Accreditation Council for Continuing Medical Education

learn well

MENU OF CRITERIA FOR ACCREDITATION WITH COMMENDATION				
CRITERION		**RATIONALE**	**CRITICAL ELEMENTS**	**STANDARD**
Promotes Team-based Education				
Engages Teams	Members of interprofessional teams are engaged in the planning and delivery of interprofessional continuing education (IPCE). (formerly C23)	Interprofessional continuing education (IPCE) occurs when members from two or more professions learn with, from, and about each other to enable effective interprofessional collaborative practice and improve health outcomes. This criterion recognizes accredited providers that work collaboratively with multiple health professions to develop IPCE.	• Includes planners from more than one profession (representative of the target audience) AND • Includes faculty from more than one profession (representative of the target audience) AND • Activities are designed to change competence and/or performance of the healthcare team.	Attest to meeting this criterion in at least 10% of activities (but no less than two) during the accreditation term. At review, submit evidence for this number of activities:* S=2; M=4; L=6; XL=8
Engages Patients/ Public	Patient/public representatives are engaged in the planning and delivery of CME. (formerly C24)	Accredited continuing medical education (CME) is enhanced when it incorporates the interests of the people who are served by the healthcare system. This can be achieved when patients and/or public representatives are engaged in the planning and delivery of CME. This criterion recognizes providers that incorporate patient and/or public representatives as planners and faculty in the accredited program.	• Includes planners who are patients and/or public representatives AND • Includes faculty who are patients and/or public representatives	Attest to meeting this criterion in at least 10% of activities (but no less than two) during the accreditation term. At review, submit evidence for this number of activities:* S=2; M=4; L=6; XL=8
Engages Students	Students of the health professions are engaged in the planning and delivery of CME. (formerly C25)	This criterion recognizes providers for building bridges across the healthcare education continuum and for creating an environment that encourages students of the health professions and practicing healthcare professionals to work together to fulfill their commitment to lifelong learning. For the purpose of this criterion, students refers to students of any of the health professions, across the continuum of healthcare education, including professional schools and graduate education.	• Includes planners who are students of the health professions AND • Includes faculty who are students of the health professions	Attest to meeting this criterion in at least 10% of activities (but no less than two) during the accreditation term. At review, submit evidence for this number of activities:* S=2; M=4; L=6; XL=8

*Program Size by Activities per Term: S=small <39; M=medium: 40-100; L=large: 101-250; XL=extra-large: >250

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Addresses Public Health Priorities				
Advances Data Use	The provider advances the use of health and practice data for healthcare improvement. (formerly C26)	The collection, analysis, and synthesis of health and practice data/information derived from the care of patients can contribute to patient safety, practice improvement, and quality improvement. Health and practice data can be gleaned from a variety of sources; some examples include electronic health records, public health records, prescribing datasets, and registries. This criterion will recognize providers that use these data to teach about health informatics and improving the quality and safety of care.	• Teaches about collection, analysis, or synthesis of health/practice data AND • Uses health/practice data to teach about healthcare improvement	Demonstrate the incorporation of health and practice data into the provider's educational program with examples from this number of activities:* S=2; M=4; L=6; XL=8
Addresses Population Health	The provider addresses factors beyond clinical care that affect the health of populations. (formerly C27)	This criterion recognizes providers for expanding their CME programs beyond clinical care education to address factors affecting the health of populations. Some examples of these factors include health behaviors; economic, social, and environmental conditions; healthcare and payer systems; access to care; health disparities; or the population's physical environment.	• Teaches strategies that learners can use to achieve improvements in population health	Attest to meeting this criterion in at least 10% of activities (but no less than two) during the accreditation term. At review, submit evidence for this number of activities:* S=2; M=4; L=6; XL=8
Collaborates Effectively	The provider collaborates with other organizations to more effectively address population health issues. (formerly C28)	Collaboration among people and organizations builds stronger, more empowered systems. This criterion recognizes providers that apply this principle by building collaborations with other organizations that enhance the effectiveness of the CME program in addressing community/population health issues.	• Creates or continues collaborations with one or more healthcare or community organization(s) AND • Demonstrates that the collaborations augment the provider's ability to address population health issues	Demonstrate the presence of collaborations that are aimed at improving population health with four examples from the accreditation term.

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Enhances Skills				
Optimizes Communication Skills	The provider designs CME to optimize communication skills of learners. (formerly C29)	Communication skills are essential for professional practice. Communication skills include verbal, nonverbal, listening, and writing skills. Some examples are communications with patients, families, and teams; and presentation, leadership, teaching, and organizational skills. This criterion recognizes providers that help learners become more self-aware of their communication skills and offer CME to improve those skills.	• Provides CME to improve communication skills AND • Includes an evaluation of observed (e.g., in person or video) communication skills AND • Provides formative feedback to the learner about communication skills	At review, submit evidence for this number of activities:* S=2; M=4; L=6; XL=8
Optimizes Technical/ Procedural Skills	The provider designs CME to optimize technical and procedural skills of learners. (formerly C30)	Technical and procedural skills that are psychomotor in nature are essential to many aspects of professional practice, and need to be learned, updated, reinforced, and reassessed. Some examples of these skills are operative skill, device use, procedures, physical examination, specimen preparation, resuscitation, and critical incident management. This criterion recognizes providers that offer CME to help learners gain, retain, or improve technical and/or procedural skills.	• Provides CME addressing psychomotor technical and/or procedural skills AND • Includes an evaluation of observed (e.g., in person or video) psychomotor technical and/or procedural skill AND • Provides formative feedback to the learner about psychomotor technical and/or procedural skill	At review, submit evidence for this number of activities:* S=2; M=4; L=6; XL=8
Creates Individualized Learning Plans	The provider creates individualized learning plans for learners. (formerly C31)	This criterion recognizes providers that develop individualized educational planning for the learner; customize an existing curriculum for the learner; track learners through a curriculum; or work with learners to create a self-directed learning plan where the learner assesses their own gaps and selects content to address those gaps. The personalized education needs to be designed to close the individual's professional practice gaps over time.	• Tracks the learner's repeated engagement with a longitudinal curriculum/plan over weeks or months AND • Provides individualized feedback to the learner to close practice gaps	At review, submit evidence of repeated engagement and feedback for this number of learners:* S=25; M=75; L=125; XL=200
Utilizes Support Strategies	The provider utilizes support strategies to enhance change as an adjunct to its CME. (formerly C32)	This criterion recognizes providers that create, customize, or make available supplemental services (e.g., reminders) and/or resources (e.g., online instructional material, apps) that are designed to reinforce or sustain change.	• Utilizes support strategies to enhance change as an adjunct to CME activities AND • Conducts a periodic analysis to determine the effectiveness of the support strategies, and plans improvements	Attest to meeting this criterion in at least 10% of activities (but no less than two) during the accreditation term. At review, submit evidence for this number of activities:* S=2; M=4; L=6; XL=8

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Demonstrates Educational Leadership				
Engages in Research/ Scholarship	The provider engages in CME research and scholarship. (formerly C33)	Engagement by CME providers in the scholarly pursuit of research related to the effectiveness of and best practices in CME supports the success of the CME enterprise. Participation in research includes developing and supporting innovative approaches, studying them, and disseminating the findings.	• Conducts scholarly pursuit relevant to CME AND • Submits, presents, or publishes a poster, abstract, or manuscript to or in a peer-reviewed forum	At review, submit description of two projects completed during the accreditation term and the dissemination method used for each.
Supports CPD for CME Team	The provider supports the continuous professional development of its CME team. (formerly C34)	The participation of CME professionals in their own continuing professional development (CPD) supports improvements in their CME programs and advances the CME profession. This criterion recognizes providers that enable their CME team to participate in CPD in domains relevant to the CME enterprise. The CME team are those individuals regularly involved in the planning and development of CME activities, as determined by the provider.	• Creates a CME-related continuous professional development plan for all members of its CME team AND • Learning plan is based on needs assessment of the team AND • Learning plan includes some activities external to the provider AND • Dedicates time and resources for the CME team to engage in the plan	At review, submit description showing that the plan has been implemented for the CME team during the accreditation term.
Demonstrates Creativity/ Innovation	The provider demonstrates creativity and innovation in the evolution of its CME program. (formerly C35)	This criterion recognizes CME providers that meet the evolving needs of their learners by implementing innovations in their CME program in areas such as education approaches, design, assessment, or use of technology.	• Implements an innovation that is new for the CME program AND • The innovation contributes to the provider's ability to meet its mission.	At review, submit descriptions of four examples during the accreditation term.

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Achieves Outcomes				
Improves Performance	The provider demonstrates improvement in the performance of learners. (formerly C36)	Research has shown that accredited CME can be an effective tool for improving individuals' and groups' performance in practice. This criterion recognizes providers that can demonstrate the impact of their CME program on the performance of individual learners or groups.	• Measures performance changes of learners AND • Demonstrates improvements in the performance of learners	Attest to meeting this criterion in at least 10% of activities (but no less than two) during the accreditation term. At review, submit evidence for this number of activities:* S=2; M=4; L=6; XL=8
Improves Healthcare Quality	The provider demonstrates healthcare quality improvement. (formerly C37)	CME has an essential role in healthcare quality improvement. This criterion recognizes providers that demonstrate that their CME program contributes to improvements in processes of care or system performance.	• Collaborates in the process of healthcare quality improvement AND • Demonstrates improvement in healthcare quality	Demonstrate healthcare quality improvement related to the CME program twice during the accreditation term.
Improves Patient/ Community Health	The provider demonstrates the impact of the CME program on patients or their communities. (formerly C38)	Our shared goal is to improve the health of patients and their families. This criterion recognizes providers that demonstrate that the CME program contributed to improvements in health-related outcomes for patients or their communities.	• Collaborates in the process of improving patient or community health AND • Demonstrates improvement in patient or community outcomes	Demonstrate improvement in patient or community health in areas related to the CME program twice during the accreditation term.

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