**GUIDE TO THE PROCESS FOR MSSNY REACCREDITATION**

**AN OVERVIEW AND SUBMISSION REQUIREMENTS**

READ ALL INSTRUCTIONS BEFORE BEGINNING EACH PART OF THE ACCREDITATION PROCESS

OVERVIEW AND BACKGROUND INFORMATION

**DEVELOPING YOUR SELF-STUDY FOR REACCREDITATION**

The self-study process provides an opportunity for the accredited provider to reflect on its program of CME. Depending on the size and scope of your CME program, it is your decision which individuals to involve in the process.

**DATA SOURCES USED IN THE REACCREDITATION PROCESS**

Demonstration that the CME Program is compliant with ACCME and MSSNY accreditation requirements is conducted through three primary sources of data:

* **Self-Study Report**

Providers describe the planning and practice(s) related to MSSNY Criteria & Policies as narrative descriptions, attachments, and examples of the implementation of the CME practices described.

* **Accreditation Interview**

Providers have an opportunity to further describe the practices presented in the Self-Study & activity files, and provide clarification as needed, in conversation with a survey team who are CME colleagues.

* **Performance-in-Practice Review**

Documentation review is done to verify CME activities are in compliance with ACCME and MSSNY Criteria & Policies. MSSNY will select activities from the current accreditation term for evidence of performance-in-practice for review. **This is a key component because the activity file must verify what is written in the Self Study and described in the Interview.**

**EXPECTATIONS ABOUT MATERIALS**

Materials submitted to MSSNY, in any format, **must not** contain any untrue statements, omit any necessary material facts, or be misleading, and must fairly present the organization and are the property of the organization.

Materials submitted for accreditation must not include individually identifiable health information, in accordance with the Health Insurance Portability & Accountability Act (HIPAA).

**MISSING OR INCOMPLETE INFORMATION**

Providers meeting all deadlines and submission requirements of the reaccreditation process will receive an accreditation decision from MSSNY. Please note, if MSSNY is unable to render a decision due to missing or incomplete information, MSSNY reserves the right to request additional information, the expenses for which will be borne by the provider.

SCHEDULE OF SUBMISSION OF APPLICATION MATERIALS AND TIMELINE

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| --- | --- |
| **Date** | **Milestone** |
| **12 months prior to accreditation expiration date** | MSSNY emails notification to Provider which includes:1. Guide to Application for Accreditation
2. Self-Study Report Outline
3. Structured Abstract
4. Accreditation Timeline and Provider Milestones
 |
| **11 months prior to accreditation expiration date** | Provider deadline for submission of confirmation of Intent to Apply for Reaccreditation |
| **9 months prior to accreditation expiration date** | Provider deadline1. PARS activity entries up to date
2. Reaccreditation fee, if not paid
3. Submission of date preferences (if not received, MSSNY will decide date)
 |
| **8 months prior to accreditation expiration date** | MSSNY informs Provider which activity files will be reviewed. |
| **3-4 months prior to accreditation expiration date** | Survey occurs. |
| **The month accreditation is due to expire** | MSSNY Subcommittee on Surveys meeting |
| **Within two weeks** | Provider receives accreditation decision from MSSNY |

ACTIVITY ENTRY

Providers can expect MSSNY to select a representative sample of CME activities from across the accreditation term. Generally, MSSNY selects two activities per accreditation year. Therefore, provisionally accredited providers with a two-year term will be asked to document two activities, providers with a four-year term will have eight activities reviewed, and those with a six-year term will provide evidence for 12 activities. Activities are selected from the ACCME Program and Activity Reporting System (PARS), and providers will be given instructions on how to export the activity list. Providers will need to ensure that all activities for the accreditation period are entered into PARS and that entries are complete and up to date, by the deadline on the “Accreditation Timeline and Provider Milestones” for the provider’s reaccreditation cohort.

FORMATTING SELF-STUDY REPORT AND PERFORMANCE-IN-PRACTICE ACTIVITY FILES

PERFORMANCE IN PRACTICE is the review of activity files which show how you plan & implement your activities in accordance with the CME criteria. MSSNY reviews PARS (or activity lists of initial applicants) and requests files be submitted. Files are reviewed for evidence of planning & implementation of CME in accordance with accreditation criteria

* Activities are selected from across the accreditation term & types of activities produced.
* You may also provide an additional activity of your choosing if the sample selected by MSSNY does not capture best practices or accurately reflect your CME program. Contact MSSNY for details.

HOW TO PREPARE ACTIVITY FILES FOR REVIEW

* Review the Accreditation Timeline and Provider Milestones to determine when to submit activity files.
* If, after reviewing the list of selected activities, an error such as incorrect activity date or format is noted, please notify MSSNY via email and the selection will be updated.
* Do not send an entire working file. Include only the descriptions and attachments the structured abstract specifies.

Self-study report (SSR) and performance-in-practice (PiP) activity files are to be submitted electronically, as PDFs. Please format the self-study report as a single bookmarked PDF, using the self-study outline from MSSNY and entering descriptions and attachments as directed. Please ensure that the pages are numbered. Attachments can be grouped together or interleafed with the criteria/requirements they support, so long as they are clearly identified and easily navigated. Please create a single bookmarked PDF for each PiP file, including the completed structured abstract and the attachments described on the third page of the abstract. When using a document in support of multiple "attachment" categories, you may include a header that lists the attachment numbers that apply.

For internet enduring materials, please provide log-in and password information to allow the reviewers to access the online activity.

**BE VERY CAREFUL WITH N/A.** Required criteria should NEVER be listed as “not applicable.”

THE SELF-STUDY REPORT

You will provide narrative descriptions, documents, and examples to present the practice(s) your organization utilizes using the self-study report to demonstrate that your CME program is in compliance with MSSNY/ACCME requirements. Providers should ensure that they are responding to the questions and providing evidence as directed. Recognizing that the self-study outline has changed, please do not carry over elements of old self-study reports that are no longer required. Information and documentation from the activity files should not be replicated in the self-study report, beyond what is being requested in the self-study report outline.

MSSNY’S ACCREDITATION INTERVIEW

The accreditation interview offers the provider the opportunity to discuss its CME program with qualified surveyors. MSSNY surveyors will be assigned to review the self-study and performance-in-practice materials you submit to MSSNY. They will meet with representatives of your CME program to engage in a dialogue about your organization’s policies and practices that ensure compliance with the Accreditation Criteria, including the Standards for Commercial Support and Accreditation Policies.

At the interview, the surveyors will seek clarification about any questions they may have regarding the self-study materials you submitted to MSSNY. You can expect MSSNY surveyors to: 1) conduct their interactions with providers in a professional manner, 2) be familiar with your materials and ACCME/MSSNY Accreditation Criteria and Policies, and 3) communicate clearly and effectively with providers without offering consultative advice or feedback regarding compliance or the expected outcome of the accreditation review. Interviews are scheduled for two hours in length; however duration varies.

MSSNY uses video conferencing as its standard accreditation interview format. You will be asked to provide your first and second choice date for the interview, and if possible, a few back-up dates. MSSNY will make every effort to schedule either your first or second choice date; however, that may not always be possible. If MSSNY cannot accommodate the dates provided, it will offer a new date or ask for additional dates from you.

MSSNY’S DECISION MAKING PROCESS

Your organization’s compliance findings and the outcome of the accreditation review are determined by MSSNY based on the data and information collected in the accreditation process.

The data and information are analyzed and synthesized by the Survey Team. The Survey Team makes recommendations on findings and status that are forwarded for action to MSSNY’s Subcommittee on Surveys. Once the recommendations have been accepted by the Subcommittee on Surveys, all accreditation decisions are ratified by the full MSSNY Continuing Medical Education Committee, which meets four times each year (March, June, September, and December). Accreditation decision letters are sent to providers via email.

This multi-tiered system of review provides checks and balances necessary to ensure fair and accurate decisions. The fairness and accuracy are also enhanced by MSSNY's use of a criterion-referenced decision-making system.

* Each Provider will be notified of the accreditation decision by mail within two weeks of the Continuing Medical Education Committee meeting. Decisions are rendered in March, June, September, and December.
* Please do not contact the MSSNY office for results, as staff cannot provide any information either over the phone or via email.
* Please do not contact survey team members, as they cannot provide any information on your accreditation status.