

Accreditation Criteria

Initial applicants seeking to achieve Provisional Accreditation, a two year term, must comply with Criteria 1, 2, 3, and 7-12. Providers seeking full Accreditation or reaccreditation for a four-year term must comply with Criteria 1-13. Providers also have the option to aim to achieve Accreditation with Commendation, a six-year term. Providers seeking commendation must comply with Criteria 1-13 and choose one of the following two options. Providers that will receive accreditation decisions between November 2017 and November 2019 will have the choice of using either Option A: Commendation Criteria (C16-C22) or Option B: Menu of New Commendation Criteria (C23-C38) to seek Accreditation with Commendation. Providers that will receive accreditation decisions after November 2019 must use Option B to seek Accreditation with Commendation.

[More information on Accreditation with Commendation options is available here.](#)

[Criterion 1](#)

The provider has a CME mission statement that includes expected results articulated in terms of changes in competence, performance, or patient outcomes that will be the result of the program.

[Criterion 2](#)

The provider incorporates into CME activities the educational needs (knowledge, competence, or performance) that underlie the professional practice gaps of their own learners.

[Criterion 3](#)

The provider generates activities/educational interventions that are designed to change competence, performance, or patient outcomes as described in its mission statement.

[Criterion 4](#)

This criterion has been eliminated effective February 2014.

[Criterion 5](#)

The provider chooses educational formats for activities/interventions that are appropriate for the setting, objectives, and desired results of the activity.

[Criterion 6](#)

The provider develops activities/educational interventions in the context of desirable physician attributes [eg, Institute of Medicine (IOM) competencies, Accreditation Council for Graduate Medical Education (ACGME) Competencies].

[Criterion 7](#)

The provider develops activities/educational interventions independent of commercial interests. (SCS 1, 2, and 6).

[Criterion 8](#)

The provider appropriately manages commercial support (if applicable, SCS 3 of the ACCME Standards for Commercial SupportSM).

[Criterion 9](#)

The provider maintains a separation of promotion from education (SCS 4).

[Criterion 10](#)

The provider actively promotes improvements in health care and NOT proprietary interests of a commercial interest (SCS 5).

[Definition of a Commercial Interest](#)

A commercial interest is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests - unless the provider of clinical service is owned, or controlled by, an ACCME-defined commercial interest. A commercial interest is not eligible for ACCME accreditation. Commercial interests cannot be accredited providers and cannot be joint providers. Within the context of this definition and limitation, the ACCME considers the following

types of organizations to be eligible for accreditation and free to control the content of CME: 501-C Non-profit organizations (Note, ACCME screens 501c organizations for eligibility. Those that advocate for commercial interests as a 501c organization are not eligible for accreditation in the ACCME system. They cannot serve in the role of joint provider, but they can be a commercial supporter.) Government organizations Non-health care related companies Liability insurance providers Health insurance providers Group medical practices For-profit hospitals For profit rehabilitation centers For-profit nursing homes Blood banks Diagnostic laboratories ACCME reserves the right to modify this definition and this list of eligible organizations from time to time without notice.

[Criterion 11](#)

The provider analyzes changes in learners (competence, performance, or patient outcomes) achieved as a result of the overall program's activities/educational interventions.

[Criterion 12](#)

The provider gathers data or information and conducts a program-based analysis on the degree to which the CME mission of the provider has been met through the conduct of CME activities/educational interventions.

[Criterion 13](#)

The provider identifies, plans and implements the needed or desired changes in the overall program (eg, planners, teachers, infrastructure, methods, resources, facilities, interventions) that are required to improve on ability to meet the CME mission.

[Criterion 14](#)

This criterion has been eliminated effective February 2014.

[Criterion 15](#)

This criterion has been eliminated effective February 2014.

Accreditation with Commendation - Option A

[Criterion 16](#)

The provider operates in a manner that integrates CME into the process for improving professional practice.

[Criterion 17](#)

The provider utilizes non-education strategies to enhance change as an adjunct to its activities/educational interventions (e.g., reminders, patient feedback).

[Criterion 18](#)

The provider identifies factors outside the provider's control that impact on patient outcomes.

[Criterion 19](#)

The provider implements educational strategies to remove, overcome or address barriers to physician change.

[Criterion 20](#)

The provider builds bridges with other stakeholders through collaboration and cooperation.

[Criterion 21](#)

The provider participates within an institutional or system framework for quality improvement.

[Criterion 22](#)

The provider is positioned to influence the scope and content of activities/educational interventions.

Accreditation with Commendation - Option B

[Criterion 23](#)

Members of interprofessional teams are engaged in the planning and delivery of interprofessional continuing education (IPCE).

[Criterion 24](#)

Patient/public representatives are engaged in the planning and delivery of CME.

[Criterion 25](#)

Students of the health professions are engaged in the planning and delivery of CME.

[Criterion 26](#)

The provider advances the use of health and practice data for healthcare improvement.

[Criterion 27](#)

The provider addresses factors beyond clinical care that affect the health of populations.

[Criterion 28](#)

The provider collaborates with other organizations to more effectively address population health issues.

[Criterion 29](#)

The provider designs CME to optimize communication skills of learners.

[Criterion 30](#)

The provider designs CME to optimize technical and procedural skills of learners.

[Criterion 31](#)

The provider creates individualized learning plans for learners.

[Criterion 32](#)

The provider utilizes support strategies to enhance change as an adjunct to its CME.

[Criterion 33](#)

The provider engages in CME research and scholarship.

[Criterion 34](#)

The provider supports the continuous professional development of its CME team.

[Criterion 35](#)

The provider demonstrates creativity and innovation in the evolution of its CME program.

[Criterion 36](#)

The provider demonstrates improvement in the performance of learners.

[Criterion 37](#)

The provider demonstrates healthcare quality improvement.

[Criterion 38](#)

The provider demonstrates the impact of the CME program on patients or their communities.

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