

# A. Webb Roberts Center for Continuing Medical Education

of Baylor Health Care System, Dallas

3500 Gaston Avenue • Dallas, Texas 75246 • Tel: 214.820.2317



## STEP-BY-STEP CME PLANNING PROCESS

The purpose of this worksheet is to document compliance with the requirements of the Accreditation Council for Continuing Medical Education (ACCME), the national organization that accredits the A. Webb Roberts Center of Baylor Health Care System, Dallas (AWRC) to provide CME for physicians.

This interactive planning process for CME activities is designed to assist the planner in working through the AWRC-required educational **activity** planning process. By planning educational activities in this manner, the education will meet exacting standards of quality.

Physician Course Director	
Title of Course Director	
Street Address	
City, State, Zip	
Phone Number	
Fax Number	
Email Address	

Contact Person	
Organization (include Department)	
Phone Number	
Fax Number	
Email Address	
Street Address	
City, State, Zip	

### Identification of Educational Activity

Name of Activity	
Date(s)	
Activity Location	

### Individuals in a Position to Control Activity Content (other than speakers/authors)

Name	Role	Email	Phone

<sup>1</sup>ACCME Standards for Commercial Support<sup>SM</sup> located in the appendix.

<sup>2</sup>A commercial interest is any entity producing, marketing, reselling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests.

<sup>3</sup>Quality gap defined: The difference between present treatment success rates and those thought to be achievable using best practice guidelines. Professional practice gap defined: The difference between actual and ideal performance and/or patient outcomes.

<sup>4</sup>Competence is a combination of knowledge and skills applied to judgment in practice.

<sup>5</sup>Performance is what one actually does in practice and based on one's competence but modified by system factors and circumstances.

<sup>6</sup>List of physician competencies located in the appendix.

--	--	--	--

**AWRC Mission Statement**

As a planner for an AWRC activity, please observe and attest that this activity fits within the Mission of the AWRC, as follows:

The mission of AWRC is to provide lifelong learning for physicians based on documented needs, utilizing evidence-based medicine fundamentals with the ultimate goal of sustaining and improving the quality of patient care.

In what specific way does this activity support the AWRC mission statement? \_\_\_\_\_

As a planner for an AWRC activity, please observe and attest that this activity meets the definition of CME, as follows:

Continuing medical education consists of educational activities which serve to maintain, develop, or increase the knowledge, skills and professional performance and relationships that a physician uses to provide services for patients, the public, or the profession. The content of CME is that body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public.

In what specific way does this activity support the AWRC mission statement? \_\_\_\_\_

A couple of things to consider as you plan this activity.

**PLANNERS MUST REMEMBER TO INTEGRATE THE ACCME STANDARDS FOR COMMERCIAL SUPPORT<sup>SM,1</sup> INTO THE PLANNING PROCESSES AT EVERY STEP. THIS IS ACCOMPLISHED BY SYSTEMATICALLY ENSURING:**

- o EVERY COMPONENT OF THE PLANNING PROCESS WAS COMPLETED INDEPENDENT OF INFLUENCE OR DIRECTION FROM COMMERCIAL INTERESTS<sup>2</sup>.
- o EVERYONE WHO IS IN A POSITION TO CONTROL CONTENT MUST DISCLOSE ALL RELEVANT FINANCIAL RELATIONSHIPS WITH A COMMERCIAL INTEREST.
- o ALL CONFLICTS OF INTEREST MUST BE RESOLVED PRIOR THE EDUCATION.

**Step 1: For your educational activity, what is the quality and/or professional practice gap(s)<sup>3</sup> to be addressed?**

---



---

**Step 2: Is it a gap in physician competence<sup>4</sup>, performance<sup>5</sup> or patient outcomes?**

---

**Step 3: List the sources used to identify the quality/practice gap. (What drove the decision to plan this activity?) Include documentation.**

Source (Where you found the need?)	Documentation (We want a copy.)
 Research Findings	 Attach data from study
 Evaluation summaries from previous activities	 Attach evaluation summary

<sup>1</sup>ACCME Standards for Commercial Support<sup>SM</sup> located in the appendix.  
<sup>2</sup>A commercial interest is any entity producing, marketing, reselling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests.  
<sup>3</sup>Quality gap defined: The difference between present treatment success rates and those thought to be achievable using best practice guidelines. Professional practice gap defined: The difference between actual and ideal performance and/or patient outcomes.  
<sup>4</sup>Competence is a combination of knowledge and skills applied to judgment in practice.  
<sup>5</sup>Performance is what one actually does in practice and based on one's competence but modified by system factors and circumstances.  
<sup>6</sup>List of physician competencies located in the appendix.


**Step 4: Identify the physician target audience. (The target audience should be those in the best position to impact the quality/practice gap.)**

Target Audience	Specialty
Physician	Internal Medicine

List any potential barriers facing the target audience in addressing the quality/practice gap.

---



---

**STEP 5: Based on the quality/practice gap identified as the reason for this activity, what are the desired results of the activity? Said differently: What is this activity designed to change/accomplish? (The desired result defines the teaching goal(s) for this activity. These teaching goals can later be used to measure the effectiveness of this educational activity.)**

Quality/Practice Gap	Desired Result/Change

**Step 6: Based on the desired results of the activity, what are the objectives of the activity?**

These are the stepping stones (i.e., teaching points) to get the learner from the identified quality/practice gap to the desired result/change. The teaching points are best written from the perspective of what you expect the learner to apply in the practice setting based on the content of the activity. Each desired result/change will have related objectives.

Desired Result/Change	Objective(s)
	🍏
	🍏
	🍏
	🍏
	🍏

<sup>1</sup>ACCME Standards for Commercial Support<sup>SM</sup> located in the appendix.  
<sup>2</sup>A commercial interest is any entity producing, marketing, reselling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests.  
<sup>3</sup>Quality gap defined: The difference between present treatment success rates and those thought to be achievable using best practice guidelines. Professional practice gap defined: The difference between actual and ideal performance and/or patient outcomes.  
<sup>4</sup>Competence is a combination of knowledge and skills applied to judgment in practice.  
<sup>5</sup>Performance is what one actually does in practice and based on one's competence but modified by system factors and circumstances.  
<sup>6</sup>List of physician competencies located in the appendix.

**Step 7: Are there IOM, ACGME or other competencies<sup>6</sup> related to this quality/practice gap?**

---



---

**Step 8: How will this activity be delivered to the target audience?**

Type(s) of modalities you are recommending for this activity (check all that apply):

- Live presentation    
  Live Internet    
  DVD/CD-ROM    
  Monograph  
 Enduring Internet    
  Case Studies    
  Video Conference    
  Other \_\_\_\_\_

How often? \_\_\_\_\_

---

**Step 9: What type(s) of evaluation method(s) will you use to know if the activity was effective at meeting the need and creating change in knowledge, competence and/or performance?**

The AWRC has realized the importance of measuring the effectiveness of sponsored **activities**. This evaluative process is carried out in several ways. At the conclusion of the **activity**, the participants and course director evaluate the **activity** to assess the following: (1) overall quality of the **activity**; (2) learner satisfaction; (3) accomplishment of learning objectives; (4) applicability to the practice environment; (5) appearance of bias in the instructional process; and, (6) quality of the faculty.

The AWRC periodically performs **post-activity** outcome measurement. The AWRC will survey a designated percentage of the learners three months post-activity to determine the degree to which the desired results have been implemented into clinical practice. Please prepare at least one **post-activity** question for each desired result/change.

Desired Result/Change	Outcomes Question
Appropriately screen for diabetes in 100% of my patient population	Have you implemented diabetic screening protocol? If no, what are the barriers?

**Step 10: Additional considerations:**

**PLANNERS MUST REMEMBER TO INTEGRATE THE ACCME STANDARDS FOR COMMERCIAL SUPPORT<sup>SM,1</sup> INTO THE PLANNING PROCESSES AT EVERY STEP. THIS IS ACCOMPLISHED BY SYSTEMATICALLY ENSURING:**

- o **THE ACTIVITY PROMOTES IMPROVEMENTS OR QUALITY IN HEALTHCARE, AND NOT PROPRIETARY INTERESTS OF A COMMERCIAL INTERESTS<sup>2</sup>.**

<sup>1</sup>ACCME Standards for Commercial Support<sup>SM</sup> located in the appendix.

<sup>2</sup>A commercial interest is any entity producing, marketing, reselling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests.

<sup>3</sup>Quality gap defined: The difference between present treatment success rates and those thought to be achievable using best practice guidelines. Professional practice gap defined: The difference between actual and ideal performance and/or patient outcomes.

<sup>4</sup>Competence is a combination of knowledge and skills applied to judgment in practice.

<sup>5</sup>Performance is what one actually does in practice and based on one's competence but modified by system factors and circumstances.

<sup>6</sup>List of physician competencies located in the appendix.

- EVERYONE WHO IS IN A POSITION TO CONTROL CONTENT MUST DISCLOSE ALL RELEVANT FINANCIAL RELATIONSHIPS WITH A COMMERCIAL INTEREST.
- ALL CONFLICTS OF INTEREST MUST BE RESOLVED PRIOR TO THE EDUCATION.

Based on the physician target audience and the quality/practice gap that is being addressed, what is the right content to cover? (What are your specific topics?)

---



---

How does the content relate to the scope of practice of the physician target audience?

---



---

Does the content also relate to specific patient groups? If yes, what specific patient groups?

---



---

Should activity contain content outside the clinical topic?

---



---

*Thank you for your diligence in planning a CME **activity** of excellence.  
 Your time and expertise is greatly appreciated by the staff of AWRC.  
 If you have questions about this planning process,  
 please phone us at 214/820.2317.*

<sup>1</sup>ACCME Standards for Commercial Support<sup>SM</sup> located in the appendix.

<sup>2</sup>A commercial interest is any entity producing, marketing, reselling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests.

<sup>3</sup>Quality gap defined: The difference between present treatment success rates and those thought to be achievable using best practice guidelines. Professional practice gap defined: The difference between actual and ideal performance and/or patient outcomes.

<sup>4</sup>Competence is a combination of knowledge and skills applied to judgment in practice.

<sup>5</sup>Performance is what one actually does in practice and based on one's competence but modified by system factors and circumstances.

<sup>6</sup>List of physician competencies located in the appendix.

## Step 11: Prepare Brochure and Handout Materials

All promotional materials, (i.e., brochures, email notices, faxes, etc.) designed to recruit attendance for a CME activity must use specific language as set forth by the national accrediting organization (ACCME) and the AMA. The AWRC is required to approve all promotional and syllabus materials prior to printing. Please adhere to the following guidelines in designing both promotional and syllabus materials.

### Check When Included

- State target audience, including specialties. (*From Step 4.*)
- State the desired result/change and/or learning objectives (From Step 5 and 6.)
- **Credit Designation Statement**

The A. Webb Roberts Center for Continuing Medical Education of Baylor Health Care System, Dallas designates this educational activity for a maximum of <number of credits> AMA PRA Category 1 Credits(s)<sup>TM</sup>. Physicians should only claim credit commensurate with the extent of their participation in the activity.
- **Accreditation Statement**
  - Directly Sponsored**

The A. Webb Roberts Center for Continuing Medical Education of Baylor Health Care System, Dallas is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.
  - Jointly Sponsored**

This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the A. Webb Roberts Center for Continuing Medical Education of Baylor Health Care System, Dallas and (name of non-accredited provider). The A. Webb Roberts Center for Continuing Medical Education of Baylor Health Care System, Dallas is accredited by the ACCME to provide continuing medical education for physicians.
- **Acknowledge Commercial Support**

An independent medical education grant was received from <insert name(s) of commercial interest>.
- **Faculty Disclosure** (*Should be in writing in syllabus materials.*)

As a provider accredited by the ACCME, it is the policy of the A. Webb Roberts Center for Continuing Medical Education of Baylor Health Care System, Dallas to require the disclosure of the existence of any relevant financial relationship of an individual in a position to control activity content has with a commercial interest. This disclosed information must be declared to the audience, as follows: <insert name of individual and the nature of and company with which the relevant financial relationship exists and/or insert name of individual and that no relevant financial relationship exists>. NOTE: Disclosure and related declaration of relevant financial relationships must be made for all individuals in a position to control content (faculty, planner(s), author(s), etc.).
- **Unlabeled/Unapproved Uses Notice**

In accordance with the ACCME Essential Areas and policies, the audience must be informed when the discussion of unlabeled/unapproved uses occurs. It is the responsibility of the faculty to make this

<sup>1</sup>ACCME Standards for Commercial Support<sup>SM</sup> located in the appendix.

<sup>2</sup>A commercial interest is any entity producing, marketing, reselling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests.

<sup>3</sup>Quality gap defined: The difference between present treatment success rates and those thought to be achievable using best practice guidelines. Professional practice gap defined: The difference between actual and ideal performance and/or patient outcomes.

<sup>4</sup>Competence is a combination of knowledge and skills applied to judgment in practice.

<sup>5</sup>Performance is what one actually does in practice and based on one's competence but modified by system factors and circumstances.

<sup>6</sup>List of physician competencies located in the appendix.

disclosure to the audience at the time of the discussion.

□ **Activity** agenda, including timeframe for each presentation, presentation topic, presenting faculty

**Step 10: Identify Commercial Supporters**

The ACCME and the AMA rigorously regulate the funding for a CME **activity** under the guidance of the *ACCME Standards for Commercial Support*<sup>SM,1</sup>. Please know the ACCME requirements related to commercial support of CME are very strict; and, therefore, regretfully violation of the *ACCME Standards for Commercial Support*<sup>SM,1</sup> will result in withdrawal of credit. Our staff will manage the commercial support aspect of the **activity**.

Does this **activity** involve any support from any commercial interests?

**Yes**

**No**

If yes, attach a list of companies with contact information.

**Approval**

---

*Signature of Course Director*

*Date*

Please return completed form to:

A. Webb Roberts Center for Continuing Medical Education  
Baylor University Medical Center  
Attn: NaBrina Webb  
3500 Gaston Avenue  
Dallas, Texas 75246

Or email to:

Phone: (214) 820-2317  
Fax: (214) 820-4169

This **activity** is approved for \_\_\_ *AMA PRA Category 1 Credit(s)*.<sup>TM</sup>

---

*Signature of Dean, AWRC*

*Date*

<sup>1</sup>ACCME Standards for Commercial Support<sup>SM</sup> located in the appendix.

<sup>2</sup>A commercial interest is any entity producing, marketing, reselling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests.

<sup>3</sup>Quality gap defined: The difference between present treatment success rates and those thought to be achievable using best practice guidelines. Professional practice gap defined: The difference between actual and ideal performance and/or patient outcomes.

<sup>4</sup>Competence is a combination of knowledge and skills applied to judgment in practice.

<sup>5</sup>Performance is what one actually does in practice and based on one's competence but modified by system factors and circumstances.

<sup>6</sup>List of physician competencies located in the appendix.