

EXECUTIVE SUMMARY OF THE NOVEMBER 2012 MEETINGS OF THE ACCME BOARD OF DIRECTORS

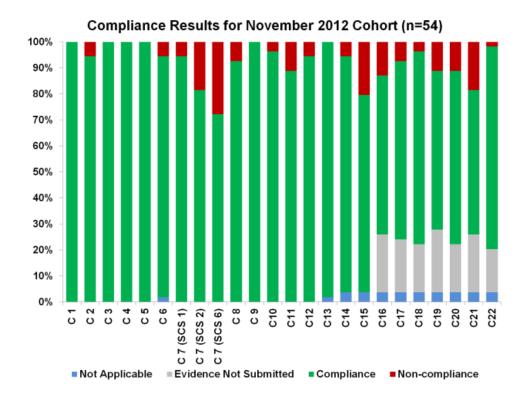
Accreditation Decision Making

The ACCME ratified 54 accreditation and reaccreditation decisions. This included 14 providers that received **Accreditation with Commendation** (26%), which confers a 6-year term of accreditation. Thirty-two (59%) received **Accreditation**; 16 of these providers (30%) are required to submit progress reports; 16 (30%) do not need to submit progress reports. Six providers (11%) were placed on **Probation** and are required to submit progress reports. There were 2 initial applicants; both received **Provisional Accreditation** (4% of the total; 100% of initial applicants).

The Board ratified 28 **progress report** decisions. Of those, 20 (71%) progress reports demonstrated compliance with all ACCME requirements previously found in noncompliance. Eight progress reports (29%) did not yet demonstrate compliance in all requirements and the providers are required to submit another progress report.

As of November 2012, there are 701 ACCME-accredited providers. This number includes 16 initial applicants that successfully achieved Provisional Accreditation from the ACCME in 2012. There are 1,330 providers accredited by ACCME Recognized Accreditors (state or territory medical societies that accredit local organizations offering CME).

This cohort's performance for each of the Accreditation Criteria is depicted below.



Maintenance of Recognition

The ACCME reviewed five <u>recognition</u> progress reports. Four were accepted; one Recognized Accreditor needs further improvement. Recognition decisions are based on the <u>Markers of Equivalency</u>. The Board heard a report about the transition to <u>Maintenance of Recognition</u>. All Recognized Accreditors have now been evaluated for their compliance with the Markers of Equivalency. The Board reviewed and approved the Maintenance of Recognition monitoring plan, which includes audits and education for Recognized Accreditors to support equivalency. The Board adopted Maintenance of Recognition in 2011 in order to improve the quality, value, and efficiency of the recognition process and to enable the ACCME and Recognized Accreditors to identify areas for improvement on an ongoing basis.

Joint Accreditation of Continuing Education for the Health Care Team

The ACCME ratified decisions for two providers receiving joint accreditation: Creative Educational Concepts, LLC; and Duke University Health System. The decisions have also been ratified by the Accreditation Council for Pharmacy Education (ACPE) and the American Nurses Credentialing Center (ANCC). The joint accreditation process was launched in 2009 by the ACCME, the ACPE, and the ANCC.

Substantial Equivalency Agreement with Royal College of Physicians and Surgeons of Canada

The ACCME reaffirmed the substantial equivalency of the Royal College of Physicians and Surgeons of Canada's (RCPSC) CME accreditation system with the ACCME. The recognition of the RCPSC and the <u>substantial equivalency framework</u> build on a long-standing, collaborative relationship between the Canadian CME system and the ACCME.

Guest Discussions Regarding Interprofessional Continuing Education

The Board convened discussions with invited guests about advancing interprofessional continuing education in support of interprofessional collaborative practice. Member organization liaisons joined the discussion. The discussions were part of the ACCME's long-standing commitment to advancing interprofessional education and collaboration with other accreditors. The discussions support the strategic imperatives to foster ACCME leadership and engagement and to facilitate regulatory alignment and simplification.

James M. Galloway, MD, Assistant US Surgeon General, US Public Health Service, and Regional Health Administrator, US Department of Health & Human Services, Region V, discussed his experience working with the Indian Health Service and the National Native American CVD Prevention Program as an example of how interprofessional education and teambased care can address health care disparities. Kathleen Mudd, MBA, Vice-President for Product Delivery, National Committee for Quality Assurance; and Rowan K. Zetterman, MD, Dean, Creighton University School of Medicine, discussed their experience as jointly accredited providers, describing successful examples of interprofessional continuing education. Karen Drenkard, PhD, RN, Executive Director, American Nurses Credentialing Center; and Peter H. Vlasses, PharmD, DSc (Hon.), Executive Director, Accreditation Council for Pharmacy Education, joined with Murray Kopelow, MD, MS(Comm), ACCME President and CEO, to discuss their experience modeling interprofessional collaborative practice through the joint accreditation initiative.

ACCME's 2011 Strategic Imperatives

The Board discussed the progress made in implementing the ACCME 2011 strategic imperatives: Foster ACCME Leadership and Engagement; Evolve and Simplify the Accreditation Standards, Process, and System; Explore and Build a More Diversified Portfolio of ACCME Products and Services. The ACCME is actively engaged with organizations across the health professions and continuum of medical education, nationally and internationally, to support a more effective, aligned system of physician accountability. The ACCME has convened more than 20 focused discussions about the strategic imperatives with more than 1,000 stakeholders. Participants discussed the value of the accreditation standards, process, and system, and offered suggestions for improvement. The ACCME will continue to engage with the stakeholder community and identify potential strategies for simplifying and evolving the accreditation standards, process, and system.

ACCME's Decision-Making Process: Ensuring Consistency and Accuracy

The Board heard a report from the Decision Committee about an audit of the ACCME's decision-making process, which included an analysis of the internal controls the ACCME employs to ensure the consistency and accuracy of decision-making. The Board agreed that the ACCME's internal controls are effective in supporting valid and consistent accreditation decisions, and instructed the ACCME staff to make public data and information descriptive of the internal controls.

Management of Payments to Reserve Space for CME Activities Held at Other Organizations' Meetings

In response to questions and input from accredited providers, the ACCME has issued a clarification concerning funds paid to reserve space for accredited CME activities (sometimes called satellite symposia) held in conjunction with other organizations' meetings. All funds paid by ACCME-defined commercial interests to reserve space to hold accredited CME activities are considered commercial support. The accredited provider responsible for the activity held in the reserved space must manage and report the funds as commercial support, in accordance with ACCME commercial support requirements. The ACCME believes this clarification will enhance the consistency and transparency of commercial support reporting. The ACCME has provided a news item and Q&A in support of this clarification.

ACCME 2013 Budget

The Finance Committee conducted an in-depth review of the ACCME's financial and operational strategies, including projected budgets through 2016. The Board's goal is to take a prudent and conservative approach to financial management, while maintaining the quality of ACCME's programs and services for accredited providers and Recognized Accreditors. The Board approved a budget with projected 2013 expenses of \$4,929,782 and estimated revenues of \$4,787,810.

Elections

The following individuals were elected or reelected to the Board and its committees:

Board of Directors

Shannon K. Bolon, MD, MPH
Ellen Cosgrove, MD
Galicano F. Inguito, Jr., MD, MBA
James McDeavitt, MD
Darlyne Menscer, MD

Sandra Norris, MBA Victor I. Reus, MD Michael Romano, MD, MHA David A. Swankin, JD

Accreditation Review Committee

Robert Baron, MD, MS, Chair Frank Berry, CCMEP Edward Bope, MD Robert Buckley, MD G. Robert D'Antuono, MHA Linda Famiglio, MD Linda Gage-White, MD, PhD, MBA Ronald Johnson, MD Nancy Lowitt, MD, EdM Sylvia Scherr, MS, RN Brooke Taylor, MPH Samuel H. Wald, MD Suzanne Ziemnik, MEd

Committee for Review and Recognition

Thomas Miller, MD Michael Romano, MD Marshall Smith, MD Adela Valdez, MD

2013 Officers

The Board named <u>James Burke, MD, as 2013 Chair, Carlyle Chan, MD, as 2013 Vice-Chair</u>, and James McDeavitt, MD, 2013 Treasurer of the ACCME at the conclusion of the meeting.

Service Awards

The ACCME is only successful in its mission because of its dedicated volunteers (Board members, committee members, surveyors), partners in accreditation (the Recognized Accreditors), and accredited providers. The Board had the privilege of honoring ACCME volunteers and paying special tribute to those who have demonstrated exemplary and long-term service to the ACCME.

Recognition of Leadership as ACCME's 2011 Vice-Chair and 2012 Chair Sandra Norris, MBA

Recognition of Volunteers Who Have Completed Their Terms of Service

<u>Board of Directors</u>

<u>Accreditation Review Committee</u>

Timothy W. Holder, MD, FAAP Ruth Horowitz, PhD Debra Perina, MD Harold Sauer, MD Dick Berger, MD Stanley Marks, MD Luanne Thorndyke, MD Surinder "Sam" Kad, MD

Committee for Review and Recognition

Timothy W. Holder, MD, FAAP Steve Willis, MD

Recognition for Completion of Surveys

25 Or More Accreditation Surveys

50 or More Accreditation Surveys

Leslie Aguayo

Sally O'Neill, PhD

Carlos H. Moran Karen M. Overstreet Shelly B. Rodrigues

75 or More Accreditation Surveys
Elizabeth Murphy, EdD, RN

2012 Robert Raszkowski, MD, PhD, ACCME Hero Award

The Board honored the following volunteers with the 2012 Robert Raszkowski, MD, PhD, ACCME Hero Award:

Jerilyn Glass, MD, PhD Carol S. Havens, MD Timothy W. Holder, MD, FAAP John R. Kues, PhD Kim Edward LeBlanc, MD, PhD James Liljestrand, MD, MPH Sandra Norris, MBA David Pieper, PhD Harold J. Sauer, MD Stephen E. Willis, MD