TRANSFORMING CONTINUING MEDICAL EDUCATION TOGETHER

2017 Highlights from the Accreditation Council for Continuing Medical Education (ACCME®)
The ACCME’s mission is the identification, development, and promotion of standards for quality continuing medical education (CME) utilized by physicians in their maintenance of competence and incorporation of new knowledge to improve quality medical care for patients and their communities.

The ACCME fulfills its mission through a voluntary self-regulated system for accrediting CME providers and a peer-review process responsive to changes in medical education and the healthcare delivery system.
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INVESTING IN PEOPLE

Looking back on the past year, I’m excited about the progress we’ve made to transform continuing medical education (CME) through innovation, evolution, and alignment. From our new commendation criteria to our collaborations with regulatory systems to our expanded educational initiatives for CME providers, we’re working hard to make meaningful change for educators, clinicians, and ultimately patients.

Our CME community has much to be proud of:

- Every day clinicians can choose from more than 3,000 hours of accredited CME. The numbers of educational events and participants, and the diversity of educational approaches, grows each year.
- Our Menu of Criteria for Accreditation with Commendation represents our community’s vision of the future of CME. From engaging with students, patients, and teams to tackling population and public health issues, CME providers that meet these criteria will show the power of education to respond to the changing healthcare environment.
- As a result of collaborations between accreditors, certifying boards, and educators, we’ve expanded the opportunities for physicians to participate in education that counts for multiple requirements, thus reducing burdens and allowing clinicians more flexibility in choosing education that meets their needs.
- Through the alignment of ACCME/American Medical Association requirements, CME providers now have the freedom and flexibility to employ blended or new approaches to driving meaningful learning and change.
- To increase recognition for interprofessional continuing education (IPCE), we collaborated with our nursing and pharmacy accreditor colleagues to initiate a new, optional credit mark in 2017 for jointly accredited providers. The IPCE credit mark and statement identifies activities designed to improve team collaboration and patient care.
- We’ve increased our engagement with healthcare leaders to promote the value of CME as a strategy for fulfilling institutional and health system priorities.
- Government agencies, including the Food and Drug Administration and Centers for Medicare & Medicaid Services, recognize CME’s value and leverage accredited CME to support quality and safety initiatives.
- Our accreditation standards have become a model for CME systems and providers around the world. We welcome our growing engagement with CME leaders and institutions from Europe to Asia to Africa.
Going forward, I’m confident that we will continue to transform CME to better address many of the challenges we face, from clinician well-being to public health imperatives. In my interactions with institutional leaders, I urge them to recognize the capacity of accredited CME to be part of the solution to many of our healthcare problems. I encourage them to embrace the continuing professional development of clinicians as an organizational responsibility and opportunity—and to invest in their CME professionals and to value their contributions to advancing care quality.

At ACCME, we are also investing in the CME community. With our new annual meeting and online learning portal, as well as our other educational offerings, we aim to build a community of practice that supports CME professionals in achieving their full potential. In the coming years, we plan to promote CME scholarship so that we build a solid foundation of best practices based on sound research, enabling us to learn from each other, continually improve the effectiveness of education, and demonstrate how accredited CME measurably improves healthcare.

With this report, we celebrate the remarkable work that everyone in our CME community—from staff and volunteers to CME professionals and faculty and learners—does every day to make a difference.

We look forward to continuing our work together, as we fulfill our shared aspiration to enhance education, drive improvements in clinician and team performance, and—most important—to optimize care for the patients we all serve.

Graham McMahon, MD, MMSc
President and CEO
Created new visual identity
Produced inaugural annual meeting
Implemented new commendation criteria
Enhanced data collection system
Collaborated with AMA to simplify and align requirements
Expanded CME that counts for MOC
Launched the ACCME Academy
Developed IPCE credits with colleague accreditors
Received recognition in CMS rule
Engaged in strategic planning

A TRANSFORMATIVE YEAR
WHO WE ARE

The ACCME leverages the power of education to drive quality in the medical profession and improve care for patients.

The ACCME accredits CME providers, creating a framework that supports, inspires, and motivates educators to achieve their full potential. We set the standards for education that accelerates learning, change, and growth in healthcare. Our standards reflect the values of our educator community and respond to the evolving healthcare environment. As a result, clinicians and teams can drive improvement in their practice and optimize the care, health, and wellness of their patients.

OUR COMMUNITY

Every day clinicians can choose from more than 3,000 hours of accredited CME. Accredited CME is a tremendous resource—offering clinicians, educators, and health leaders the power and capacity to address many of the challenges we face in our changing healthcare environment.

Our community of more than 1,800 CME providers offers physicians and healthcare teams an array of resources to promote quality, safety, and the evolution of healthcare.

Accredited CME providers represent a range of organizations from national physician membership organizations to rural hospitals. Some specialize in local, community-based health issues, others focus on national and international health priorities, and others advance interprofessional continuing education (IPCE) and team-based care.

The geographic distribution and diversity of CME providers means that clinicians and teams have access to education where they live and work that addresses local, national, and international healthcare priorities.

Welcome to the 22 new ACCME-accredited and jointly accredited providers that joined us in 2017 and congratulations to the 131 providers that received reaccreditation.

We recently began accrediting organizations outside the US. So far, we have been pleased to welcome organizations from Canada, the United Kingdom, Pakistan, and Qatar to our CME community.
THANK YOU TO OUR VOLUNTEERS

As it has since its inception, the ACCME System continues to rely on our community of dedicated volunteers. Currently, approximately 165 volunteers serve on the national level as accreditation surveyors, and as members of the Accreditation Review Committee, Joint Accreditation Review Committee, Committee for Review and Recognition, and Board of Directors. Thousands of volunteers serve at the state level as surveyors, accreditation reviewers, and committee members. In total, an estimated 20,000 people across the country support the system.

We thank all the volunteers for their commitment to achieving our mission and to sustaining a high-quality, self-regulated CME system that advances clinician performance and patient care.
AN INTERNATIONAL, INTERPROFESSIONAL COMMUNITY

We were pleased this year to recognize the substantial equivalency of the Federation of the German Chambers of Physicians. Other international accreditation systems that hold this distinction include:

> Committee on Accreditation of Continuing Medical Education (Canada)

> European Board for Accreditation in Cardiology (EBAC)

> Royal College of Physicians and Surgeons of Canada

> Oman Medical Specialty Board

> Qatar Council for Health Practitioners

We are proud to be recognized as substantially equivalent by EBAC, the Royal College, and the German Chambers.

In addition to international accreditors, the substantial equivalency framework also includes US accreditors from other professions. This year, we were pleased to recognize the Council on Optometric Practitioner Education (COPE) as substantially equivalent. The recognition builds on the long-standing relationship between the ACCME and COPE.

Our substantial equivalency framework facilitates recognition between continuing education accreditors and the ACCME. The framework defines substantial equivalency as a relationship between accreditors based on shared principles and values, while recognizing and accepting differences.

OUR ACCREDITOR COLLEAGUES

We appreciate the collaborative efforts and dedication of our colleague accreditors, whose work ensures that all providers in the ACCME System meet high standards for educational excellence and independence.

> ACCME Recognized Accreditors: Using a framework of equivalency, we recognize 41 state and territory medical societies as accreditors of regional and local CME programs.

> Joint Accreditation for Interprofessional Continuing Education™: We collaborate with our accredditor colleagues in pharmacy and nursing to accredit organizations that offer continuing education by the team, for the team. We are eagerly planning to expand this collaboration to include additional professions in the near future.
One of our most visible changes this year is our new look, with a new logo, tagline, and color palette that emphasize lifelong learning and celebrate the forward trajectory of the CME community.

The ACCME’s new visual identity reflects the ACCME’s evolving role as a coach, in addition to regulator, as we work together with our CME provider community to expand the flexibility, inclusiveness, and diversity of education—with the aim of improving care for the patients and communities we all serve.

MARKS FOR ACCREDITED CME PROVIDERS

We also created new marks for CME providers to use to communicate their status of Accreditation or Accreditation with Commendation.

The provider marks are adaptations of the ACCME logo, and serve to create a recognizable, consistent visual identity. The marks serve as a message from accredited CME providers to clinicians: This education is relevant to your needs, evidence-based, effective, and independent of commercial influence.

This initiative is part of the ACCME’s effort to build visibility for the CME community and communicate the value of accreditation and accredited CME.

Our new logo represents our aspirations for accredited CME. Working with our community of healthcare leaders, educators, clinicians, and patients, we are leveraging the power of education to advance quality in medicine and optimize care, health, and wellness—today and in the years to come.

Todd Dorman, MD
2017 Chair, Board of Directors, ACCME

BUILDING CME VISIBILITY
GUIDEPOSTS FOR THE FUTURE OF CME: NEW COMMENDATION CRITERIA

We are pleased to report that CME providers have begun to implement the ACCME’s Menu of Criteria for Accreditation with Commendation. These newly evolved criteria—designed to serve as a guidepost for the future of CME—reflect the values, principles, and aspirations that the community of educators shared with us over the past several years. Our goal is to encourage and reward accredited CME providers for implementing best practices in pedagogy, engagement, evaluation, and change management, and for focusing on generating meaningful outcomes.

The menu comprises 16 criteria, divided into 5 categories:
> Promotes Team-based Education
> Addresses Public Health Priorities
> Enhances Skills
> Demonstrates Educational Leadership
> Achieves Outcomes

We adopted the menu approach to create flexibility, reflect the diversity of the CME community, and offer a pathway for all CME provider types to achieve Accreditation with Commendation. Meeting the expectations of the commendation criteria is an option—not a requirement—for CME providers.

We appreciate the CME community’s high level of participation in the process and we are doing everything we can to support the successful adoption of the new criteria and the evolution of educational strategies to reflect best practices.

SUPPORTING PATIENT ENGAGEMENT IN CME

We encourage the CME community to not only aim to improve patient care, but also to strive toward that goal with patients as partners. That’s why our Menu of Criteria for Accreditation with Commendation includes Criterion 24, which recognizes providers that incorporate patients and/or public representatives as planners and faculty in planning and delivery of CME. To support patient engagement in CME, we created a dedicated webpage with links to FAQ, examples, a tip sheet, CEO’s message, and video (shown above) featuring the perspective of patients, advocates, physicians, and educators.
LEARNING TOGETHER

ACCME 2017 MEETING: EVOLUTION, INNOVATION, AND ALIGNMENT

We were pleased to debut our inaugural ACCME Meeting in 2017. About 400 participants from across the CME and healthcare communities met in Chicago in April to explore how evolution, innovation, and alignment in education advances health professional practice and patient care.

Leading by example, we worked with faculty and participants to create an interactive and engaging educational experience, incorporating small group exercises, case study discussion, and reflection opportunities.

Thank you to the participants, volunteers, and staff who joined us—your participation and rich discussion made the meeting a success!

Join us for our ACCME Meetings in 2018 and beyond.

ACCME 2017 MEETING

- 400 Participants
- 57 Faculty
- 3 Keynotes
- 42 Breakout Sessions

PARTICIPANT FEEDBACK

- Excellent format! Lots of takeaways from this, thank you.
- Excellent [MOC] session to make [me] feel confident that we can do this!
- Excellent. Exciting. Thank you!!! This is why I love CME. We CAN make a difference.
- I got tools I can use to innovate and bring new activities to my program.
- Outstanding – better understanding of what it requires to have patients involved.
- Received great innovative ideas.
MORE EDUCATIONAL OPPORTUNITIES

In addition to our annual meeting, we continue to offer our Accreditation Workshop each August and many other live and online educational opportunities year-round for the CME community of staff and volunteers.

COMING SOON: THE ACCME ACADEMY

The ACCME Academy, our online learning management system, will offer self-directed learning plans and numerous resources for CME professionals. We thank the staff and volunteers of our ACCME Recognized Accreditors (state/territory medical societies), who are currently piloting the system. The ACCME Academy will open to the CME provider community in 2018. We hope you will join us!

NEW OFFICES AND MEETING SPACE

We moved into our new offices in March. We have a long-standing relationship with the Accreditation Council for Graduate Medical Education (ACGME), our colleague accreditor, and we had the opportunity to continue to co-locate when ACGME moved its offices. The new location facilitates our continued collaboration with ACGME, sustains ACCME’s growth, and provides a more secure, cost-effective work environment.

Our new space gives us the opportunity to host meetings for our accredited CME providers, leadership, volunteers, and other stakeholders in the healthcare and continuing education communities.
WE’RE ON THE MOVE

Our staff have traveled across the US and around the world to communicate the strategic value of accredited CME to health leaders, build collaborations with colleague accreditors and regulatory bodies, and offer guidance for CME providers about evolving their programs.

Here are some of the events we participated in during 2017:

> State medical society conferences for local CME providers in 26 states
> Alliance for Continuing Education in the Health Professions Annual Meeting
> Alliance of Independent Academic Medical Centers Annual Meeting
> American Association of Medical Society Executives National Specialty CEO Summit
> American Board of Medical Specialties 2017 Conference
> Association of American Medical Colleges Council of Deans Meeting
> Association for Hospital Medical Education Institute
> Association for Medical Education in Europe Annual Meeting
> Association of Regulatory Boards of Optometry Annual Meeting
> Cologne Consensus Conference
> Council of Medical Specialty Societies Annual Meeting
> European CME Forum
> Federation of State Medical Boards Annual Meeting
> Global Forum on Innovation in Health Professional Education of the National Academies of Sciences, Engineering, and Medicine
> International Association Medical Regulatory Authorities Symposium 2017
> Interprofessional Clinical Learning Environment Symposium
> Institute For Credentialing Excellence Annual Meeting
> National Board of Medical Examiners Annual Meeting
> National Quality Registry Network/Council of Medical Specialty Societies National Registry Conference
> New England Journal of Medicine Group Education Workshop: Learning at the Crossroads
> Society of Academic CME Annual Conference
> Society of Osteopathic Specialty Executives Annual Meeting
ENHANCING PARS: MORE FLEXIBILITY, FUNCTIONALITY FOR CME PROVIDERS

We enhanced the Program and Activity Reporting System (PARS) to offer more flexibility and functionality for CME providers. We implemented these enhancements in response to requests from accredited providers, Recognized Accreditors, and the volunteers who support the accreditation process.

> **The accreditation process is now online for ACCME-accredited providers.** Providers no longer need to submit materials via email, flash drives, or hard copies; and can see their accreditation history in PARS.

> **Unified system for jointly accredited providers:** The enhancements to PARS include an interface for jointly accredited providers, enabling them to use one system, Joint Accreditation PARS (JA-PARS), to report all their activities, including education for teams, physicians, nurses, and/or pharmacists.
COLLABORATION AND ALIGNMENT

Through collaborations with our colleagues in the accreditation, credit, and certifying systems, we’re working to simplify and streamline processes for CME providers, drive innovation and flexibility in education, reduce burdens for learners and educators, and expand lifelong learning options for clinicians and teams.

AMA/ACCME ALIGNMENT AND SIMPLIFICATION

In response to feedback from clinicians and educators, the American Medical Association (AMA) and the ACCME collaborated to simplify and align our expectations for accredited CME activities certified for AMA PRA Category 1 Credit™.

Reflective of the AMA and ACCME’s shared values, the simplification encourages innovation and flexibility in accredited CME while continuing to ensure that activities meet education standards and are independent of commercial influence.

These changes mean fewer rules. As part of the alignment, the AMA simplified and reduced its learning format requirements to provide more flexibility for CME providers. To further encourage innovation in educational design and delivery, CME providers may design and deliver an activity that uses blended or new approaches to driving meaningful learning and change. Educators are free to deploy new technologies such as simulation, adaptive e-learning, virtual reality, gamification, and social media into their medical education approaches, to cite just a few examples.

As providers design and describe innovative approaches to education, we plan to share what we learn about the effectiveness of these evolved formats with the community to promote the adoption of best practices.

Partnering with ACCME, the ABP is able to simplify the process for finding CME activities that qualify for MOC credit, then claiming that credit. This change fits right in with other enhancements the ABP is making to MOC.

By collaborating with ACCME, ABIM will open the door to even more options for physicians engaged in MOC and will allow them to get MOC credit for high-quality CME activities they are already doing.

Virginia A. Moyer, MD, MPH, Vice President, Maintenance of Certification and Quality, ABP

Virginia A. Moyer, MD, MPH, Vice President, Maintenance of Certification and Quality, ABP

We believe that our newly adopted proposal will support the evolution of CME to better meet the needs of educators, physicians, and the patients they serve.

Susan Skochelak, MD
AMA Group Vice President for Medical Education

Richard J. Baron, MD, President and CEO, ABIM
CME THAT COUNTS FOR MOC

We continue to collaborate with certifying boards to facilitate the integration of CME and Maintenance of Certification (MOC), enabling CME providers to use one unified system to register CME activities that count for MOC.

More than 350 accredited CME providers have registered over 14,000 activities that count for the Maintenance of Certification (MOC) programs of the following boards:
> American Board of Anesthesiology (ABA)
> American Board of Internal Medicine (ABIM)
> American Board of Pediatrics (ABP)

Since the ACCME began collaborating with the specialty boards, beginning with ABIM in 2015, the number and diversity of accredited CME activities that count for MOC and learner participation in these activities have continued to grow, making a meaningful difference to clinicians and educators who are working to improve healthcare in their communities.

Providers and diplomates can search for the more than 5,700 currently available CME activities that count for MOC by visiting CME Finder, our online search tool.

New in 2017: We expanded our collaboration with ABIM, enabling CME providers to register activities that count for ABIM Practice Assessment MOC points in addition to ABIM Medical Knowledge MOC points.

BUILDING BRIDGES ACROSS THE CONTINUUM

The ACCME and Accreditation Council for Graduate Medical Education (ACGME) continue to work together through the ACCME/ACGME Coordinating Committee, which serves as a bridge between the two systems. The goals of the committee are to identify opportunities and strategies for creating a seamless and effective learning environment across the continuum of medical education and to support the development of each clinician as a lifelong learner who delivers optimal care to patients.

This collaboration has created a central repository of learning activities that our diplomates can use to find relevant content to fill knowledge gaps and enhance patient care.

Deborah J. Culley, MD
Secretary, ABA

COLLABORATION AWARD

We were honored in January 2017 when the Alliance for Continuing Education in the Health Professions (ACEhp) recognized the collaborative work of ABIM and ACCME by presenting us with its Award for Outstanding Educational Collaboration. The award is given to exceptional continuing education professionals and leaders “who are paving the way to improve patient care through education.”
ADVANCING HEALTHCARE EDUCATION BY THE TEAM, FOR THE TEAM

In collaboration with our colleague accreditors in nursing and pharmacy, we continue to evolve Joint Accreditation for Interprofessional Continuing Education, the first and only program in the world offering three accreditations through one unified system.

COMMUNITY OF PRACTICE

To provide inspiration and practical support for interprofessional continuing education (IPCE) professionals, Joint Accreditation created a vibrant community of practice by initiating a series of Leadership Summits, supported (in part) by the Josiah Macy Jr. Foundation. Together with the team of accreditors, participants identify best practices, key recommendations, and research strategies. Reports and videos based on the summits are widely disseminated to motivate change and growth in the CE field.

“Our learners treat patients in teams, they support each other in teams—and we want to provide an opportunity for them to learn and grow together as teams. Our responsibility as accreditors is to give IPCE professionals the freedom to innovate, so they can deliver the highest possible quality continuing education for teams.”

Kate Regnier, MA, MBA
Executive Vice President, ACCME
ABOUT JOINT ACCREDITATION FOR INTERPROFESSIONAL CONTINUING EDUCATION™

Research shows that IPCE makes a substantial difference to healthcare teams and the patients they serve. Recognizing that professionals in practice need to learn from, about, and with each other to transform the healthcare system, the ACCME, Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC) collaborated to create Joint Accreditation for Interprofessional Continuing Education™ in 2009. Joint Accreditation established the first standards for continuing education planned by the team, for the team, building a framework that has become a national and international model for promoting the development of IPCE programs specifically designed to improve interprofessional collaborative practice (IPCP) in healthcare delivery. Visit www.jointaccreditation.org for more information.

Available at www.jointaccreditation.org:

Promoting Research across the Continuum of Health Professions Education: Making Patient Care Better—Report from the 2017 Joint Accreditation Leadership Summit

By the Team for the Team: Evolving Interprofessional Continuing Education for Optimal Patient Care—Report from the 2016 Joint Accreditation Leadership Summit
INCREASING RECOGNITION

To increase recognition for IPCE, Joint Accreditation initiated a new, optional credit mark in 2017. The IPCE credit mark and statement, which can only be used by jointly accredited providers, enables healthcare leaders, team members, regulatory bodies, and other stakeholders to identify activities designed to improve team collaboration and patient care.

A GROWING COMMUNITY

By the end of 2017, Joint Accreditation for Interprofessional Continuing Education had grown to include 64 jointly accredited providers including hospitals/health systems, medical education companies, government agencies, medical schools, and specialty societies.

Providers report that Joint Accreditation has resulted in a substantial increase in the number of IPCE activities they offer. Providers demonstrate measurable improvements in team performance, patient care, and care processes.
PROMOTING CLINICIAN WELL-BEING

The ACCME joined the National Academy of Medicine’s recently launched action collaborative on clinician well-being and resilience, a network of more than 50 organizations committed to reversing trends in clinician burnout.

We believe that accredited CME can play an important role in supporting clinician wellness. CME is a vehicle to teach self-care and build clinician awareness of work-life balance and the sensitivity to recognize when they, or their colleagues, are struggling. Healthcare leaders who ensure that clinicians have sufficient time and resources to engage in their own professional development help to improve those clinicians’ well-being. We will continue to promote the implementation of specific strategies that demonstrate our commitment to clinician well-being and support our community of accredited educators who share these values.

“Healthcare professionals flourish when they can practice at the top of their ability, witness the positive results of their efforts, and work in a conducive environment among supportive colleagues. Leaders and educators can foster continuous improvement by investing in their human capital, thus strengthening the role of healthcare professionals as healers. The ACCME affirms the role of continuous professional development in supporting safe and effective patient care and the power of education to convene colleagues, create a collaborative culture, and address the isolation, disempowerment, and despair that lead to burnout.”

—Excerpt from the ACCME Statement on Commitment to Clinician Well-Being and Resilience
COLLABORATIONS WITH GOVERNMENT

Through our ongoing efforts, including meetings, letters, and testimony, we communicate to government agencies the capacity of accredited CME to contribute to national initiatives for the improvement of public health, healthcare quality, safety, and patient care.

ADDRESSING THE OPIOID EPIDEMIC

The CME community continues to participate in the Food and Drug Administration (FDA) Extended-Release/Long-Acting (ER/LA) Opioid Analgesics Risk Evaluation and Mitigation Strategy (REMS).

As a service to the CME community, the ACCME enables accredited providers to submit information through the Program and Activity Reporting System (PARS) system about their REMS-Compliant CE activities. With this data, we issue reports for the government and other stakeholders about the scope of REMS-Compliant CE activities offered by accredited providers in the ACCME System.

The ACCME continues to collaborate with the FDA about opportunities to engage accredited CME in support of other REMS.

CONTINUING EDUCATION ABOUT OPIOIDS

From 2013–2017:

- **105** accredited CME providers
- Offered **767** REMS-compliant activities
- Educating **208,500** physicians, advanced practice nurses, physician assistants, and other healthcare professionals

Source: 2017 Report on ER/LA Opioid REMS CME Activities in PARS
The Centers for Medicare & Medicaid Services (CMS) included accredited CME as an improvement activity in the changes for the Quality Payment Program. The changes take effect in 2018, the second year of the Quality Payment Program, as required by the Medicare Access and Chip Reauthorization Act of 2015 (MACRA).

The rule provides more flexibility and freedom for educators to engage with clinicians in a learner-centered, quality improvement process. The inclusion of accredited CME reflects recommendations from the ACCME and others in the CME community that CMS develop a process that allows accredited providers flexibility and permission to meet clinician needs.

As the next steps, the ACCME anticipates collaborating with the CME community and CMS to identify a simple, nimble mechanism for reporting clinician engagement that will relieve the burden on clinicians.

"Accredited CME providers, supported by evidence-based standards, are a local and national resource for supporting clinician engagement in performance improvement and quality activities. The ACCME’s educational system and technological framework can be engaged to support the implementation of the Merit-Based Incentive Payment System (MIPS) and to help our clinician community maintain and advance the quality, safety, and efficiency of care for the patients we all serve.

ACCME letter to CMS

CMS INCLUDES ACCREDITED CME IN THE QUALITY PAYMENT PROGRAM
CALL TO ACTION FOR HEALTHCARE LEADERS: LEVERAGE THE POWER AND CAPACITY OF CME

In presentations and publications, we call upon healthcare leaders to recognize the power and capacity of accredited CME to address many of the challenges in the healthcare environment, from clinician well-being to national imperatives for better health, better care, and lower costs.

In “The Leadership Case for Investing in Continuing Professional Development,” an invited commentary in Academic Medicine, ACCME President and CEO Graham McMahon, MD, MMS, highlights principles and action steps for aligning leadership and educational strategy and urges institutional leaders to embrace the continuing professional development of their human capital as an organizational responsibility and opportunity—and to view engagement in education as an investment in people.

“Healthcare leaders who recognize the strategic value of education can expect a meaningful return on their investment—not only in terms of the quality and safety of their clinicians’ work but also in the spirit and cohesiveness of the clinicians who work at the institution.

Graham McMahon, MD, MMS
Academic Medicine
SPREADING THE WORD

These publications can serve as a resource for CME professionals to start a conversation with leadership, clinician learners, and other stakeholders about how to transform CME and the opportunities for CME to serve as a strategic partner in healthcare improvement initiatives.


> “Chapter 6: Interprofessional Continuing Education,” Kathy Chappell, PhD, RN, FNAP, FAAN; Dimitra Travlos, PharmD.; Kate Regnier, MA, MBA; *Core Curriculum for Nursing Professional Development, 5th Edition*, Association for Nursing Professional Development (2017)


> “Evolving Alignment in International Continuing Professional Development Accreditation,” Graham T. McMahon, MD, MMSc; Samar Aboulousd, MD, MSc, MEd; Jennifer Gordon, MEd; Mindi McKenna, PhD, MBA; James Meuser, MD; Mark Staz, MA; Craig M. Campbell, MD, FRCPC, *Journal of Continuing Education in the Health Professions* (Summer 2016)

> “Advancing Continuing Medical Education,” Graham McMahon, MD, MMSc, *JAMA* (July 2015)
IN 2018 AND BEYOND, WE AIM TO:

> Drive evolution in education by supporting adoption of the commendation criteria

> Accelerate the adoption of best practices by creating more educational opportunities for CME professionals

> Advocate for CME scholarship through implementation of a research agenda

> Expand data systems to further support CME providers, clinicians, researchers, and public health initiatives

> Facilitate continued simplification and alignment across the continuum of health education through collaborations with certifying boards, accreditors, and other stakeholders

> Promote awareness of CME’s value through engagement with health leaders about the importance of investing in education

COMING IN 2018

> ACCME 2018 Meeting: Building an Educational Home Together

> ACCME Academy: online learning portal for the CME community

> New, improved website

> Additional opportunities to offer CME that counts for MOC

……and much more

We welcome your ideas for how we can better support the CME community and accelerate the transformation of CME. Contact us at info@accme.org.

STRATEGIC PLANNING: MOVING FORWARD

In 2017, the ACCME Board of Directors, executive leadership, and staff engaged in strategic planning retreats to participate in visioning exercises, discuss high level goals, and identify measures of success for the coming years.
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