

# Web-based RSC: MANAGING THE NIGHTMARES USING A UNIQUE TRACKING SYSTEM

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## RSC @ JMC

Approximately 45 separate RSC certified – 50/50 split between directly and jointly sponsored

Decentralized administration

Annual application to document Essential Areas  
Global needs and objectives  
Evaluation based on global approach  
Electronic submission of participant data

In 1999, computer aided tracking was implemented to track RSC processing and compliance

In 2003, electronic certificate/transcript retrieval was implemented, accessible from CME Homepage

Web-based communications as a way to enhance service and administration

ACCME RSC Policy Published

## Impact of ACCME RSC Policy

### Processes restructured

- documentation collected on paper and electronically
- Session documentation form (SDF) introduced
- Addresses disclosure, required information

- Required in-service for training
- Dedicated person handles all RSC
- Created need for increased interactions with users
  - Website repository for forms

### Issues

Retraining from the "old ways"

### Higher fees

Ranging from \$500 - \$2000 depending on relationship and frequency

## Elements of JMC RSC Process

- New RSC Handbook developed
- Annual planning and certification
- Annual in-service
- Session documentation process
- COI resolution (initiated in July 2005)
- Commercial Support tracking via the LOA log
- Quarterly reporting of participation
- Annual evaluation process
- RSC monitoring

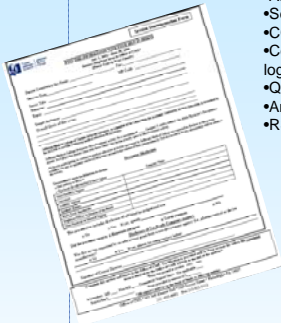


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New SCS Published

## Major COI Nightmares for RSC

### What needs to be done

Review all RSC presenter COI AHEAD OF TIME  
1200-1500 presenters annually  
Resolve any COI for RSC AHEAD OF TIME  
Document compliance actions

### How do we make it happen?

### Online is the only way to go!

- Design and implement web-based platform for management
- Must be easy and efficient
- Must be user-friendly
- Must be staff-friendly
- Revise processes, forms, policies
- Integrate with existing databases

### Obtain CME Committee and University Leadership Support

### Revise handbook

### Train Staff

### Train end users

### New in-service sessions

### Learn by doing and listening to feedback

### Enhance as we go

### What's evolved?

## The Session Registration Database (SRD)

### RSC sessions are managed through SRD

Required Web-based Session Registry  
All RSC assigned code  
End User enters session date, speaker name using this code

End users submits COI information  
initially on paper, now via web-based COI database

CME reviews COI and determines resolution actions needed  
RSD used to record actions needed and taken

Recent changes based on experience and feedback include

### User enhancements

- Process more transparent to users
- they can track progress through COI process
- Email reminders at various points through the COI process, as needed

### Administrative enhancements

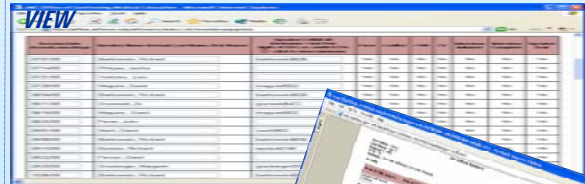
- System adjusted to generate automatic reminders to users
- Link established between the RSD and the COI databases
- Move away from paper input to electronic input

Managing the Nightmares

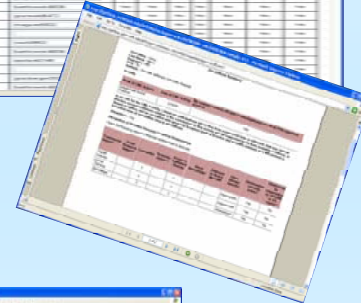
## Managing the Nightmares

### JMC's Session Registration Database

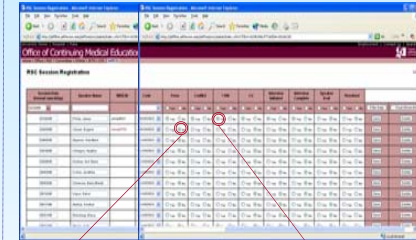
### RSC REGISTRY USER



### Links to COI Database



### Office View



Automatic email reminder to user to obtain COI info

Automatic email reminder to user to obtain CV if not already received

### What are we planning for the next RSC cycle?

- Revisions to the RSC Handbook underway
- Tighter linking between RSD and COI database
- Increased use of web-based intake of data
- Ongoing training of users as processes evolve
- Ongoing learning from experience to enhance process and compliance

## Pre-ACCME RSC Policy @ JMC

### Administration

- Written policy/procedures pamphlet
- Paper based forms/data collection
- Quarterly or annual reports
  - sessions held
  - attendance
- Annual Evaluation
- Minimal user fees (\$0 - \$100)

### Monitoring

- Peopleware® based tracking of compliance

### Challenges in the process

- Disclosure process
- documentation paper-chase
- timeliness of awarding credits
- availability of participant records
- quality of evaluation

