interventions that are appropriate for the setting, objectives and desired results of the activity. C 6 Provider develops activities/educational interventions in context of desirable physician attributes (e.g., IOM/ACGME Competencies) C 7 The provider develops activities/educational interventions independent of commercial interest (SCS 1, 2 & 6) C 8 The provider appropriately manages commercial support (if applicable, SCS 3). C 9 The provider maintains a separation of promotion from education (SCS 4). C 10 The provider actively promotes improvements in health care and NOT proprietary interests of commercial interest (SCS 5)
Essential Area 3: Evaluation and Improvement	The provider must, E 2.4 Evaluate the effectiveness of its CME activities in meeting identified educational needs. E 2.5 Evaluate the effectiveness of its overall CME program and make improvements to the program.	C 11. The provider analyzes changes in learners (competence, performance, or patient outcomes) achieved as a result of the overall program's activities/educational interventions C 12. Provider gathers data or information and conducts a program-based analysis on degree to which provider's CME mission has been met through conduct of CME activities/educational interventions. C 13. The provider identifies, plans and implements the needed or desired changes in overall program (e.g., planners, teachers, infrastructure, methods, resources, facilities, interventions) that are required to improve on ability to meet the CME mission. C 14. Eliminated C 15. Eliminated
Accreditation with Commendation	In order for an organization to achieve the status Accreditation with Commendation, the provider must demonstrate that it fulfills the following Criteria 16 - 22, in addition to Criteria 1-15.	C 16. The provider operates in a manner that integrates CME into the process for improving professional practice. C 17. The provider utilizes non-education strategies to enhance change as an adjunct to its activities/ educational interventions (e.g., reminders, patient feedback). C 18. The provider identifies factors outside the provider's control that impact on patient outcomes. C 19. The provider implements educational strategies to remove, overcome or address barriers to physician change. C 20. The provider builds bridges with other stakeholders through collaboration and cooperation. C 21. The provider participates within an institutional or system framework for quality improvement. C 22. The provider is positioned to influence the scope and content of activities/educational interventions.