

Accreditation Interview Tips and Strategies

BEFORE	<p>CONTACT your co-surveyor as soon as possible for introductions, sharing availabilities and setting dates for collaborative pre-survey work.</p> <p>REVIEW materials and begin documenting whether you can locate all the components of the ACCME requirements, your comments and your questions.</p> <p>COLLABORATE with your co-surveyor to share findings and observations.</p> <p>DEVELOP the interview strategy together. Plan to discuss interview styles. Confirm which criteria need to be asked about and which criteria that do not need to be discussed.</p> <p>PLAN pauses and clean transitions to the next segment (e.g., Before we leave our discussion on your CME purpose and mission, is there anything else you'd like us to know?)</p> <p>BLOCK time on the day of the interview for a post-interview discussion with your co-surveyor.</p>
DURING	<p>ORGANIZE your questioning in structured segments.</p> <ul style="list-style-type: none"> • Tell the provider what you will be inquiring about (e.g., First, we'll talk about your purpose and mission and then we will talk about your CME activity planning...) • Ask questions, linking the discussion to ACCME's Criteria (e.g., Keeping in mind that the ACCME's criteria calls for providers to identify improvements to help better meet the CME mission, can you talk about...?) • Close restating what you have talked about (e.g., Thank you. I think that we've completed our discussions on your management of commercial support, now we'll be moving on to...) <p>EXAGGERATE your 'pauses' after questions and between sentences and segments so people can interject or respond.</p> <p>SEEK verbal feedback or reaction where normally non-verbal communication would be present.</p> <p>LISTEN REFLECTIVELY at all times.</p> <ul style="list-style-type: none"> • Be prepared for a question from the provider, or your co-surveyor, at all times. • Use phrases like "I am hearing you say..." or "If I understand, you are saying that..." • If asked if you have a follow-up question, do not just say "no". Instead say "No, I have the information I need on <topic just discussed>." <p>TROUBLESHOOT if a noise or echo begins to cause disruption. Ask everyone to use their mute buttons while not speaking. Ask everyone who is on a cell phone to change from "speaker" mode. Ask everyone to turn off or forward other telephones in the room.</p> <p>CALL the ISMA reception desk at 317-261-2060 if there is a technical problem with the call.</p> <p>TIPS: Document the names of individuals who will be talking during the call and acknowledge them by name during the discussion. You may need to "take the pulse" of the provider periodically, asking them to explain their understanding of the discussion.</p>
AFTER	<p>CALL your co-surveyor after you disconnect from the call to de-brief, affirm findings and to discuss any new information.</p> <p>COLLABORATE on the completion of reports, including requests for any additional materials, referring to and addressing questions in real time. Appoint a lead surveyor to complete your teams' reports.</p> <p>SUBMIT reports and contact the ISMA if there are any special issues that need to be discussed.</p>

Helpful Language to Use During Accreditation Interviews

INTRODUCTIONS	
<p>Introduce yourself and ask your co-surveyor to make a similar introduction.</p>	<p>“My name is Jane Doe and I am the Director of Continuing Education at General Hospital, an ACCME-accredited provider in Chicago, IL.”</p> <p>Avoid sharing: Background, history, experience</p>
<p>Put the provider at ease; explain your role as a listener, observer and advocate who facilitates the provider “telling their story” to the ACCME.</p>	<p>“I have been on your side of the table and understand the survey interview can be anxiety-producing. Our role as surveyors is not to “test” you, nor to decide your program’s Compliance with ISMA/ACCME Criteria and Policies. Rather, we are observers charged with helping you to provide the ISMA the clearest picture of your CME program. Today’s interview is only one part of a multi-step review process conducted by trained volunteers and ISMA staff. We appreciate the opportunity we have to help you put your best foot forward.</p>
<p>Ask the provider to make their introductions.</p>	<p>(You may want to take notes on names and roles as these introductions are made.)</p>
<p>Prepare the provider for what the interview will cover.</p>	<p>“We will focus our time on areas where we have questions or need additional information. There may be areas where we ask more questions than others, which is just to make sure we have a clear understanding of your activities and CME program. To facilitate the conversation, we will state our names when speaking and identify which form and which criterion when referring to documentation.”</p> <p>“Our strategy for the interview is... (Explain to the provider the strategy that you and your co-surveyor have planned for the interview).”</p>
TRANSITIONS	
<p>General transitions.</p>	<p>“Thank you, that helps me understand your process...”</p> <p>“That answers my question, thank you...”</p> <p>“Thank you, and can you tell me more about...”</p> <p>Avoid: Words or phrases that could imply compliance.</p> <p>Avoid: “Great, good, very good, wonderful...”</p> <p>Avoid: “Thank you, that is exactly what I was looking for.”</p>

TRANSITIONS CONTINUED

For Self-Study questions, refer to the self-study form followed by the criterion in question.

“One area I have a question about in the Self Study is Criterion 12. (pause to allow time for everyone to get on the same page). Could you help me understand...?”

For PiP questions, state the activity name and the activity date. And then state the criterion in question.

“Now, let’s take a look at your process for ensuring independence. In the 2014 Annual Assembly Activity that occurred June 15th of 2014, C7 SCS 1, (pause and allow time for everyone to get to that page), could you kindly explain

Avoid: “I have a question about C7 SCS 2 in Group 2.”

Avoid: “Turn to page 12 of the self-study report.”

Transition to a new topic.

“I’ve asked all of the questions I had for Criterion 2, do you have anything to add before we move on?”

“Now, let’s take a look at your process for disclosure, I would like to know how you

Avoid: “Great, that addresses Criterion 3, let’s move on.”

Avoid: “Wonderful, that is a very unique process.”

Avoid: “That sounds like an exciting project, tell me more about how you engaged your physicians in that activity.”

Repeat what you heard to ensure you understood accurately.

“What I am hearing is (topic just discussed), did I understand that correctly?”

When the provider asks a question back or wants consultative advice.

“I am asking several questions so that I have a clear idea of how you carry out the evaluation of your program. You’ve described it clearly for me.”

“I can understand why you would be interested in that information. I am here to gather information on your program today. You may want to check in with the ACCME to learn more about managing commercial support.”

“I have the information I need, thank you.”

Offering compliments without implying compliance.

“Accredited CME is a strategic asset for improving care and an important partner for change to your physicians. I would like to recognize the service you are providing to your physician learners by supporting an accredited CME program.”

“I can appreciate the efforts that go into conducting the self-study of a CME program. I hope that you have found the process a valuable exercise for your organization.”

TRANSITIONS CONTINUED

When the provider is not sure what you are asking.

“Please describe your process for collecting disclosure information from those in control of content.”

“Can you describe for me how you identify disclosure information for planners and/or reviewers?”

“Thank you, now I would like to know more about

CLOSING REMARKS

Explain to the provider that they have addressed all of your questions.

“We have now covered all of the areas that we were looking to explore and clarify. Thank you for helping us learn more about your program and processes.”

Give the provider an opportunity to provide additional information.

“Before we complete the interview, is there any other information you would like to share with us about your program?”

Mention any additional materials that were discovered as part of the interview.

“During our discussion about... {item}, you mentioned {materials} that may contribute to your evidence of {your process; i.e., “changes that are currently underway”}. We will let the ISMA know that these materials were identified during the interview, and they will be in contact with you to request the documentation.”

Close the interview and tell the provider what comes next.

“Thank you, again, for providing us with additional information about your CME program today. Your materials will be reviewed by the ISMA Commission on Medical Education at its next meeting. You will receive a decision within 30 days following the Commission’s decision.”

Sample Questions to Guide the Accreditation Interview

- ❖ We understand that every CME Program is different. Tell us about your organization's CME program ...
- ❖ What are the biggest accomplishments of your CME program?
- ❖ What is your organization trying to change with CME?
- ❖ What professional practice gaps do your physicians possess?
- ❖ What needs have you addressed to close those practice gaps?
- ❖ What steps do you go through to create activities that meet these needs?
- ❖ What do you do to ensure independence from commercial interests?
- ❖ How does your program identify and disclose relevant financial relationships?
- ❖ What is your process for managing commercial support and disclosing the information to learners?
- ❖ What do you know about the effectiveness of your activities/program to close the gaps you identified?
- ❖ How have you tried to enhance the effectiveness of your activities? Your program?
- ❖ Does your organization have any changes planned going forward?