

**Continuing Medical Education Office  
Policy & Procedure Manual**

**Revised: June 2014**

***Newer Policies in Appendix A***



# I. POLICIES – PHILOSOPHY- MISSION - ESSENTIALS

## CME Program Policies

- It is the Continuing Medical Education office's policy to assure that properly written objectives are submitted for all programs.
- Program directors must develop objectives for all programs. Brochures or other printed materials will not be released without properly written objectives.
- If the objectives are not learner oriented or are not written in appropriate language, the CME office will attempt to re-negotiate these with the speakers and/or program directors. Program objectives are subject to the approval of the CME Committee.
- General educational objectives for monthly or weekly "series" conferences are written yearly, at the time of application or re-application, for CME credit.
- Specific educational objectives for each program in the series are submitted on the "Supplemental Application" form, which may be obtained from the Office of Education.
- Please refer to the development of behavioral objectives document at <http://medaffairs.slhn.org/manny/cme/cmeframe.htm>
- In order to ensure the timely processing of your CME application, the program director of the event is responsible for verifying that the documents required by the CME office are received according to "CME Activity Leader Expectations and Planning Timeline" on the next page.
- Honorarium and Expense checks are not issued until after the event is held and only after the expected sources of income have been received by the CME office.

**CME Activity Leader Expectations and Planning Timeline**  
**Responsibilities on Page 23**  
*(as of June 2014)*

- I. Applying for CME:
  1. Send all requests for CME to J.P. Orlando, Ed.D at [james.orlando@sluhn.org](mailto:james.orlando@sluhn.org)
  2. Application forms, disclosure forms, professional practice gap examples, videos, and objectives guidelines can be accessed at:  
<http://medaffairs.slhn.org/manny/cme/cmeframe.htm>
  3. All CME activities require measures of effectiveness beyond post activity evaluations and tests (such as clinical outcomes).
  4. St Luke's CME Committee approves all CME requests.
  5. All CME applications must be fully completed and submitted to the CME Office at least 7 days (1 week) before a CME Committee meeting and before the event occurs.
  6. CME Committee Meeting Schedule:
  7. CME Activity Leaders must present their request application to the CME Committee.
  
- II. Upon receiving APPROVAL and AFTER each activity:
  - All Speaker Disclosure must be received by CME Office at least 7 days (1 week) prior to the event when a speaker is on St. Luke's Medical Staff, and 14 days (2 weeks) if a speaker is NOT on St. Luke's Medical Staff. In addition, the CV is required for all speakers NOT on St. Luke's Medical Staff.
  - Resolve all declared speaker conflicts prior to an activity by following the "Conflict Resolution Policy and Form" found at  
<http://medaffairs.slhn.org/manny/cme/cmeframe.htm>
  - For video conferencing between campuses, contact Felix Quach, System Tech, [felix.quach@sluhn.org](mailto:felix.quach@sluhn.org), 484-526-2233
  - After each activity, all evaluations, attendance sheets, learning objectives, and speaker introduction forms must be submitted to the CME Office within 14 days (2 weeks) in order for attendees to be awarded CME credit. If you are using an online evaluation, please distribute to the participants who attended each activity. CME credit will NOT be awarded to attendees if submitted after this time period.
  - After each activity, send all CME paperwork to Delrose Livermore via email at [Delrose.Livermore@sluhn.org](mailto:Delrose.Livermore@sluhn.org) or fax at 484-526-6450 or call at 484-526-2483 to make arrangements to drop off at Estes Building, 800 Ostrum Street, Bethlehem, PA.
  - All CME activities require a progress report to the CME Committee on the impact of your program.
  
- III. If you anticipate Commercial Support and/or Exhibitor Payments:
  - If a company is supporting your event with an educational grant, the complete name of the company, address, representative's name, telephone number and email must be provided. ONLY, the CME office or CME designee will contact the representative to complete a "Commercial Support Letter of Agreement".

- If a company wants to purchase exhibit space during your event, the complete name of the company, address, representative's name, telephone number and email must be provided. ONLY, the CME office or CME designee will contact the representative to complete an "Exhibitor Letter of Agreement". Note: exhibitor payments are NOT considered commercial support.
- ALL agreements with companies must be signed by the CME office or CME designee.
- ALL agreements must be fully executed at least ONE WEEK prior to the activity.
- ALL educational grants and exhibitor payments will be deposited in (and expenses paid out of) St Luke's CME Account.
- ALL educational grants or department funds earmarked to pay CME Speakers must be deposited or transferred into St. Luke's CME Account, so that ALL honorariums and expenses can be paid by the CME Office.
- ALL brochures and advertising must be received and approved by the CME office at least 14 days (2 weeks) PRIOR to publication launch date. They must contain the approved Pennsylvania Medical Society Statements.

Failure to follow these guidelines can adversely impact St Luke's accreditation status as a CME Provider. Thus, for CME Activity Leaders, failure to follow these guidelines may result in no longer being able to submit for CME credits.

## **Introduction**

The Continuing Medical Education (CME) program of St. Luke's Hospital & Health Network is designed to encourage and promote learning opportunities to the medical staff based on assessment of needs. St. Luke's Hospital & Health Network is accredited by the Pennsylvania Medical Society (PMS), to authorize AMA/PRA Category I credit approval for appropriate CME programs. By participating in SLHN CME program, physicians will be able to enhance their abilities to care for their patients.

## **Category 1 Credit**

The PMS Essentials explain that the AMA House of Delegates established the Physician's Recognition Award (PRA) in December 1968. The purpose of this voluntary program is to encourage participation in continuing medical education (CME), and to recognize such participation. Since 1968, more than 500,000 physicians have earned a PRA certificate.

To considerable extent, PRA requirements set forth the standards for Continuing Medical Education programs. Responding to demands from the medical profession and society in general, the AMA established standards for CME programs in order to receive accreditation. According to the AMA, Physicians participate in at least 50 hours a year of educational activities that meet AMA standards to earn the PRA. The PRA category 1 credit system established by the AMA has become the CME standard for licensing boards and specialty organizations nationwide.

AMA/PRA Category 1 credit is awarded to an accreditation program that is administered through the Accreditation Counsel for Continuing Medical Education (ACCME). The ACCME is comprised of representatives of seven nationally recognized organizations. They are:

American Board of Medical Specialties  
American Hospital Association  
American Medical Association  
Association for Hospital medical Education  
Association of American Medical Colleges  
Council of Medical Specialty Societies  
Federation of State medical Boards

The ACCME establishes the "essentials" which are the standards for the award of AMA/PRA Category 1 credit. The ACCME also grants approval to accredited CME providers.

## **Definition**

The Continuing Medical Education program consists of educational activities which serve to maintain, develop, or enhance the knowledge, skills, professional performance

and relationships that the medical Staff uses to provide services for patients, public or their profession. According to PMS standards, the content intended for all CME activities should consist of knowledge based skills on generally recognized and accepted by the profession. These include the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public.

### **Education Content**

According to the American Medical Association, providers of CME must ensure that the content of the educational activities they designate for AMA/PRA Category 1 credits are scientifically based, accurate, current, and are presented in an objective manner. The objectives of an activity should match educational needs identified by expert opinion, a study, or analysis of evaluations or examinations from earlier activities. Group need can be determined from a practice profile, peer review, self-assessment, or case audit. New medical knowledge can serve as a basis for sponsoring a program. Non-clinical subjects, such as office management or physician-patient relationships, for example, are acceptable when offered to an appropriate target audience.

Education describing and explaining health care practices, including alternative health care practices, is an appropriate subject for CME provided there is a discussion of the level of scientific evidence to support the practices. Education that advocates specific therapies or procedures and gives instruction on how to perform them in the absence of generally accepted knowledge that the therapies are efficacious and safe practices do not meet the appropriate content/criteria for PRA credit.

### **Ethical consideration for providers of CME**

The AMA expects CME to be unbiased. Providers of CME must provide physicians with objective information in all of their activities. Disclosure and commercial support standards expected of ACCME or state medical society accredited providers, must be met.

Funding from industry should come in the form of an educational grant with no strings attached. The AMA Council on Ethical and Judicial Affairs (CEJA) defines industry as all proprietary health-related entities that might create a conflict of interest.

The primary purpose of the activities must be educational. Promotional materials should emphasize the educational content of the program and not advertise amenities unrelated to the content secondarily.

Physicians and other individuals serving as faculty of CME should ensure that their presentation is scientifically accurate and uninfluenced by industry or financial contributors. They must communicate any potential conflict of interest to providers and physician participants.

## **St. Luke's Hospital & Health Network Mission Statement**

The Mission of St. Luke's Hospital & Health Network is to provide compassionate, excellent quality and cost-effective health care to residents of communities we serve regardless of their ability to pay.

The Mission will be accomplished by:

- Making the patient our highest priority
- Promoting health and continuously improving care provided to heal the sick and injured
- Coordinating and integrating services into a seamless system of care
- Improving the level of service provided throughout the St. Luke's Hospital & Health Network
- Ensuring all health care services are relevant to the needs of the community
- Striving to maximize the satisfaction of our employees, patients, medical staff, and volunteers
- Training allied health professionals, nursing and medical students, residents, and physicians in a variety of specialties and to attract them to practice within the Network's service area

## **Mission Statement Continuing Medical Education**

### **Purpose & Expected Outcomes**

The Continuing Medical Education (CME) program of St. Luke's Hospital & Health Network strives to achieve ongoing improvement of its medical staff in providing and coordinating appropriate high-quality, cost effective health care compatible with the Hospital mission statement. The CME program will be considered successful if it assists its physicians and professional staff in:

- satisfying their educational requirements
- encouraging participation in patient care performance improvement activities
- causing measurable changes in participants' medical practices.

### **Content Areas**

The scope of St. Luke's CME effort includes the following types of programs:

#### *Established conference series devoted to didactic or interactive study of interspecialty topics.*

Individual programs are designed by the Department heads or the Chairs in conjunction with the CME Committee and should be based upon needs assessment activities incorporating data derived from the hospital's performance improvement activities, feedback from potential program participants, and through departmental perceptions of important medical advances. (These include but are not limited to the Interdisciplinary CME Conferences, the Departments' Grand Rounds Conferences, M & M, and Tumor Board.) Individual evaluations are required for all participants requesting CME credit.

#### *Special programs and projects*

Occasional lectures having timely intra- or interspecialty significance and identified as a perceived need through similar mechanisms as above are accredited on a case-by-case basis by the Continuing Medical Education Committee. Individual evaluations are required for all participants requesting CME credit. Innovative programs proposed by groups or individuals are also approved as appropriate. Group performance improvement activities are eligible for CME credit, when conducted according to the ACCME / PMS "Essentials."

### **Target Audiences & Types of Services Activities Provided**

St. Luke's Hospital & Health Network's CME Program will offer activities that utilize a variety of teaching modalities to maintain, develop, and increase the knowledge, skills, and professional development of its target audience: the generalists, specialists, sub specialists on staff of St. Luke's Hospital & Health Network. These include lectures, panel discussions, Clinical Pathological Conferences, groups performance improvement activities and any new modalities identified as having the potential to enrich the educational value of individual programs. The Hospital will support its Continuing Medical Education Program by funding time for CME-dedicated administrative activities within the Department of Medical Affairs, contributing to the yearly CME budget, and providing meeting facilities, audiovisual equipment and expertise, library resources, and the necessary support staff for its CME events.

# **Pennsylvania Medical Society Essentials**

## **Essential Area 1 – Purpose & Mission**

### **ELEMENT 1.1 – MISSION STATEMENT**

The provider must have a written statement of its CME mission, which includes the CME purpose, content areas, target audience, type of activities provided, and expected outcomes of the program.

### **ELEMENT 1.2 – PARENT ORGANIZATION**

The provider must demonstrate how the CME Mission is congruent with and supported by the mission of the parent organization, (if a CME parent organization exists).

## **Essential Area 2 – Planning & Evaluation**

### **ELEMENT 2.1 – PLANNING PROCESS**

The provider must use a planning process(es) that:

- links identified educational needs with a desired outcome in its provision of all CME activities;
- considers design, audience, and type (format) of activity; and
- demonstrates that evaluation data is used in planning CME activities

### **ELEMENT 2.2 – NEEDS ASSESSMENT**

The provider must use needs assessment data to plan CME activities.

### **ELEMENT 2.3 – PURPOSE AND OBJECTIVES**

The provider must communicate learning/behavioral objectives of the activity so the learner is informed before participating in the activity.

### **ELEMENT 2.4 – ACTIVITY EVALUATION**

The provider must evaluate the effectiveness of its CME activities in meeting identified educational needs and show that these evaluations assess:

- extent to which educational objectives are being met;
- quality of the instructional process;
- participants' perception of enhanced professional effectiveness; and
- designated outcomes.

## ELEMENT 2.5 – OVERAL PROGRAM EVALUATION

The provider must evaluate the effectiveness of its overall CME program, make improvements to the program, demonstrate that evaluation data are used in planning future CME activities, and relate this to Essential Area 1.

### **Essential Area 3 - Administration**

## ELEMENT 3.1 – RESOURCES AND ADMINISTRATION

The provider must have an organizational framework for the CME unit that provides the necessary resources to support its mission, including support by the parent organization, (if a parent organization exists). The provider must:

- document an organizational structure for CME and its administration, designating an entity responsible for CME and delineating its authority; and
- identify responsible individuals who will maintain continuity of leadership.

## ELEMENT 3.2 – BUSINESS AND MANAGEMENT

The provider must operate the business and management policies and procedures of its CME program (as they relate to human resources, financial affairs, legal obligations, record keeping, faculty and facilities), so that its obligations and commitments are met. The provider must:

- provide a budget for the overall CME program and its major components;
- utilize competent faculty;
- provide appropriate facilities for CME activities; and
- have mechanisms to record and, when authorized by the participating physician, to verify participation.

## ELEMENT 3.3 – DISCLOSURE AND COMMERCIAL SUPPORT

The provider must present CME activities in compliance with Pennsylvania Medical Society's policies for Disclosure and Standards for Commercial Support.

## ELEMENT 3.4 – ENDURING MATERIALS

If enduring materials are part of the educational program, the provider must present CME activities in compliance with Pennsylvania Medical Society's policies for Enduring Materials.

## ELEMENT 3.5 – JOURNAL-BASED CME

If Journal-Based CME is part of the educational program, the provider must present CME activities in compliance with Pennsylvania Medical Society's policies for Journal-Based CME.

## ELEMENT 3.6 – INTERNET/WEB-BASED CME

If Internet/Web-Based CME is part of the educational program, the provider must present CME activities in compliance with the Pennsylvania Medical Society's policies for Internet/Web-Based CME.

#### ELEMENT 3.7 – JOINT SPONSORSHIP

If Joint Sponsorship is part of the educational program, the provider must present CME activities in compliance with the Pennsylvania Medical Society's policies for Joint Sponsorship. *St Luke's is currently not accredited for joint sponsorship.*

## **II. ORGANIZATION**

### **Historical Perspective**

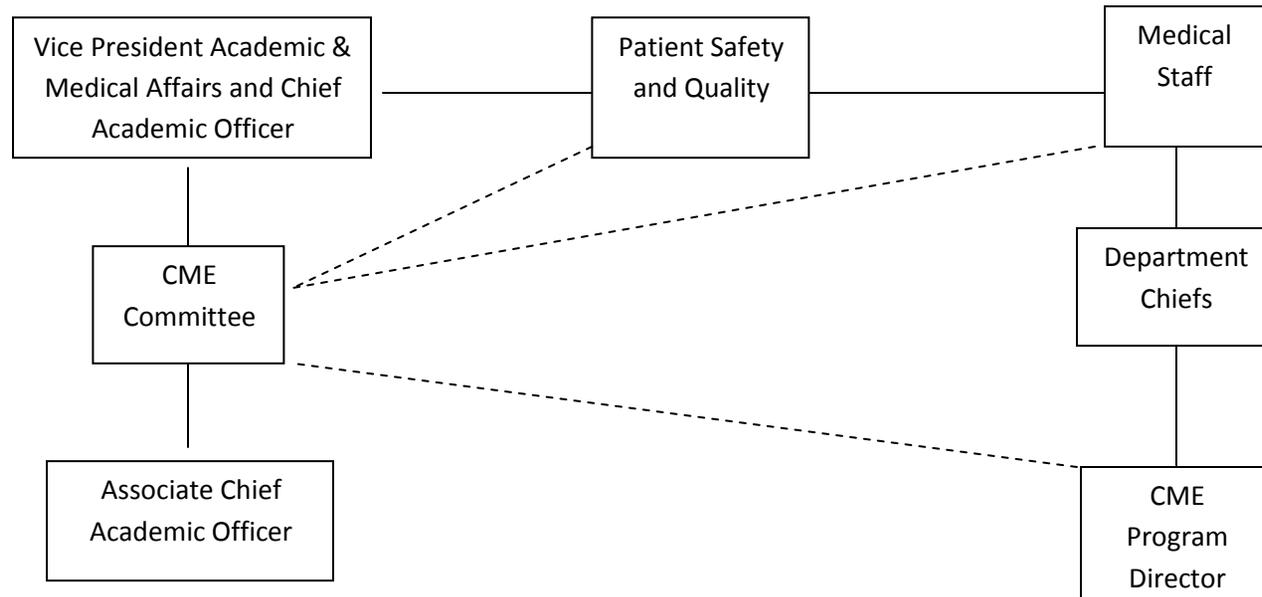
On March 20, 1990, the executive committee of the medical staff expressed its support for the future planning of continuing medical education programs at St. Luke's Hospital. This support has led to the creation of the continuing medical education committee. This committee has been established as part of the medical staff's standing committee structure.

The purpose of this committee is to provide a mechanism to approve Category 1 Continuing Medical Education Programs locally at the hospital. The Committee evaluates future programs, and approves programs for content and educational value, as well as to review participant evaluations, on a retrospective basis, those programs that have been conducted at St. Luke's.

The first meeting of this committee was held on Friday, May 25, 1990. The creation of this committee provides our hospital with the vehicle necessary to conduct a multidisciplinary evaluation of proposed CME programs. This committee was able to provide an excellent source of expert opinion, which was included as part of their needs assessment process. The committee was able to consider input from the CME Needs Assessment Survey that was conducted, along with other elements such as: staff consultations, quality assessment reports, as well as program evaluations.

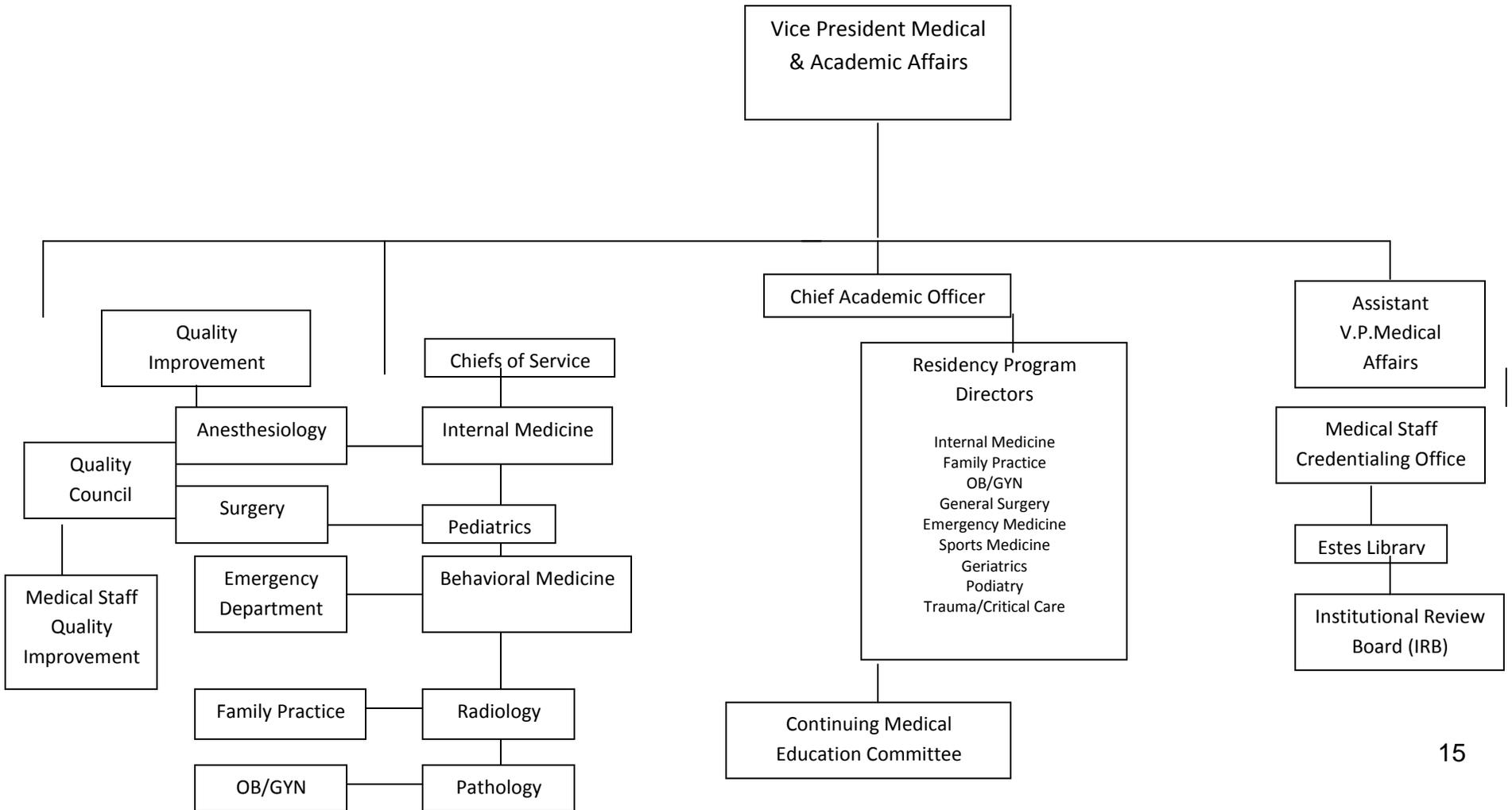


# St. Luke's Hospital & Health Network Continuing Medical Education Chart



# St. Luke's Hospital & Health Network Department of Medical & Academic Affairs Clinical Reporting Relationships

June 2014



## **Personnel Directory**

**President,  
St. Luke's Hospital**

**Richard A. Anderson**

**Sr. Vice President,  
Medical & Academic Affairs**

**Jeffery Jahre, M.D.**

**Chief Academic Officer**

**Joel Rosenfeld, M.D., M.Ed.**

**Associate Chief Academic Officer**

**J.P. Orlando, Ed.D**

**Administrative Assistant,  
Medical Education**

**Delrose Livermore**

## **St. Luke's Hospital & Health Network**

### **Continuing Medical Education Committee Members**

As of June 2014

Dr. Robert Langan, MD (co-chair)  
Dr. J.P. Orlando, Ed.D (co-chair)  
Delrose Livermore (CME assistant)  
Maria Collete, MLS  
Dr. David W. Leh, MD  
Dr. James Airoidi, MD  
Dr. Rachel Patterson, MD  
Dr. Roderick Quiros, MD  
Dr. David W. Leh, MD  
Dr. James Airoidi, MD  
Dr. David W. Leh, MD  
Dr. Joel Rosenfeld, MD  
Dr. Christopher Sarnoski, MD  
Joan Snyder, RN  
Dr. Tom Tachovsky, MD  
Dr. Joel Rosenfeld, MD

## **Continuing Medical Education Committee**

**A. Composition** – The Continuing Medical Education Committee shall be composed of members of the medical staff. The Associate Chief Academic Officer and Patient Safety Quality department representative are also members of the Committee.

### **Composition List**

1. Medical Staff Members
2. Vice President of Medical and Academic Affairs
3. Associate Chief Academic Officer
4. Director, Estes Library
5. Patient Safety / Quality Department Representative

**B. Duties** – The Continuing Medical Education Committee is responsible for evaluating, planning, and approving the continuing medical education activities at St. Luke's Hospital. The Committee is also responsible for leadership in determining the future of continuing medical education.

## **Terms of Office**

Elected in a given fiscal year, one-third of the membership of the Continuing Medical Education Committee shall be appointed for one year, one-third shall be appointed for a term of two years, and one-third shall be appointed for a term of three years. Thereafter, persons who leave the committee will be replaced by new members who will have appointments for three years. Members whose appointments have expired will be eligible for reappointment.

## **Attendance**

Attendance at CME meetings is in accordance with Medical Staff Bylaws, Article VII, Section 5, Part 2, which is provided below.

### **ARTICLE VII – ORGANIZATION AND OPERATION OF THE MEDICAL STAFF (Rev. 10/96)**

#### **Section 5 – Provisions to All Meetings**

##### **Part 2 – Attendance Requirements**

- a. Members of the Active and Active (Provisional) (Rev. 8/95) Staff are expected to attend all meetings of: the Medical Staff; the department to which they have been assigned; and committees to which they are either appointed or elected. Expecting specific meetings from which they have been excused, members are required to attend at least fifty percent (50%) of the remainder of all such applicable meetings of the Medical Staff and seventy-five percent (75%) of the meetings, of their department and of committees, during any given Medical Staff year. Any member who is compelled to be absent from a given meeting, may submit in writing the reason for his/her absence to the appropriate presiding officer prior to or within ten (10) days following that meeting. In any event, the presiding officer, on a basis of information available to him, may decide that such an absence is valid and declare a member to be excused from attending that meeting. Either the presiding officer or the member in question may request the Executive Committee to judge the validity of the absence. The name of any individual so excused, shall be recorded in the minutes of the applicable meeting. Failure of any member of the Medical Staff to comply with the aforementioned requirements shall constitute grounds for action leading to corrective measures as specified in Article XI of these Bylaws. The attendance record of each member shall be maintained for meetings of the Medical Staff, departments and committees. Such records shall be reviewed by the Credentials Committee at the time of the member's reappointment. If the Credentials Committee determines at the time of reappointment that a member has not complied with the meeting attendance requirements, the Committee may recommend that the member be placed on probation for one (1) year. If the member has not met the meeting attendance requirements during the probationary period, the Committee may recommend termination of the member's Medical Staff membership and clinical privileges.
- b. Any member of the Medical Staff whose clinical work is questioned will be requested to discuss such clinical work at a meeting of a department, a committee, or of the Executive Committee. The member shall be so notified, and shall be expected to attend the specified meeting. The chairman of the department or committee or the Chairman of the Executive Committee shall give

such a member fifteen (15) days advance written notice of the time and place of the meeting at which his/her attendance is expected. If the individual makes a timely request for postponement supported by an adequate showing that his/her absence or his/her inability to be prepared is unavoidable, the presentation may be postponed by the chairman of the department or committee or the Chairman of the Executive Committee, but for no longer than the next regularly scheduled meeting. Otherwise, the pertinent clinical information shall be presented and discussed as scheduled.

- c. If the individual does not request a postponement and fails to appear, the chairman of the applicable department or committee shall notify the Executive Committee of the failure of an individual to attend any meeting to which he was given notice that attendance was mandatory. Unless excused by the Executive Committee upon showing of good cause, such failure may result in an automatic suspension of all or such portion of the individual's privileges as the Executive Committee may direct. Such suspension shall remain in effect until the matter is resolved.
- d. Members of the Courtesy, Consulting, Affiliate and Honorary Staffs are encouraged to attend and participate in department and Medical Staff meetings, but shall not be required to do so as a condition of continued staff appointment, unless their clinical work is scheduled for discussion.

## **Responsibilities of the Continuing Medical Education Office**

### **1. Planning Functions (Determined) In Consultation With Program Directors**

1. Compliance with accreditation standards.
2. Analysis of potential program success.
3. Financial feasibility and performance.
4. Target audience(s) and disciplines.
5. Advertising vehicles.

### **2. Registration Functions**

1. Provides program introduction, evaluation, and other forms for the Program Director to utilize and distribute.

### **3. Maintenance Records**

1. Collects and summarizes evaluation forms for program.
2. Types of application forms for accreditation to various societies/organizations for each program.
3. Retains list attendees to verify their attendance.
4. Maintains mailing lists.

### **4. Fiscal Functions**

1. Assigns program account numbers.
2. Receives all monies related to program.
3. Records and deposits money into paper accounts with hospital accountant.
4. Arranges for checks for travel, honoraria, and other expenses.
5. Deposits all checks from drug/instrument companies and/or exhibitors.

## **Responsibilities of a CME Activity Leaders (aka Program Directors) Continuing Medical Education**

A “Program Director” is that individual who is primarily responsible for the planning and implementation of a given CME program. Generally, this person will be a physician or other health care professional who is not a member of the CME Office.

1. Review needs assessment, propose goals and objectives, propose course content, and identify target audience and speakers. Provide copies of correspondence and the documents relating to the planning process to the CME Office for required document files.
2. If requested, participate in a financial feasibility study and course feasibility study for the CME Office.
3. If accepted, help determine course date by advising on competition and the likes and dislikes of the target audience.
4. Contact speakers for commitment of time and topic; copies of correspondence to be sent to the CME Office for documentation.
5. Coordinate syllabus production with speakers and provide it on the date required for printing.
6. Develop evaluation tools with the CME Office.
7. Obtain funding as required from the financial feasibility study for outside and internal speakers’ expenses. Provide a copy of all correspondence for the program file.
8. If applicable, provide content for special brochures on the date required.
9. Assist with procuring mailing lists that the CME Office may not have on file.

All other tasks will be taken care of by the CME Office except for the last minute submission of syllabus material.

### III. OBJECTIVE SETTING

#### Behavioral Objectives

##### **Definition:**

An objective is a description of a performance that you want learners to be able to exhibit, as a measurement of competence. An objective describes an intended result of instruction, rather than the process of instruction itself.

##### **Purpose of Objectives:**

- 1) Assist sponsors in planning, designing and implementing educationally effective activities.
- 2) Assist sponsors in evaluating the quality of CME activities.
- 3) Assist prospective participants in judging whether or not a CME activity meets their needs or interests.

##### **Guidelines for Writing Objectives:**

- Learning objectives should be precise, unambiguous, and measurable. Each objective measures only one behavior (outcome).
- Objectives can measure outcomes in the cognitive, psychomotor or affective domains.
- Objectives should relate to assessed needs.
- Objectives should guide the educator in the selection of appropriate teaching/learning strategies, to attain the desired outcome.

##### **Elements of an Objective:**

In general, there are three elements in an objective:

- 1) Description of the learner.
- 2) Description of the behavior the learner will exhibit to demonstrate competence.
- 3) Description of the required performance level (i.e. 100% accuracy; all steps performed correctly) or statement of the kind of content to which the behavior relates.

##### **Example:**

At the completion of this program, the participant (MD) will be able to construct behavioral objectives for CME programs.

Please refer to the back of this page for a list of action verbs, which must be used when developing appropriate behavioral objectives.

**CME Objective Verbs**

Examples of operational/behavioral terms include:

**KNOWLEDGE:** Remember/recall in the same way taught

Articulate	Indicate	Read	Tabulate
Cite	List	Recite	Tell
Count	Name	Record	Trace
Define	Outline	Relate	Write
Draw	Point	Select	
Identify	Quote	State	

**SYNTHESIS:** When given parts, is able to produce a whole;  
close to creativity.

Arrange	Describe	Manage	Recommend
Assemble	Design	Organize	Revise
Collect	Detect	Plan	Specify
Compose	Formulate	Prepare	Suggest
Construct	Generalize	Produce	
Create	Integrate	Propose	

**APPLICATION:** Identify principle in a given situation or vice-versa

Anticipate	Explore	Order	Sketch
Apply	Implement	Perform	Solve
Assist	Illustrate	Predict	Translate
Calculate	Implement	Practice	Use
Complete	Interpolate	Relate	Utilize
Demonstrate	Locate	Report	
Employ	Monitor	Review	
Examine	Operate	Schedule	

**COMPREHENSION:** Understand/State in own words

Associate	Differentiate	Extrapolate	Report
Classify	Discuss	Interpret	Restate
Compare	Distinguish	Interpolate	Review
Compute	Explain	Locate	Translate
Contrast	Estimate	Predict	
Describe	Express	Recognize	

**EVALUATION:** Apply information to new situation

Appraise	Evaluate	Recommend
Assess	Grade	Revise
Choose	Judge	Score
Critique	Measure	Select
Determine	Rank	Test
Estimate	Rate	

**ANALYSIS:** Take whole and break it into parts

Analyze	Differentiate	Summarize
Appraise	Distinguish	
Contrast	Evaluate	
Correlate	Experiment	
Compare	Infer	
Criticize	Inspect	
Detect	Question	
Diagram	Separate	

The following descriptions are not stated in operational/behavioral terms and do not meet the criterion for CME approval:

- ⊗ Have an understanding of
- ⊗ Know how to
- ⊗ Become Familiar With
- ⊗ Have an approach to
- ⊗ Be able to know
- ⊗ Understand
- ⊗ Be cognizant of
- ⊗ Learn how to
- ⊗ Be aware of

## **IV. Program Planning/Approval Process**

### **Application Process for CME Credit Approval**

In order to apply for SLHN AMA/PRA category 1 credit for a CME medical educational program, the application for CME credit must be completed and returned to the CME Office – Department of Medical Affairs. This form may be accessed through the CME webpage at <http://medaffairs.slhn.org/msldir.htm> or obtained at the CME Office – Department of Medical Affairs. If the program director is applying for commercial support as well, then a \$100 application/processing fee is required. The application for CME credit is then processed by the CME Committee to be approved. It must be noted that if the application form is not properly filled out, the committee members will not be able to review it, and it will be returned for clarification. An application form must be submitted for every single program or continuing-series program. It should be stated on the application whether the proposed program is going to be a single conference or a continuing series.

It is required that the Continuing Medical Education Office assure that properly written objectives are submitted for all programs. According to CME standards, objectives are defined as “a description of a performance that you want learners to be able to exhibit, as a measurement of competence”. All learning objectives stated on the CME application must be stated in operational/behavioral terms in order to comply with the CME committee standards. These standards focus on the proper usage of behavioral verbs, which are used to correctly describe the intended result of the program rather than the actual processes of the learning experience. Examples of behavioral verbs can be accessed on the CME webpage, or obtained from the CME Office – Department of Medical Affairs. This list will also be sent out to the faculty speaker along with the program approval letter.

If a company offers an educational grant, the company’s name, representative, and contact information is required. The amount of the grant is also required, along with a program budget worksheet. This worksheet can be found at the CME Office – Department of Medical Affairs. The administrative staff in the CME Office will be glad to help develop your program.

### **Specific Program Form – Continuing Series CME**

The “specific program form” is used by the program director to communicate to the CME Office documentation of each particular scheduled programs/conferences, objectives, etc. CME Office to organize, plan, and produce documentation of all continuous series scheduled programs/conferences. All program directors working with continuing series programs approved by the CME Committee are required to complete the “specific program form” and return it to the CME Office – Department of Medical Affairs at least one week before each of their scheduled programs. Each program name is assigned its

own designation number, which is used to identify all of the information associated with the program and related accounts. On the continuous series program form the designation number is located on the top left-hand corner. Some departments deal with a variety of educational programs, which require submitting a number of these forms. In order to avoid conflict, this number should be checked to make sure it matches the program name before submitting the form to the CME Office – Department of Medical Affairs (Refer to attached program name/designation number list). Once the name of the program is thoroughly checked, a specific topic needs to be entered where appropriate on the form along with the specific objectives related to that week or month's program session.

## **Promotion & Advertising**

Only St. Luke's Hospital & Health Network may authorize a commercial supporter to disseminate information about a St. Luke's accredited CME activity to the medical community. The content of such information is the responsibility of St. Luke's Hospital and any such information must identify the educational activity as produced by our organization. Promotional materials for CME activities that are not directly related to the transfer of education to the learner may include advertising. Such promotional materials can contain information about multiple non-CME elements of the event such as course descriptions and schedules. When St. Luke's Hospital & Health Network offers educational activities consisting of concepts or materials prepared by proprietary entities, such activities must adhere to the Essential Areas and Standards in all respects, especially with regard to the provisions concerning the independence of St. Luke's Hospital in planning, delivering, designing, and evaluating such activities.

With respect to commercial support, the terms and conditions of the support must be described in a written agreement between St. Luke's Hospital and the commercial supporter. Any event or product that contains advertising or promotional opportunities must not be part of the educational Continuing Medical Education (CME) activity and must not be paid for by commercial support. Normally these are assigned to "exhibit hall", advertising pages or screens or promotional receptions or meals, all of which are clearly identified as such by the learner. The commercial interest should buy advertising and promotion opportunities with resources designated for that purpose. If an agreement for advertising or promotion is struck between the two parties, it must be outside the written agreement for commercial support.

## **V. EVALUATION**

### **Evaluation Policy**

CME compliance standards require that the accredited entity provide evaluative information, which is used to measure the effectiveness of the educational programs. Evidence of these measurements are documented and used for improvement planning for future CME activities. All participants in CME activities are required to complete an evaluation in order to comply with the Accreditation Council for Continuing Medical Education (ACCME) standards.

As stated in element 2.4 of the Essentials document, “The provider must evaluate the effectiveness of its CME activities in meeting identified educational needs.” The evaluations used must show that they assess the:

- Extent to which educational objectives are being met;
- Quality of the instructional process;
- Participants’ perception of enhanced professional effectiveness
- Designated Outcomes

St. Luke’s intends to consistently evaluate CME activities in order to examine the appropriateness of the educational content, as well as to provide our staff with any educational needs, by measuring practice applications and/or health status improvement.

### **Definition**

CME evaluations are used to determine the consequential benefits and/or worth of each program. It is the accredited provider’s responsibility to meet all compliance standards for CME activities in order to provide the medical staff with the most content-effective programs. The CME evaluations are also used to measure the appropriateness of each program in order to ensure that the content of each program is being absorbed in an environment free of commercial bias.

### **Policy on Who Receives Copies of Summary Evaluations**

The Summary of Evaluations report is prepared by the CME office and is distributed to the program director responsible for the initiation of each CME activity. Usually, this will be the Chief of the appropriate medical service department. Also, we will submit a copy

of this report, if requested, to a supporting company/pharmaceutical company, who has provided monetary support in the form of an educational grant for a specific program.

Copies of the evaluation reports are also made available to the members of the CME Committee. Each program is reviewed by the CME Committee during the course of its regularly scheduled meeting.

Visiting professors and outside speakers that are of a “one time nature” are not normally sent copies of the evaluation report. If specifically requested, however, evaluation reports may be submitted to visiting professors.

## **VI. DOCUMENTATION**

### **Guidelines for Honoraria for Visiting Professors**

1. Events which are supported by a company, educational grant, or other external source of funding shall receive the honoraria ascribed by the funding entity.
2. Speakers supported by the Hospital's CME fund shall receive honoraria commensurate with the prevailing rate up to a maximum of \$500.
3. When specifically authorized for speaker, travel expenses supported by the Hospital's CME fund shall be based upon prevailing rates for coach class transportation. Per diem expense for food and lodging will be reimbursed at actual cost, subject to the submission of appropriate receipts. The staff of the CME Office shall arrange all local accommodations. Under no circumstances shall travel, lodging or per diem expense be reimbursed for travel by the speaker's spouse, children or other traveling companion(s).
4. If there is a choice of equally qualified and expert speakers on a given topic, consideration shall be given to the one who is closer in distance to St. Luke's Hospital, to cut down on travel expenses.
5. Please be sure that the speaker's topic is worthy of Category 1 credit.

### **Special Purpose Fund for Continuing Medical Education**

At the request of the CME Committee, a special purpose fund has been established for continuing medical education programs. This fund may be used to receive grants or gifts submitted for the specific purpose of promoting continuing medical education at St. Luke's.

Revenue account number 8021.90310 has been assigned under the hospital's accounting system for tracking funds that are contributed for CME programs. Expenditures of these funds are tracked under Expense account number 8021.46710.

### **Commercial Support Guidelines**

Any entity, excluding the government, providing funds or resources to a CME provider is considered a commercial supporter. The CME office – Department of Medical Affairs is responsible for receiving, and disbursing all funds from educational grants to the appropriate parties. All CME activities are encouraged to accept educational grant

funding as long as the activities they present, and/or develop are educational and not promotional. All commercial support must be acknowledged in all printed activity announcements and brochures; however reference must not be made to specific products. It should also be noted that all promotional materials should not be displayed immediately before, during, or immediately after a CME activity. Representatives of a commercial entity may attend the educational activity, but should refrain from all sales activities during the conference. Finally, all commercially supported CME activities should focus on educational aspects without competition from any social events that may be involved.

## **Administrative Policies and Procedures – Commercial Support**

### **Policy – Continuing Medical Education**

Education of both health professionals and the community at large is central to St. Luke's Mission. The primary goal of the CME program is to further enhance the education and knowledge of the medical staff and others at St. Luke's Hospital. CME programs offered at St. Luke's Hospital that are approved for the award of the American Medical Association's Physician Recognition Award (AMA/PRA), category I credit shall comply with the essentials and guidelines established by the ACCME. Appropriate programs are also approved for the award of the American Academy of Family Practitioners and/or the American Osteopathic Association CME credit, in compliance with their applicable standards.

### **Policy – Commercial Support of CME**

Accredited sponsors often receive financial and other support from non-accredited commercial organizations. Such support can contribute significantly to the quality of CME activities. The ACCME has developed guidelines for commercial support of CME stipulating that accredited sponsors are responsible for the content, quality, and scientific integrity of all CME activities certified for credit. It shall be the policy of St. Luke's Hospital to fully comply with the guidelines established by the ACCME.

### **Procedure – Commercial Support of CME**

Requests for CME course approval shall indicate whether commercial support is provided for the program. If so, the source of commercial support shall be fully identified. The Office of Medical Education shall advise the firm(s) providing commercial support of the Hospital's policy to abide by the ACCME guidelines.

Funds from a commercial source should be in the form of an educational grant made payable to St. Luke's Hospital. Such funds shall be deposited in the special purpose fund for CME. The CME Office – Department of Medical Affairs will keep an account of

the expenditures of funds and, upon request, report these expenditures to the commercial supporter(s) of the program.

All support in relation to certified CME activities must be made with full knowledge and approval of St. Luke's Hospital and be acknowledged in printed announcements and brochures in accordance with the ACCME guidelines.

## **Policy – Conflict of Interest**

The primary purpose for identifying conflicts of interest is to disclose them so that an audience can make more informed evaluations and judgments concerning the information presented. It shall be the policy of St. Luke's Hospital to require all speakers to state whether or not they receive financial support from a commercial entity related to the subject of their educational presentation at St. Luke's Hospital.

## **Procedure – Conflict of Interest and Full Disclosure**

As part of St. Luke's planning for CME programs, the CME office will send a questionnaire to speakers asking for disclosure of any support the speaker has received from a commercial entity related directly or indirectly to the subject of the presentation. The results of this disclosure will be made known to participants attending the CME program.

The Pennsylvania Medical Society Commission for Continuing Medical Education (PMSCCME) requires that accredited providers establish mechanisms to identify and resolve conflicts of interest (COI) stemming from relevant financial or other relationships with commercial interests.

A "conflict of interest" is created when anyone who in the position to control the content of the activity has a relevant financial relationship(s) with a commercial interest that is providing financial or other support to the activity or who's product or service is being discussed as part of the educational activity.

The PMSCCME recognizes that there are a variety of mechanisms and strategies for compliance, and therefore, accredited providers are expected to develop mechanisms that are appropriate for their organizations and activities. As an accredited provider of CME, the St. Luke's Hospital & Health Network (SLHN) has adopted several mechanisms to resolve conflict of interest for planning committee members and/or faculty.

Acceptable resolution actions include the following:

- 1) Peer or expert review of the faculty person's presentation including PowerPoint® slides and any other handouts, if applicable. A Content Review

Form should be completed by the designee of the accredited provider. In some instances, peer review may be required by a member of the Commission on Continuing Medical Education. If commercial bias is identified, it is the responsibility of the accredited provider to implement corrective action to assure that content is balance and unbiased. A Content Review Form must be received in the Office of CME at least two weeks prior to the educational activity verifying that no commercial bias is present.

- 2) Modification of the focus of the content of the topic matter so that the content is not related to products or services of the commercial interest that are the basis of the conflict of interest.
- 3) Limit the presentation to specific topic matter where the financial relationships are not relevant to the educational event.
- 4) If an individual is a principal investigator of a relevant industry-sponsored trial, limitation of the individual's presentation to the data and results of the research and use of another individual to address the broader implications and recommendations for clinical care.
- 5) Selection of another presenter who does not have a relevant financial relationship to address the preferred topic.
- 6) Recusal of planning committee members with conflict(s) of interest relating to the content of the educational activity from discussions on topic development, educational objectives, and faculty selection.
- 7) Other strategies will be considered on a case by case basis and must be approved by SLHN prior to the proposed activity.

All CME activities certified for CME credit by SLHN are expected to conform to this policy. If conflicts of interest stemming from a relevant financial relationship cannot be resolved, the affected individual cannot participate in the planning, development, or implementation of the activity.

A Conflict of Interest Reporting Form must be submitted to the Office of CME at least 7 business days prior to the education activity. If multiple conflicts of interest have been identified for one educational activity, a separate Conflict of Interest Reporting Form must be submitted for each conflict showing the appropriate resolution.

[Conflict of Interest Resolution Form \(pdf\)](#)

## **VIII. FACILITIES**

The Hospital's commitment to medical education is exemplified by the new Priscilla Payne Hurd<sup>89</sup> Education Center. The Education Center was dedicated in May, 1995 and has two auditoriums for a total seating capacity of 170 and ten classrooms. The auditoriums are equipped with video and slide projection equipment which is operated directly from the podium and overhead projectors. Classrooms are also equipped with video monitors and overhead projectors.

In addition to the Education Center, the R.K. Laros Auditorium (200 seat capacity) is located in the Doctor's Pavilion adjacent to the Hospital. The Auditorium is furnished with state of the art equipment and features a touch screen computer operated podium. The podium operates all audio visual equipment which includes 35mm dual side projection capability. A large projection screen may also be used to project live video images brought in over the Hospital's satellite network. VHS and DVD video capability is also provided.

The auditorium features excellent acoustics and an extremely sensitive sound system. The lighting system features the ability to use preset controls when using slide or video media. The lights may also be individually adjusted to accommodate virtually any form of educational program that may be presented in this setting.

Several classrooms are located within the Hospital and a large conference room, adjacent to the cafeteria can also be used for various CME programs.

## **VIII. COMPUTER APPLICATION**

### **CME Tracker Access Computer System**

The CME Office – Department of Medical Affairs has developed a database system to simplify the application approval, program implementation, and tracking process. Once approved by the CME Committee, a number is assigned for the program or series to be presented. Programs are then entered into the “Program Description” file. This file contains basic information that includes the CME program number, the program date, type of program, i.e., single program, medical ground rounds, continuing series, etc., the program topic and the name of the speaker(s). This file is also used to track the date upon which the evaluation summary is sent out to the Chief of Service, as well as when the completed evaluations are returned and posted. If programs are cancelled or if credit is withheld for any reason, this is also noted in this file.

The “Evaluation Entry Form” file is used to track the evaluation process and is used to record the data on the participants’ evaluation form. In addition to recording the numerical scores given for the program, comments offered and suggestions for future programs are also recorded.

Identifying information for each participant in our CME program is initially entered into the “Names Form”. Once entered, program evaluations need only contain the social security number of the participant, in order to link the program with the data necessary to complete the attendance reports, evaluation summary reports, and individual report of CME participation.

Various reports can be generated through the CME computer system. These include monthly program reports, individual CME activity reports, yearly management reports, and evaluation summaries.

#### **Workflow**

Once the application is completed, the information contained on it is entered into the computer and submitted to the CME Committee to be reviewed for approval. Once approved, the corresponding information (approval letter, disclosure letter, objectives review form, etc.) is sent to the speaker.

If commercial support is provided, an approval letter, grant agreement, and budget worksheet is sent out to the supporting company.

Upon receipt of the above forms, the Program Director receives the standard evaluation form, attendance sheet, speaker introduction form, and advertisement flyer.

## **IX. MISCELLANEOUS**

### **Refund Policy**

A full refund of any registration fee will be given to any registrant when St. Luke's Hospital cancels a CME program.

A full refund of any registration fee will be given to a registrant when he/she cancels within five (5) working days prior to the date of the program. A 15% processing fee will be charged for cancellation received after this date. No refund will be granted for no-shows.

### **Proofreading Policy**

Objectives for all programs approved for CME credit are to be submitted to the CME Office for approval. The CME Office will edit the objectives if necessary. Announcements of programs may not be printed until the objectives have been approved.

When special brochures are to be printed, it is the policy to have the Program Director for the individual program to submit a draft copy of the brochure for approval to the CME Office. The CME Office will approve the objectives and verify that the accreditation statements are properly stated. The draft, with corrections noted, will then be returned to the Program Director.

After printing, copies of all materials advertising a CME program are to be submitted to the CME Office.

### **Complaints/Inquiries**

The following is a policy for handling complaints/inquiries received by St. Luke's Hospital and Health Network's Continuing Medical Education Committee.

All complaints must be submitted in writing and signed to receive formal consideration. The statute of limitation of the length of time during which activity may be accountable for any complaints/inquiries that are received by the CME Committee is one year from the date of the activity which is in question.

If the complaint/inquiry being questioned is judged to be related to compliance with the Essential Areas, their elements, or accreditation policies, the CME committee will send a Letter of Inquiry to the provider via certified mail describing the nature of the complaint/inquiry. The letter will request a response in which the provider may offer its

rebuttal of how it complies with the CME Committee accreditation policies relating to the complaint/inquiry. The provider's response must be received by the CME Committee within thirty days after the provider receives the certified mail-receipt requested Letter of Inquiry. The provider's response must be accompanied, where possible, by supporting documentation.