



GUIDE TO THE PROCESS FOR ISMA REACCREDITATION AN OVERVIEW AND SUBMISSION REQUIREMENTS

FOR NOVEMBER 2017 AND SUBSEQUENT COHORTS

Overview and Background Information

Conducting Your Self-Study for Reaccreditation

The self-study process provides an opportunity for the accredited provider to reflect on its program of CME. This process can help the organization assess its commitment to and role in providing continuing medical education and determine its future direction. The ISMA has specific requirements for the *Self-Study Report* content outline, but the process of conducting a *self-study* is unique to your organization. Depending on the size and scope of your CME program, you may involve many or just a few individuals in the process.

Data Sources Used in the Reaccreditation Process

The ISMA's reaccreditation process is an opportunity for each accredited provider to demonstrate that its practice of CME is in compliance with the ISMA's accreditation requirements through three primary sources of data about the provider's CME program:

- 1) the self-study report
- 2) evidence of performance-in-practice, and
- 3) the accreditation interview

Expectations about Materials

Information and materials submitted to the ISMA must not contain any untrue statements, must not omit any necessary material facts, must not be misleading, must fairly present the organization, and are the property of the organization.

Information and materials submitted for accreditation (self-study report, evidence of performance-in-practice, other materials) must not include individually identifiable health information, in accordance with the Health Insurance Portability and Accountability Act (HIPAA).

Missing or Incomplete Information

Providers that meet all of the deadlines and submission requirements of the reaccreditation review process will receive an accreditation decision from the ISMA. Please note, if the ISMA is unable to render a decision due to missing or incomplete information, the ISMA reserves the right to request additional information, the expenses for which will be borne by the provider.

Decision-Making

Your organization's compliance findings and the outcome of the accreditation review are determined by the ISMA based on the data and information collected in the accreditation process. The ISMA will also consider data from monitoring issues, if such data are applicable to the provider. The data and information are analyzed and synthesized by ISMA Surveyors. The Surveyors make recommendations on findings and status which are forwarded for action by the ISMA Commission on Medical Education. All accreditation decisions are ratified by the ISMA Commission on Medical Education which meets two times each year (generally, in June and November).

This multi-tiered system of review provides the checks and balances necessary to ensure fair and accurate decisions. The fairness and accuracy of ISMA decisions are also enhanced by the ISMA's use of a criterion-referenced decision-making system. Accreditation decision letters are sent to providers via mail within 30 days following the ISMA Commission on Medical Education meeting.

Self-Study Report

Organizations are asked to provide narrative descriptions, documents, and examples to give the reader an understanding of CME practice(s) utilized to ensure compliance with the ISMA's Accreditation Criteria and Policies. The content of the report is prescribed in the seven sections of the *ISMA Self-Study Report Outline* and must be organized using divider tabs to separate the content of the report in the seven sections. For the purpose of printing tabs, the titles of the sections have been abbreviated as follows:

- I) **Prologue**
- II) **Purpose And Mission (C1)**
- III) **Educational Activities (C2-7 and Policies)**
- IV) **CME Program and Educational Activities (C8-9)**
- V) **Content of Educational Activities (C10 and Content Validation)**
- VI) **Evaluation and Improvement (C11-13)**
- VII) **Engagement with the Environment (C16-22)**

New Commendation Criteria: At its July 2016 meeting, the ACCME Board of Directors came to consensus about the menu of new criteria for Accreditation with Commendation. The final version is based on the feedback received from the CME community. In the Fall of 2016, the ACCME released a comprehensive package including the new commendation criteria, guidelines and compliance measures, a transition plan and implementation schedule, and educational resources. Updates will be posted on the ACCME/ISMA websites. There will be a transition phase during which accredited providers that choose to aim to achieve Accreditation with Commendation will have the option of demonstrating compliance with the current or new commendation criteria. As always, compliance with the commendation criteria is optional for CME providers and is not required to achieve Accreditation.

Requirements for Organizing and Formatting Your Self-Study Report

The Self-Study Report must be formatted as indicated to facilitate the review of your CME program:

The cover of each of the Self-Study Report binders should clearly identify your organization by name and ISMA provider number. Use the full name of your organization as it is known to the ISMA (no acronyms or abbreviations).

1. Each page in the binder, including the attachments, must be consecutively numbered. The name (or abbreviation) of your organization must appear with the page number on each page.
2. The Self-Study Report must be organized using divider tabs as specified above by the ISMA.
3. Narrative, attachments, and examples must be provided as indicated in the ISMA Self-Study Report Outline.
4. The Self-Study Report must be typed with at least 1" margins (top, bottom and sides), using 11 point type or larger; double-sided printing is acceptable.
5. Pertinent excerpts must be photocopied on standard paper for inclusion in the binder. Do not use plastic sleeves for single pages or for multi-page documents (i.e., brochures, handouts, etc.).
6. The Self-Study Report must be submitted in a three-ring binder. The rings may not be more than 2 inches in diameter, and the materials may not be more than 2 inches in thickness.
7. Three hard copies of the Self-Study Report must be submitted to the ISMA. Keep a separate duplicate copy for your reference at any time during the accreditation process, but especially at the time of the accreditation interview.

8. One electronic copy of the Self-Study Report in its entirety must be submitted to the ISMA (in addition to the three binders), as a single PDF file on a USB flash drive, and bookmarked according to the seven sections of the ISMA Self-Study Report Outline.

Evidence of Performance-in-Practice

Organizations are asked to verify that their CME activities are in compliance with the ISMA's Accreditation Criteria and Policies through the performance-in-practice review process. The ISMA will ask providers to select 15 activities from the current accreditation term for which the organization will be expected to present evidence of performance-in-practice to the ISMA for performance-in-practice review.

The ISMA's review of evidence of performance-in-practice allows providers to demonstrate compliance with the ISMA's expectations and offers providers an opportunity to reflect on their CME practices. In this process, you will present information and materials that you developed and utilized to ensure that your CME activities are in compliance with the ISMA's requirements. Blank forms, blank checklists and policy documents alone do not verify performance-in-practice.

The ISMA's review of a provider's performance-in-practice entails the following process:

1. The provider's entry of CME activity data into the ACCME's Program and Activity Reporting System (PARS)
2. Selection of activities for performance-in-practice review
3. The provider's submission of evidence of performance-in-practice for activities selected

Submitting your CME Activity Data in PARS

Using PARS, the ISMA/ACCME's Program and Activity Reporting System (pars.accme.org), you will submit known information about the CME activities that your organization has provided, or will provide, under the umbrella of your ISMA accreditation statement, from the beginning of your current accreditation term to the expiration. For more information about PARS, visit <http://www.accme.org/cme-providers/maintaining-your-accreditation/about-pars>.

Selecting Activities for Performance-in-Practice Review

The ISMA will ask providers to select 15 activities from the current accreditation term for which the organization will be expected to present evidence of performance-in-practice to the ISMA for performance-in-practice review. Providers are accountable for demonstrating performance-in-practice for all activities selected. You are asked to provide examples of each type of activity held (i.e., live, enduring, jointly-provided, journal-based, etc.).

Preparing Evidence of Performance-in-Practice

The *ISMA Performance-in-Practice Structured Abstract* must accompany each activity file and may be downloaded from the ISMA CME OneSource website (<http://www.ismanet.org/ISMA/Education>). Following the structured abstract, you will provide the information requested with narrative explanations and statements, in tables, and attach documents and evidence to verify that the activity meets the ISMA's requirements.

Accreditation Interview

Organizations are presented with the opportunity to further describe the practices presented in the self-study report and in evidence of performance-in-practice, and provide clarification as needed, in conversation with a team of volunteer surveyors who are colleagues from the CME community, and trained by the ISMA.

ISMA surveyors will be assigned to review the self-study materials you submit to the ISMA. They will meet with representatives of your CME program to engage in a dialogue about your organization’s policies and practices that ensure compliance with the ISMA’s Accreditation Criteria, including the Standards for Commercial Support and the Accreditation Policies.

During the interview, the surveyors will seek clarification about any questions they may have regarding the self-study materials you submitted to the ISMA. You can expect ISMA surveyors to: 1) conduct their interactions with providers in a professional manner, 2) be familiar with your materials and the ISMA’s Accreditation Criteria and Policies, and 3) communicate clearly and effectively with providers without offering consultative advice or feedback regarding compliance or the expected outcome of the accreditation review.

The ISMA utilizes the conference call as its standard accreditation interview format. However, other interview formats are available, including a face-to-face meeting at the ISMA office, an on-site meeting at your organization’s office or site of an activity, or via video conference. Interviews typically average 90 minutes in length.

To ensure the validity of the process and based on circumstances and available resources, the ISMA reserves the right to make all final decisions regarding the interview format, date, time, and/or composition of the survey team.

The ISMA will provide information about the process of scheduling the accreditation interview. The ISMA will confirm your assigned surveyor(s) and the interview date and time in advance via email. Your organization will be asked to confirm receipt of this communication.

Requirements for Assembling and Submitting Performance-in-Practice Materials

Instructions for submitting in hard copy:

1. Submit labeled evidence for each activity selected in an 8 ½ X 11 file or pocket folder; do NOT submit evidence in binders.
2. Affix a label on the front cover of each file folder that specifies:

• Full name of your organization	• Activity type, as submitted in PARS
• Activity title, as submitted in PARS	• Directly or jointly provided
• Activity date and location, as submitted in PARS	• Commercial support was/was not accepted

Instructions for submitting in electronic format:

Note: Submission in electronic format requires Adobe acrobat version 8.0 or more recent.

1. Save the evidence for your activity as a separate PDF file. The file you create should appear as a single document when opened. Do not use the Acrobat option to make a PDF “portfolio” style file. Use the following format for the file name: Brief activity title_Date of activity(YYYYMMDD)
2. Create a cover page for your activity file with the following information displayed. This cover page must be the first page of the activity file.

• Full name of your organization	• Activity type, as submitted in PARS
• Activity title, as submitted in PARS	• Directly or jointly provided
• Activity date and location, as submitted in PARS	• Commercial support was/was not accepted

3. Create a bookmark for each attachment, and use the number of the attachment as your bookmark (ie, "Attachment 1.")
4. Save all of the PDF files to a single USB flash drive.

Submitting Self-Study Materials to the ISMA

The following materials must be shipped, using a method that has a reliable electronic, web-enabled delivery tracking system, for the ISMA's receipt by the published due date:

- Three hard copies of the Self-Study Report in binders, formatted and organized as specified
- One hard copy set of your evidence of performance-in-practice for the 15 activities selected
- One electronic copy of the Self-Study Report as a single PDF file on a USB flash drive
- One electronic copy of your evidence of performance-in-practice for the 15 activities selected on a USB flash drive
- One copy of the CME product(s) for any enduring materials, internet, or journal-based CME activities selected for performance-in-practice review

Do not ship original documents. Activity files will not be returned. Retain a duplicate set of materials including the Self-Study Report and evidence of performance-in-practice for your own reference at any time during the accreditation process, but especially at the time of the accreditation interview. If the need arises, the ISMA may ask for additional copies of a file or set of files.

SHIP TO:

Indiana State Medical Association
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CME Accreditation & Recognition Administrator
322 Canal Walk
Indianapolis, IN 46202
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