



**Anne Arundel Medical Center
Continuing Medical Education (CME)**

**POLICIES FOR
ACCREDITED CONTINUING EDUCATION (ACE)**

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The following Policies for Accredited Continuing Education have been reviewed and approved by the Medical Education & Library Committee effective January 1, 2022.

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PREAMBLE

The health professions are not only defined by expertise, but also by a dedication to put service of others above self-interest. When individuals enter the healthcare professions, they commit to upholding professional and ethical standards including acting in a patient's best interests, protecting the patient from harm, respecting the patient, fostering informed choices, and promoting equity in healthcare.

While the interests of healthcare and business sometimes diverge, both are legitimate, and collaboration between healthcare professionals and industry can advance patient care. Since healthcare professionals serve as the legally mandated gatekeepers of medications and devices, and trusted authorities when advising patients, they must protect their learning environment from industry influence to ensure they remain true to their ethical commitments.

As the stewards of the learning environment for healthcare professionals, the accredited continuing education community plays a critical role in navigating the complex interface between industry and the health professions. Organizations accredited to provide continuing education, known as accredited providers, are responsible for ensuring that healthcare professionals have access to learning and skill development activities that are trustworthy and are based on best practices and high-quality evidence. These activities must serve the needs of patients and not the interests of industry.

This independence is the cornerstone of accredited continuing education. Accredited continuing education must provide healthcare professionals, as individuals and teams, with a protected space to learn, teach, and engage in scientific discourse free from influence from organizations that may have an incentive to insert commercial bias into education.

The Accreditation Council for Continuing Medical Education (ACCME[®]) acts as the steward of the Standards for Integrity and Independence in Accredited Continuing Education, which have been drafted to be applicable to accredited continuing education across the health professions. The Standards are designed to:

- Ensure that accredited continuing education serves the needs of patients and the public.
- Present learners with only accurate, balanced, scientifically justified recommendations.
- Assure healthcare professionals and teams that they can trust accredited continuing education to help them deliver safe, effective, cost-effective, compassionate care that is based on best practice and evidence.
- Create a clear, unbridgeable separation between accredited continuing education and marketing and sales.



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CME ACTIVITY AND ATTENDANCE RECORDS RETENTION

Attendance Records: An accredited provider must have mechanisms in place to record and, when authorized by the participating physician, verify participation for **six years** from the date of the CME activity. The accredited provider is free to choose whatever registration method works best for their organization and learners. The ACCME does not require sign-in sheets.

Activity Documentation: An accredited provider is required to retain activity files/records of CME activity planning and presentation during the current accreditation term or for the last twelve months, whichever is longer.

ACCME Note

ACCME-accredited providers must maintain specific CME activity records. Records retention requirements relate to the following two topics: Attendance Records and Activity Documentation. Maintenance of this documentation enables the provider to meet the requirements for annual year-end reporting and reaccreditation review.

Additionally, this policy may be of assistance to a provider should a complaint be filed. If the ACCME receives a complaint about an accredited provider, the ACCME may ask the provider to respond according to the ACCME's Policy Regarding Inquiries and Allegations of Noncompliance. As specified in the procedure, an accredited provider must be accountable for any complaint received by the ACCME for 12 months from the date a live activity ended, or in the case of a series, 12 months from the date of the session which is in question. Providers are accountable for an enduring material during the period of time it is being offered for CME, and 12 months thereafter.



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ACCREDITATION STATEMENTS

The accreditation statement must appear on CME activity materials and brochures distributed by accredited organizations, except that the accreditation statement does not need to be included on initial, save-the-date type activity announcements. Such announcements contain only general, preliminary information about the activity such as the date, location, and title. If more specific information is included, such as faculty and objectives, the accreditation statement must be included.

The ACCME accreditation statement is as follows:

For directly provided activities: “The (name of accredited provider) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.”

For jointly provided activities: “This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of (name of accredited provider) and (name of nonaccredited provider). The (name of accredited provider) is accredited by the ACCME to provide continuing medical education for physicians.”

There is no "co-providership" accreditation statement. If two or more accredited providers are working in collaboration on a CME activity, one provider must take responsibility for the compliance of that activity. Co-provided CME activities should use the directly provided activity statement, naming the one accredited provider that is responsible for the activity. The ACCME has no policy regarding specific ways in which providers may acknowledge the involvement of other ACCME-accredited providers in their CME activities.

ACCME Note

The accreditation statement identifies the ACCME-accredited organization that is responsible for demonstrating the CME activity’s compliance with all accreditation requirements.



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CME CONTENT AND THE AMERICAN MEDICAL ASSOCIATION PHYSICIAN'S RECOGNITION AWARD

All CME educational activities developed and presented by a provider accredited by the ACCME system and associated with AMA PRA Category 1 Credit™ must be developed and presented in compliance with all ACCME accreditation requirements - in addition to all the requirements of the AMA PRA program. All activities so designated for, or awarded, credit will be subject to review by the ACCME accreditation process as verification of fulfillment of the ACCME accreditation requirements.

ACCME Note

This policy describes the shared requirements of the ACCME and the American Medical Association (AMA) with regard to CME activities that include the provision of AMA PRA Category 1 Credit™. The AMA is the owner of the Physician's Recognition Award (PRA).



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CME CONTENT: DEFINITION AND EXAMPLES

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.

ACCME Note

The ACCME definition of CME is broad, to encompass continuing educational activities that assist physicians in carrying out their professional responsibilities more effectively and efficiently. Examples of topics that are included in the ACCME definition of CME content include:

- Management, for physicians responsible for managing a health care facility
- Educational methodology, for physicians teaching in a medical school
- Practice management, for physicians interested in providing better service to patients
- Coding and reimbursement in a medical practice

When physicians participate in continuing education activities that are not directly related to their professional work, these do not fall within the ACCME definition of CME content. Although they may be worthwhile for physicians, continuing education activities related to a physician's nonprofessional educational needs or interests, such as personal financial planning or appreciation of literature or music, are not considered CME content by the ACCME.



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JOINT PROVIDERSHIP

The ACCME defines joint providership as the providership of a CME activity by one or more accredited and one or more nonaccredited organizations. Therefore, ACCME accredited providers that plan and present one or more activities with non-ACCME accredited providers are engaging in “joint providership.” Please note: the ACCME does not intend to imply that a joint providership relationship is an actual legal partnership. Therefore, the ACCME does not include the words partnership or partners in its definition of joint providership or description of joint providership requirements.

The accredited provider must take responsibility for a CME activity when it is presented in cooperation with a non-accredited organization and must use the appropriate accreditation statement.

Informing Learners

The accredited provider must inform the learner of the joint providership relationship through the use of the appropriate accreditation statement. All printed materials for jointly provided activities must carry the appropriate accreditation statement.

“This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of (name of accredited provider) and (name of nonaccredited provider). The (name of accredited provider) is accredited by the ACCME to provide continuing medical education for physicians.” — ACCME Accreditation Statement Policy

Fees

The ACCME maintains no policy that requires or precludes accredited providers from charging a joint providership fee.



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Compliance and Noncompliance Issues

The ACCME expects *all* CME activities to be in compliance with the accreditation requirements. In cases of joint providership, it is the ACCME accredited provider's responsibility to be able to demonstrate through written documentation this compliance to the ACCME. Materials submitted that demonstrate compliance may be from either the ACCME accredited provider's files or those of the nonaccredited provider.

Providers on Probation

If a provider is placed on Probation, it may not jointly provide CME activities with non-accredited providers, with the exception of those activities that were contracted prior to the Probation decision. A provider that is placed on Probation must inform the ACCME of all existing joint providership relationships, and must notify its current contracted joint providers of its probationary status.

Providers that receive a decision of Probation in two consecutive accreditation terms are prohibited from jointly providing activities until they regain their accreditation status. If the provider is found to be working in joint providership while under this probation, the ACCME will immediately change the provider's status to Non-accreditation.

ACCME Note

Joint providership has been an established process for more than 25 years, affording accredited organizations the opportunity to collaborate with non-accredited organizations to enhance the diversity and value of their educational offerings. Accredited providers are explicitly prohibited from collaborating with ineligible companies on jointly provided CME activities by ACCME's Eligibility requirements. The accredited provider is responsible for ensuring that jointly provided activities comply with all ACCME rules and are accountable for demonstrating compliance during the reaccreditation process. If the ACCME initiates a complaint or inquiry about a jointly provided activity, the accredited provider will be responsible for responding to the complaint.