

# CME "Intake": Creating An Online Tool to Implement the ACCME Updated Criteria at a Medical School

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## Purpose and Description

Since 2003, Jefferson Medical College Office of CME (OCME) has employed an online process for activities seeking CME certification, which we call "INTAKE". After the ACCME issued the Updated Criteria in late 2006, the OCME and Jefferson's CME Committee developed a new approach using online processes to transition the CME program to these Criteria.

On one level, INTAKE works as an application. Program planners enter specifics about their activities by completing a series of web pages designed to document compliance with the Updated Criteria. Once information is completed, the activity is reviewed by our CME committee using the same online process.

However, while INTAKE collects pertinent data about each CME activity, it is more than simply an application. INTAKE integrates with other e-base processes of the OCME. It is a teaching and training tool for the Updated Criteria and educational planning, and contributes to the overall management of Jefferson's CME program.

## What Was Needed

### • An updated process that would:

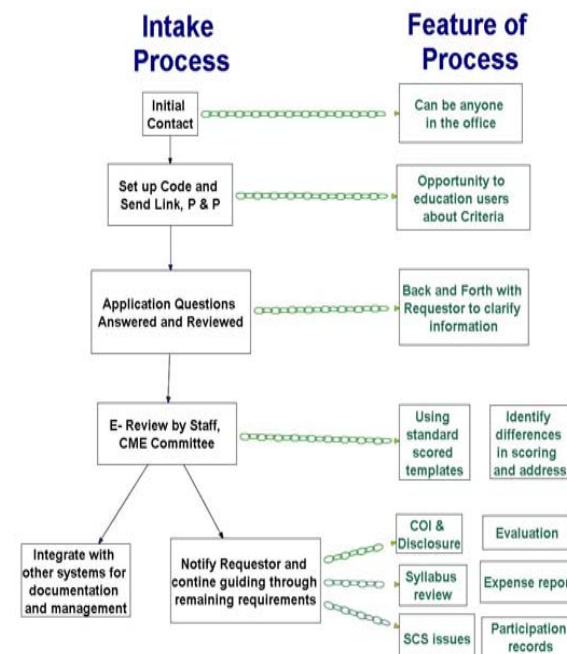
- ✓ Serve as a template for the activity planners to design their courses to meet the Updated Criteria
- ✓ Educate activity planners on ways to improve their programs to address the needs of the learner
- ✓ Foster better communication between the CME Office and the activity planners
- ✓ Be cost effective and user friendly
- ✓ Allow for activity tracking and monitoring
- ✓ Integrate with existing administrative systems and processes within the OCME and improve them

## Linkages

Throughout INTAKE, *links* provide information about the Criteria, examples of compliance, and support of educational design. These include

- ACCME Criteria, definitions
- Surveyor Review Checklists (from ACCME Website) to help set standards
- Jefferson CME COI process
- ACGME/IOM competencies
- Pennsylvania requirements for Patient Safety CME
- Instructions for downloading required supporting documentation in standardized formats
- Information on interprofessional education, identifying professional practice gaps and related educational needs, setting levels of outcomes
- Guidance in identifying barriers and strategies for overcoming them

## How the Process Works



## Overall Features



## Ongoing Tracking

Event dBase

Click Column Heading to Sort:

Z-Code	Event Date	Working Title	Initial Intake	CME Proposal (User)	CME Proposal (Admin)	Risk	Staff Review	Reviewer 1	Reviewer 2	Initial Intake Done	Final Intake Done		
ZAH	02/21/2009	14th Annual JackCs 2009 Jefferson Anesthesia Conference	06/30/2008	10/01/2008	11/11/2009	Score: 0 12/04/2008	Score: 24/15 12/04/2008	Score: 20/13 01/12/2009	Score: 20/13 12/23/2008	Expect	Yes	Yes	Delete
ZED	03/27/2009	20th Annual Hot Topics in Trauma 2009	12/15/2008	03/18/2009	04/06/2009	Score: 10 03/18/2009	Score: 30/15 03/21/2009	Score: 20/13 03/23/2009	Score: 10/12 03/23/2009	Expect	No	Yes	Delete
ZAA	09/25/2009	8th Annual Alumni Weekend CME Symposium	01/21/2009		10/05/2009	Score: 0 09/09/2009	Score: 20/14 09/15/2009	Score: 20/13 09/16/2009	Score: 40/15 09/16/2009	Expect	Yes	Yes	Delete
ZAB	03/20/2010	15th Annual JackCs 2010 Jefferson Anesthesia Conference	06/30/2009	10/01/2009	11/10/2009	Score: 2 11/11/2009	Score: 21/14 01/15/2010	Score: 35/15 01/12/2010	Score: 44/15 01/12/2010	Expect	Yes	No	Delete
ZAA	10/06/2010	8th Annual Alumni Weekend CME Symposium	01/06/2010							Expect	No	No	Delete

\*Note Z-codes purposely obscured

## How Has INTAKE Helped

- **Activity Planners**
  - ✓ Increased understanding of ACCME Updated Criteria
  - ✓ More thorough, clearly stated needs assessments
  - ✓ Learner focused objectives
  - ✓ Improved activity evaluation designs
  - ✓ Improved linkage between educational components
  - ✓ Better communications with the OCME
- **OCME Staff**
  - ✓ Increased understanding of ACCME Updated Criteria
  - ✓ Use the INTAKE process to provide training and guidance to activity planners
    - ✓ Especially in identifying practice performance gaps that need to be addressed
  - ✓ Easy monitoring of each CME activity to ensure compliance with ACCME Updated Criteria
    - ✓ Identify potential disconnects between the learners scope of practice, needs, and expected outcomes
    - ✓ Ensure that the activity is focused on physician competence, performance and/or patient outcomes
  - ✓ Increase quality of interactions between the CME Office and the activity planners
- **Administrative Benefits**
  - ✓ Standardizes data collection and eases administrative burdens of a large academic provider's CME program
  - ✓ Centralizes activity information to make it easily accessible to all staff
    - ✓ Reduces processing time and costs
    - ✓ Creates a paperless process
  - ✓ Simplifies tracking of activities through the certification process
  - ✓ Improves compliance with Updated Criteria
  - ✓ Improves documentation of compliance
  - ✓ Increases interaction with others throughout the process
  - ✓ Led to similar changes in RSC/RSS processing
  - ✓ Adaptable to ACCME PARS reporting