

Lee Health Continuing Medical Education Activity Application

Introduction

Please print and complete the CME application in its entirety. This document links each section with the specific Florida Medical Association and Accreditation Council for Continuing Medical Education (ACCME) requirement for CME activities (note, FMA accredits Lee Memorial Health System to provide continuing medical education for physicians and other healthcare professionals). Dr. Eric Goldsmith and Dr. Alan Tannenbaum have established these guidelines for CME activities.

Before Sending Your CME Application

Use this page as a guide for submitting your application, including electronically filing your application. ACCME criteria and policies are referenced on each designated form. **Do not return this page with your application, *this is your worksheet.***

Required Documents for CME Committee Approval	
	Completed CME Applications must be received by CME Department <u>no less than 45 days prior to the event when requesting credits only, or 60 days if the CME Department is involved in the planning process.</u> If there are any issues with the required time frame, please contact the CME department.
	Signed Disclosure of Relevant Financial Relationships forms – Speakers, moderators, presenters, Planning Committee Chair, and Planning Committee must each sign and submit a Disclosure form with this application.
	CVs for All Faculty – e.g. Planning Committee Chair, Planning Committee members, speaker(s)
	Proposed activity budget and any grant agreements – Who is funding the activity?
Required at least 14 days prior to activity	
	Program Agenda, Brochure or Flyer – Please see “Required Elements for Syllabi/Brochures” document
	Presentation Content – “Sources for Needs Assessment”, speaker slides/notes, references, bibliography, guidelines, surveys, etc. – Used to verify program content and “best practices”. Attaching full articles not required, but attaching abstract may speed up the approval process if references need to be reviewed.
After the Event (within 14 days)– Required Documents	
	Completed Participant Attendance Forms – To receive CME credit, attendance must be on the Sign-In sheets provided prior to the activity. Names and license numbers must be legible to receive credit. Moderator signature must be on the sign in sheets.
	Completed Verification of Disclosure at Activity form – This form must be signed by any physician attendee at the time of activity. This form verifies that the speaker either had nothing to disclose, or disclosed a potential conflict of interest.
	Completed Participant Evaluation Forms – To receive CME credit, attendees must hand in Evaluation Forms, provided prior to the activity.
	Outcome Material – Pre- and/or Post Tests, surveys and/or assessments.
	Planning Materials – Any pertinent documentation of planning
	The income and expense statement for this activity that details the receipt and expenditure of all of the commercial support (if applicable), copies of all grant checks or exhibit checks, documentation of honoraria, food costs, etc. (c8, SCS 3.4-3.6)

Please complete the application, attach necessary documentation and then email documents to tracy.ferrer@leehealth.org If you need further clarification, please do not hesitate to contact the CME department by email: CME@leehealth.org.

Reviewed by CME Committee Date: _____
Credits™

Approved for _____ AMA PRA Category 1

Not Approved Reason: _____

Section 1: Activity Description

Activity Information			
Title:		Speaker:	
This activity is presented by the Department(s) of:		Division(s) of:	
Date:	Time:	Location:	
Date:	Time:	Location:	
Who will be the moderator for the activity? Moderator will be responsible for sign-ins, evaluations and certificates, and Verification of Disclosure at Activity			
Name:		Credentials:	

"Type of Activity" helps us to meet ACCME Criteria 5: *The provider chooses educational formats for activities/interventions that are appropriate for the setting, objectives, and desired results of the activity.*

Type of Activity (select all that apply) ^{C5}	
<input type="checkbox"/>	Course (symposium, workshop, conference, etc.) – <i>Note, Agenda with speakers, topics, times must be provided.</i>
<input type="checkbox"/>	Internet, Live
<input type="checkbox"/>	Regularly Scheduled Series ¹ (grand rounds, tumor boards, etc.) Frequency: <input type="checkbox"/> 2/week <input type="checkbox"/> 1/week <input type="checkbox"/> 2/month <input type="checkbox"/> 1/month <input type="checkbox"/> Quarterly <input type="checkbox"/> Other:
<input type="checkbox"/>	Enduring Materials (online interactive educational module, recorded presentation, podcast, etc.)
Educational Design/Methodology ^{C5}	
<input type="checkbox"/>	Didactic lecture
<input type="checkbox"/>	Panel discussions
<input type="checkbox"/>	Roundtable discussions
<input type="checkbox"/>	Q & A sessions
<input type="checkbox"/>	Case Presentations
<input type="checkbox"/>	Simulation/skills labs
<input type="checkbox"/>	Other, specify:
Target Audience	
Please list the target audience:	

Sponsorship	
<input type="checkbox"/>	Directly sponsored (LMHS department works with LMHS CME)
<input type="checkbox"/>	Jointly sponsored (LMHS CME works with non-FMA accredited provider) – List Company Name(s):

Credit Type Requested	
<input type="checkbox"/>	AMA PRA Category 1 Credits™ <input type="checkbox"/> 1.0 <input type="checkbox"/> 2.0 <input type="checkbox"/> Other:
<input type="checkbox"/>	Others:

¹ Regularly Scheduled Series are daily, weekly, monthly or quarterly CME activities that are primarily planned by and presented to the organization's professional staff.

Section 2: Planning

Note, each Planning Committee Member is required to complete a LMHS CME Disclosure of Relevant Financial Relationships form before the CME application and planning worksheet will be approved.

Planning Committee Chair – The physician or basic scientist who has overall responsibility for planning, developing, implementing, and evaluating the content and logistics of a certified activity.

Name:	Degree(s):	
Title:	Affiliation:	Department:
Phone:	Fax:	Email:

Administrative Coordinator/ CME Associate – The individual responsible for the operational and administrative support.

Name:	Email:	
Title:	Phone:	Fax:

Planning Committee – *In addition to the Planning Committee Chair, and/or CME associate,* list the persons chiefly responsible for the design and implementation of this activity. Use additional sheets in necessary.

Name:	Degree(s):	
Title:	Affiliation:	Email:
Name:	Degree(s):	
Title:	Affiliation:	Email:

ACCME Criteria 7: The provider develops activities/educational interventions independent of commercial interests. (SCS 1, 2, and 6).

Planning Process c7

1. Who identified the speakers and topics: Planning Committee Chair, Planning Committee Member, Other
(provide names):
2. What criteria were used in the selection of speakers (select all that apply)? Subject matter expert
 Excellent teaching skills/effective communicator Experienced in CME Other:
3. Were any employees of a pharmaceutical company and/or medical device manufacturer involved with the identification of speakers and/or topics? No Yes, please explain:

Section 3: Needs Assessment and Educational Design

ACCME Criteria 2: The provider incorporates into CME activities the educational needs (knowledge, competence, or performance) that underlie the professional practice gaps of their own learners. Documentation must be provided for any source checked. Note, sources used must clearly demonstrate how the need referenced is connected to the professional practice gap(s) and educational need(s). The below examples highlight the identified gaps and needs of the sample activity. Note, you do not need to add the document icons to your printed CME application – you can include the documents as attachments to the email when submitting the application form.

Needs Assessment Data and Sources (select 2 at minimum) c2

Please indicate how the need for this activity was brought to your attention. Select all that apply and provide supportive documentation for all boxes checked. If you cannot provide documentation, do NOT check that source.

	Continuing review of changes in quality of care as revealed by medical audit or other patient care reviews.
	Formal or informal requests or surveys of the target audience, faculty or staff.
	Discussion in Departmental meetings.
	Data from peer-reviewed journals, government sources, consensus reports.
	New technology, methods of diagnosis/treatment.
	Legislative, regulatory or organizational changes affecting patient care.
	DNV Accreditation Agency
	Other, please specify:

ACCME Criteria 3: *The provider generates activities/educational interventions that are designed to change competence, performance, or patient outcomes as described in its mission statement.* The below information is designed to assist you with completing the table on the next page (p. 5), "Identification of Professional Practice Gaps, Educational Needs, Learning Objectives, and Desired Results".

Alignment with LMHS CME Mission Statement c1, c3 CME activities should be designed to change competence, performance, or patient outcomes as described in the Lee Memorial Health System CME Mission Statement. *"The purpose of the Continuing Medical Education program is to provide ongoing, easily accessible, current and relevant educational offerings that meet the needs of physicians and allied health professionals in Lee County and surrounding counties. The CME program strives to provide innovative, evidence-based education that will increase knowledge, skills and professional performance to promote the delivery of safe and effective health care and improved the health status of patient in SW Florida. Due to the diversity of physician specialties, there is a general focus for education across the specialty spectrum. The educational presentations from local physicians, national faculty and allied health professionals will be of sufficient merit to fully comply with the requirements mandated by the Accreditation Council for Continuing Medical Education (ACCME) for accredited programs."*

How does this activity align with the mission of LMHS CME? Check all that apply.

<input type="checkbox"/>	Designed to assist physicians and healthcare professionals gain competency and improve performance in order to become better able to provide higher quality care in order to enhance the health status of the population.
<input type="checkbox"/>	Designed to assist in the dissemination of new medical knowledge.
<input type="checkbox"/>	Collaborates on the design of interdisciplinary educational strategies to improve patient safety and to facilitate patient-centered care.
<input type="checkbox"/>	Designed to optimize appropriate prescribing behaviors.
<input type="checkbox"/>	Promotes the practice of evidence-based medicine.
<input type="checkbox"/>	Other (please explain):

Identifying Gaps, Needs, Objectives, and Results

What is a practice gap?

A professional practice gap is the difference between actual and ideal performance. Professional practice gaps are measured in terms of:

- Knowledge: Being aware of what to do
- Competence: Being able to apply knowledge, skills, and judgment in practice (knowing how to do something)
- Performance: Having the ability to implement the strategy or skill (what one actually does)

How are gaps identified?

- A needs assessment looks at the gaps from a variety of angles and perspectives and is a tool for planning the activity.
- The needs assessment helps determine the current situation, state of skills, knowledge, abilities, and/or performance (what should be vs. what is, ideal vs. real, where we are vs. where we want to be).

What is the difference between a gap and a need?

Gaps are the difference between ACTUAL (what is) and IDEAL (what should be) in regards to performance and/or patient outcomes. Educational needs are defined as "the need for education on a specific topic identified by a gap in professional practice."

How do I formulate learning objectives?

After looking at the practice gaps and educational needs, what do you want the learner to be able to accomplish after the activity?

- Learning objectives are the take-home messages that bridge the gap between the identified need/gap and the desired result.
- Note: Learning objectives should be measurable and should begin with a verb that can be measured ("understand" should NOT be used as one's understanding cannot be readily measured).

What is a desired result?

Desired results are what you expect the learner to do in his/her practice setting. How will the information presented impact the clinical practice and/or behavior of the learner? Is the activity designed to:

- Give participants new abilities/strategies (change competence)?
- Help participants modify their practice (change performance)?
- Help improve patient outcomes?

Note, it is important for the planning committee to be involved with identification of the gaps and needs as well as development of the objectives and results.

Identification of Professional Practice Gaps, Educational Needs, Learning Objectives, and Desired Results (minimum of 3 total must be identified for each CME activities. For RSS and multi-CME activities, list global objectives for the series) ^{c2, c3}

Professional Practice Gap	Educational Need	This is a gap/need of: (check all that apply)	Learning Objective	Desired Result
		<input type="checkbox"/> Knowledge <input type="checkbox"/> Competence <input type="checkbox"/> Performance <input type="checkbox"/> Patient Outcomes		
		<input type="checkbox"/> Knowledge <input type="checkbox"/> Competence <input type="checkbox"/> Performance <input type="checkbox"/> Patient Outcomes		
		<input type="checkbox"/> Knowledge <input type="checkbox"/> Competence <input type="checkbox"/> Performance <input type="checkbox"/> Patient Outcomes		

ACCME Criteria 6: *The provider develops activities/educational interventions in the context of desirable physician attributes [e.g., Institute of Medicine (IOM) competencies, Accreditation Council for Graduate Medical Education (ACGME) Competencies].*

Desirable Physician Attributes/Core Competencies (select 1 at minimum) ^{c6}

CME activities should be developed in the context of desirable physician attributes. Please check all American Board of Medical Specialties (ABMS)/Accreditation Council for Graduate Medical Education (ACGME) or Institute of Medicine (IOM) Core competencies that will be addressed in this activity.

	Patient Care and Procedural Skills
	Medical Knowledge: established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social behavioral) sciences and the application of this knowledge to patient care.
	Practice-based Learning and Improvement: involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care.
	Interpersonal and Communication Skills: that result in 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 patient population.
	Systems-based Practice: actions that demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.
	Provide Patient-centered Care: identify, respect, and care about patients' differences, values, preferences, and expressed needs; listen to, clearly inform, communicate with, and educate patients; share decision making and management; and continuously advocate disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health.
	Work in Interdisciplinary Teams: cooperate, collaborate, communicate and integrate care teams to ensure that care is continuous and reliable.
	Employ Evidence-based Practice: integrate best research with clinical expertise and patient values for optimum care, and participate in learning and research activities to the extent feasible.
	Apply Quality Improvement: identify errors and hazards in care – Understand and implement basic safety design principles such as standardization and implications; continually understand and measure quality of care in terms of structure, process and outcomes in needs; and design and test interventions to change processes and systems of care, with the objective of improving quality.
	Utilize Informatics: communicate, manage knowledge, mitigate error, and support decisions making using information technology.

Other Desirable Physician Attributes – Interprofessional Education Collaborative			
	Values/Ethics for Interprofessional Practice		Interprofessional Communication
	Roles/Responsibilities		Teams and Teamwork
	Other Competencies – Competencies other than those listed were addressed:		

ACCME Criteria 18: *The provider identifies factors outside the provider's control that impact on patient outcomes.*
 ACCME Criteria 19: *The provider implements educational strategies to remove, overcome or address barriers to physician change.*

Identified Barriers (select 1 at minimum) <small>C18, C19</small>			
	Lack of time to assess or counsel patients		Lack of consensus on professional guidelines
	Lack of administrative support/resources		Cost
	Insurance/reimbursement issues		No perceived barriers
	Patient compliance issues		Other, specify:
Please describe how you will attempt to address these identified barriers in the educational activity:			

ACCME Criteria 16: *The provider operates in a manner that integrates CME into the process for improving professional practice. These are provided to the learners of a CME activity, but do not receive additional CME credit.*

Other Educational Strategies <small>C16</small>	
Other educational strategies could be used to enhance change in your learners as an adjunct to this activity. Examples include patient surveys, patient information packets, email reminders to the learners (summary points from the lecture, new information), posters throughout the hospital, department newsletters, etc.	
What other educational strategies will you include in order to enhance your learners' change as an adjunct to this activity?	

ACCME Criteria 20: *The provider builds bridges with other stakeholders through collaboration and cooperation.. There are many initiatives occurring within LMHS as well as outside of LMHS that should be explored; partnering internally and/or externally is a way to share resources, expertise, etc.*

Building Bridges with Other Stakeholders <small>C20</small>	
Occasionally there are other internal and/or external stakeholders working on similar issues that LMHS can partner with.	
Are there other initiatives within LMHS working on this issue (e.g. IPE, Academic Affairs)? <input type="checkbox"/> No <input type="checkbox"/> Yes, Identify who: If yes, could they be included in the development and/or execution of this activity? <input type="checkbox"/> No <input type="checkbox"/> Yes, in what ways:	
Are there external stakeholders working on this issues (e.g. local/national organizations)? <input type="checkbox"/> No <input type="checkbox"/> Yes, identify who: If yes, could they be included in the development and/or execution of this activity? <input type="checkbox"/> No <input type="checkbox"/> Yes, in what ways:	

ACCME Criteria 3: *The provider generates activities/educational interventions that are designed to change competence, performance, or patient outcomes as described in its mission statement.*

ACCME Criteria 11: *The provider analyzes changes in learners (competence, performance, or patient outcomes) achieved as a result of the overall program's activities/educational interventions.*

Evaluation and Outcomes <small>C3, C11</small>		
How will you measure if changes in competence, performance or patient outcomes have occurred? Place an "X" next to all that apply; note, you may be asked to provide summary data for the evaluation methods selected.		
Knowledge/Competence		
<input type="checkbox"/>	Evaluation form for participants (required)	<input type="checkbox"/> Physician and/or patient surveys
<input type="checkbox"/>	Audience response system (ARS)	<input type="checkbox"/> Other, specify:
<input type="checkbox"/>	Customized pre and post-test	<input type="checkbox"/>
Performance		
<input type="checkbox"/>	Adherence to guidelines	<input type="checkbox"/> Chart audits
<input type="checkbox"/>	Case-based studies	<input type="checkbox"/> Direct observations
<input type="checkbox"/>	Customized follow-up survey/interview/focus group about actual change in practice at specific intervals	<input type="checkbox"/> Other, specify:
Patient/Population Health		
<input type="checkbox"/>	Observe changes in health status measures	<input type="checkbox"/> Obtain patient feedback and surveys
<input type="checkbox"/>	Observe changes in quality/cost of care	<input type="checkbox"/> Other, specify:
<input type="checkbox"/>	Measure mortality and morbidity rates	<input type="checkbox"/>

ACCME Criteria 8: *The provider appropriately manages commercial support (Standards of Commercial Support 3).*
ACCME Criteria 9: *The provider maintains a separation of promotion from education (Standards of Commercial Support 4).*
ACCME Criteria 10: *The provider actively promotes improvements in health care and NOT proprietary interests of a commercial interest (Standards of Commercial Support 5).*

Section 4: Additional Information

Support and Exhibits <small>C8, C9, C10</small>
Will this activity receive commercial support (financial or in-kind grants or donations) from a company such as a pharmaceutical or medical device manufacturer? <i>Note, exhibit fees are not considered commercial support.</i> <input type="checkbox"/> No <input type="checkbox"/> Yes and I have read and agree to abide by ACCME Standards for Commercial Support .
Will vendor/exhibit tables be allow at this activity? <input type="checkbox"/> No <input type="checkbox"/> Yes
Please note, following the activity you will need to submit the income and expense statement for this activity that details the receipt and expenditure of all of the commercial support (if applicable), copies of all grant checks or exhibit checks. <small>C8, SCS 3.4-3.6</small>

End of Application