



Accreditation Council for Continuing Medical Education
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November 8, 2004

From the CEO

ACCME is pleased to provide the CME community with our revamped web site with improved features that are intended to enhance the value of www.accme.org to its users. You will now find,

- Direct links to the most frequently requested documents
- Easily accessible explanations of ACCME's policies and procedures
- A map of the ACCME accreditation and recognition processes to assist users in finding the information they need depending on their place in the process(es)

These enhancements come at an important time for the CME enterprise of the United States and our CME colleagues around the world.

In 2004, the CME community has responded to important new demands that have been placed on it by the US healthcare system and the public. In the face of evidence regarding medical errors in healthcare facilities and resultant concerns over patient safety, the CME community has been asked to increase its accountability for improving physician performance by linking CME to quality healthcare. The organizations of medicine are addressing maintenance of certification, the repositioning of CME to support the professional development of physicians, competency based education and the challenges of maintenance of licensure – just to mention a few.

I think it is fair to say that the success of the ACCME and of ACCME providers in responding to these demands is being measured by CME's ability to deliver **CME that is designed to contribute to improving physician practice, is independent of commercial interests, and is based on valid content.**

Designed to contribute to improving physician practice: The ACCME has recognized the growing importance of the accreditation system's efforts to support providers in measuring their activities' impact on physician performance and/or patient health. This will be a primary focus of our 2005 educational and development initiatives.

Independent of commercial interests: For the sake and safety of patients, the continuing medical education in which physicians participate must be free of commercial bias. The ACCME believes that eliminating the influence of commercial interests in the planning and production of CME is the way to accomplish this, and these sentiments are reflected in the ACCME's 2004 updated Standards for Commercial Support of Continuing Medical Education and Standards to Ensure Independence in CME Activities (updated SCS). These updated SCS continue to require accredited providers to take responsibility for all aspects of the planning and implementation of their CME activities – including making decisions about content, faculty, and management of funds. In addition, they now require providers to have a mechanism in place to identify and resolve conflicts of interest in CME.

Based on valid content: Also for the sake and safety of patients, the continuing medical education in which physicians participate must be based on valid content. The presence of the ACCME accreditation statement on an activity means that the accredited providers are presenting activities that promote recommendations, treatments or manners of practicing medicine that fall within body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public. The public and the profession need to know that providers are not eligible

to receive or maintain ACCME accreditation if they present activities that promote treatments that are known to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients

As physicians' accountability to patients increases, so does the CME community's accountability for providing CME that positively impacts physician performance and/or health status. The ACCME is dedicated to developing realistic, but high standards that respond to the needs of the US healthcare system. As all CME providers are facing the same challenges in 2005, the ACCME will be working with recognized state medical societies to measure congruency in accreditation outcomes and ensure that one national standard of accreditation exists.

Data that we collect from providers regarding the size, scope and resources available to their CME programs shows that economic funding for CME overall has increased over the last several years. We also continue to see an increase in the nature and quality of *intangible* resources that are available to the CME enterprise; namely, quality human resources manifested in the people in CME that inspire creative and innovative CME practices. We know that the people in CME will ensure that the CME enterprise meets the challenges of the 21st century.

As always, do not hesitate to contact me or other ACCME staff with any questions you might have about ACCME requirements or expectations.

Sincerely,

A handwritten signature in black ink that reads "M Kopelow". The signature is written in a cursive, slightly slanted style.

Murray Kopelow, MSC, MD, FRCPC
ACCME Chief Executive