

AAP Accreditation Update

American Academy of Pediatrics- Division of CME - Accreditation Team



Hello everyone and happy 2018 from the entire accreditation team! A new year is upon us and with it we have moved to our new building. If you have not had a chance to see it in person, the picture above gives you a glimpse of our new work environment. From a staff perspective, we are more than thrilled with our new digs and all of the amenities that it includes. From our new desk spaces, to numerous conference rooms, technology upgrades, and a new exercise room, this new building far exceeds our initial expectations, provides a great work environment for all of us and with it new opportunities and ways for us to reach out and interact with all of our CME colleagues.

While the accreditation team ended 2017 packing and unpacking boxes, we started off the new year with all of our Committee on CME (COCME) members who joined us in Itasca for their bi-annual meeting. We had great conversations about the new accreditation with commendation criteria, ways to enhance partnerships with our CME colleagues, and an informative presentation on the Academy's current and on-going efforts in disaster preparedness from Laura Aird. You can read more about updates from this meeting on page 4 of this newsletter.

As a reminder, every new year brings about our collection of annual activity data that we must report to our accrediting agency. Last December, data requests were sent to all direct and joint staff who managed CME activities during 2017 and all data was due to accreditation staff on January 26th. This was a critical deadline so please reach out to your accreditation coordinator if you have not been able to comply with this request.

Also, as many of you may know, we launched a major streamlining effort with our applications for CME credit last year by switching to a simple abstract and attachment format for submissions. To date we have received a lot of positive feedback on how much easier the process to apply has become so I want to encourage all activity managers that may have been hesitant in applying for CME credit in the past to reconsider adding CME credit for applicable educational activities that you offer. Additionally, rather than applying separately through the AAP Portfolio, activities that offer CME credit are now eligible to also offer MOC 2 points (up to or equal to the number of CME credits offered for the activity) by answering a few additional questions on our submission abstract and incorporating an assessment tool with feedback for participants. We are more than willing to work with each activity manager to customize a submission process that best fits the needs of your activity so please do not hesitate to reach out to us if you are interested in offering any of these credit types.

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Please know that the accreditation team remains committed in its outreach efforts to support our CME colleagues in understanding educational development and the AAP CME process so always feel free to share with us any feedback and/or ideas that you have on how we can better serve you.

We are excited about 2018 and we thank you for starting off this year by reading this edition of our newsletter.

Nikki



Accreditation is not something we do to you, but for you and with you
-AAP Accreditation Team

SPOTLIGHT: Division of Quality's Learning Collaboratives & PIPA Project



Accreditation Staff recently collaborated with the Division of Quality for the first time offering both PI CME & MOC 2 for a multi-year learning collaborative project entitled: Pathways for Improving Pediatric Asthma Care (PIPA). The goals and measures of this QI project provides participants with the opportunity to learn the literature on pediatric asthma clinical pathways and understand optimal pathways and quality improvement tools to improve care for children with asthma in the inpatient and ED setting. The project supplies participants with a series of learning resources, interactive webinars, and personalized expert coaching that is conducted monthly to discuss application of the concepts and support the teams in improving pediatric asthma care.

This project is unique in that QI projects of this type typically provide PI CME credit and/or MOC 4 points however staff collaborated and received approval to also offer MOC 2 points as well for these unique learning collaborative type QI projects that infuse interactive educational sessions throughout the life of the project and incorporate a review and dissemination of findings and feedback on best practices with the participants.



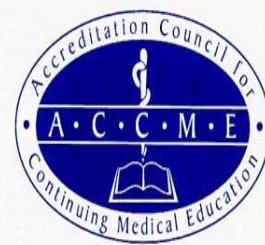
Brittany Jennings, QI Specialist; Tori Davis, QI/Certification Specialist; and Naji Hattar, Manager, Primary Care & Hospitalist Network

We truly appreciate the collaboration with Vanessa Shorte, Tori Davis and Cathleen Guch to secure MOC 2 approval for these learning collaborative QI projects. They also assisted with modifying an attestation template that assesses learners and ensures participation in the sharing of best practices, discussion of data/findings, and incorporation of feedback from instructors/project leaders during the various learning sessions so that participants can earn their MOC 2 points. Additional kudos go out to Naji Hattar and Brittany Jennings who manage the PIPA Project which was the first activity to offer PI CME, MOC 2 and MOC 4. We appreciate their efforts in working with us to ensure all requirements were met before project launch!

We are currently working with the CQN group on their next learning collaborative and, now that the framework has been established, we hope that we are able to offer these multiple credit types for additional learning collaboratives that are developed in the future. We encourage any activity manager to reach out to us if you are interested in securing these credits types for the QI projects that you manage.

ACCME's New Accreditation with Commendation Criteria

As many of you may know, the Accreditation Council for Continuing Medical Education (ACCME) announced a Menu of 16 New Criteria for Accreditation with Commendation. Accreditation with commendation allows a provider, like the AAP, to receive a 6 year accreditation term rather than a 4 year accreditation term.



The ACCME's goal with this change 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, all of which AAP CME excels in, and the new criteria are designed to advance the role of continuing medical education (CME) in the changing health environment and leverage the power of education to improve healthcare.

Out of the new 16 criteria, to be eligible for Accreditation with Commendation, the AAP will need to demonstrate compliance with any 7 criteria of our choice—plus 1 criterion from the achieves outcomes category—for a total of 8 criteria and I am pleased to share the below criteria that we have chosen to focus on for our current accreditation term:

1. The provider advances the use of health and practice data for healthcare improvement (C26)
2. The provider collaborates with other organizations to more effectively address population health issues (C28)
3. The provider designs CME to optimize communication skills of learners (C29)
4. The provider designs CME to optimize technical and procedural skills of learners (C30)
5. The provider supports the continuous professional development of its CME team (C34)
6. The provider demonstrates creativity and innovation in the evolution of its CME program (C35)
7. The provider demonstrates healthcare quality improvement (C37)
8. The provider demonstrates the impact of the CME program on patients or their communities (C38)

As the year progresses you will hear more about the specifics of each of these criteria as accreditation staff conducts outreach with staff members who manage the unique and innovative activities and projects created throughout the Academy. Many of these already demonstrate our success in meeting these criteria and we plan to showcase and highlight the meaningful, impactful, and outcome-driven work being done by your committees, sections, councils, and editorial boards throughout our current accreditation term.

Additionally, for these activities and projects that currently do not offer CME credits and MOC 2 points, but may be interested in adding it, the accreditation team will be looking at ways we can better assist activity managers with the paperwork and requirements involved so this added value can be incorporated into the innovative education that you create.

If you are interested in reviewing any of the specific criteria please visit <http://www.accme.org/news-publications/news/accreditation-council-cme-announces-new-commendation-criteria>.

CME Toolbox

Giving you the tools you need to build a compliant CME Activity



Updates to CME and MOC 2 Requirements in 2018

Recently accreditation staff received updated guidelines from the American Medical Association (AMA), National Association of Pediatric Nurse Practitioners (NAPNAP) and the American Board of Pediatrics (ABP) all of which are agencies that provide the requirements for offering CME, NAPNAP and MOC 2 credit types. While no major changes have occurred in the requirements this year, there are a few updates that have been announced which we think will provide opportunities for more activities to offer these credit types so we wanted to share a brief synopsis of this new information.

AMA Update

The AMA owns the AMA PRA Category 1 Credit™ system and it determines the types of educational formats that are acceptable for CME credit. To support all of the innovation that is occurring in education, they have recently announced that they have added a new format, categorized as “Other” to its system. This means that educators can now “think outside the box” and design activities that best suit their learners rather than ensuring that the education fits into one of the more traditional formats.

What this means for you

If your groups are designing innovative education then this change will benefit you. Blended learning activities, MOC Part 4 projects and learning collaboratives are all examples of learning opportunities that might not have offered CME in the past but may be eligible to offer CME credit in the future. We encourage you to reach out to accreditation staff if you are interested in this new opportunity.

AMA Update

The AMA has also eliminated many of its format specific requirements to better align with ACCME such as eliminating the post activity assessment and minimum passing standard requirements for enduring and journal-based activities, allowing PI CME activities to start at Stage B in specific circumstances, and removing the requirement that test item writing credit can only be awarded for questions written for NBME exams, ABMS member board certification exams, and national medical specialty society peer-reviewed, published, self-assessment activities.

What this means for you

Most of these format specific requirements were redundant with ACCME and ABP requirements so there may be little impact. As we move forward and work with each of you on your specific activity submissions, we will let you know if there are any changes that impact your activity.

ABP Update

ABP provided clarifying language which states that MOC 2 points for a CME activity should be equivalent to or less than the number of CME credits offered for the activity and MOC 2 points should be calculated by the evaluation assessment tool used for the activity. Additionally, and all assessment tools used should provide specific feedback to each learner, generic feedback is not acceptable.

NAPNAP Update

As part of the evaluation of any activity offering NAPNAP credits, NAPNAP requires participants to be asked if the learning objectives have been met for the activity.

What this means for you

AAP has a set of required evaluation questions that must be asked at every AAP activity that offers credit. We are currently working with COCME members on updating these required questions and, when released, these required questions will include a question on learning objectives.

What this means for you

Since activities that are approved for CME credit are now eligible to offer MOC 2 points, it is important to be aware of how MOC 2 points are calculated. CME credits are calculated based on the time participants are engaged in the educational content of the activity while MOC 2 points are calculated on the amount of content that is being assessed in the activity. Example: If you have a 2 hour activity with an hour of educational content on liver diseases and an hour of educational content on kidney diseases but the assessment tool only assesses learner knowledge and/or skill change in liver diseases then the activity would be worth 2 CME credits and 1 MOC 2 Point. If the assessment tool assesses learner knowledge and/or skill change in liver and kidney diseases then the activity would be worth 2 CME credits and 2 MOC 2 Points.

What this means for you

Additionally, since activities that offer MOC 2 points are not required to conduct a pre/post test, but have the flexibility to assess learning using a variety of different tools, you must ensure that specific feedback is provided to each learner that participates which includes feedback on their performance and confirms whether or not they met the minimum passing standard for the activity.

Of course this quick synopsis cannot encompass all of the elements and rules for CME/MOC 2 activities so we encourage each of you to work with the accreditation team through your activity processes as we are here to offer assistance in any way that we can. And, as a reminder, we have updated our CME/MOC 2 abstract submission document to reflect these updates. Look out for more tips, tools, and updates from the CME Toolbox in the future.

Greetings and Happy New Year from the COCME



Pictured back row left to right: COCME Members Drs R. Gereige, Z. Goore, T. Turner, AAP staff V. Roldan, and COCME member Dr J. Huang
Pictured front row left to right: AAP staff N. Berry, COCME member M. Foulds, and AAP staff D. Samuel

The AAP Committee on Continuing Medical Education (COCME) is the oversight committee of the AAP CME/CPD Program and its members play an integral role in helping to ensure high quality and compliance for all AAP CME activities. The committee meets bi-annually, typically winter and summer, to review and discuss the AAP CME/CPD program. The committee recently introduced 3 new members, Drs Rani Gereige, Teri Turner and Jeannie Huang, and we are all excited about the invaluable contributions their expertise will bring to our CME program. Below are brief highlights from the meeting the committee conducted this past January:

- **Article Reviews:** all members read and summarize pertinent literature pieces on current practice and future advancements in the field of continuing medical education. Discussion occurred on various ways that these summaries can be widely disseminated to individuals who plan and execute educational activities. Currently these summaries are housed at [http:// pedialink.aap.org/visitor/cme/about_aap_cme](http://pedialink.aap.org/visitor/cme/about_aap_cme).
- **Outreach:** because AAP has such a wide and diverse CME/CPD program, members discussed the importance of outreaching with all of its varying CME constituents throughout the Academy. While the committee invites various colleagues to each of its meetings to spotlight the work it does, brainstorming began on ways to further include sections, councils, committees, editorial boards, chapters, and districts to not only learn more about the various projects these groups are engaged in but engage in a dialogue about how CME can be incorporated into their activities and offer their educational expertise to help with the planning, design and delivery of a CME activity.
- **Education Information/Guidance:** members are working on a set of tools to help facilitate the implementation of a high-quality CME activity. From checklists, to evaluations, to faculty guides, these documents will be helpful to those with or without experience in putting on AAP CME activities in all of the varying formats.
- **Desirable Difficulty Presentation:** Committee member Dr. Turner conducted an engaging presentation on interactive learning including implementation tips on incorporating Pecha Kucha into educational presentations.
- **Disaster Preparedness Presentation:** Laura Aird presented on the Pediatric Disaster Preparedness Curriculum Development and Core Competencies for Disaster Medicine and Public Health.
- **Surveys:** Additionally, survey results were shared and discussed from the Periodic Survey of Fellows (#97) on CME and a draft of the PREP The Curriculum Lapsed Subscriber Survey was reviewed.

Updates from ACEhp 2018

Each year, the Alliance for Continuing Education in the Health Professions (ACEhp) conducts its annual conference for CME/CPD professionals. This four day meeting focuses on networking and transformative learning tailored for continuing healthcare education professionals across the spectrum of organizational settings. This year's theme was "Destination Patient Outcomes: Our Journey to Improving Patient Care" and pearls from this years conference include:

- Participatory medicine is a movement in which patients and healthcare professionals actively collaborate and encourage each other as full partners in health. It is important that healthcare professionals share information with patients, directing them to useful medical websites and sources, admitting what they do not know, and sharing in decision making.
- Incorporating the patient voice in CME represents a co-production of quality care. Patient stories should be incorporated in all educational endeavors. Make patients' narrative, our narrative.
- A few simple strategies to encourage active learning in CME/CPD include limiting speaker time, encouraging the use of cases, encouraging faculty to stop and pause, and having learners engage together on the content.
- The following question was raised: *Are CME providers innovators or reactors to the innovations of others?* Early career physicians and residents are learning about innovations in the beginning stages of their careers; CME needs to build on that. With focus on the end users of "CME" – the patients - then CME providers are the innovators. Ultimately, innovation is about change for improvement.

For more information on the ACEhp, please visit: www.acehp.org





Next bi-annual touch base meetings with accreditation staff will occur in April 2018. Look out for your meeting invitation.

CME open lab occurs every Tuesday and Thursday CR341 for assistance with your educational activities. No appointments are necessary so feel free to stop by with any CME/MOC 2 questions that you have.

The Benefits of AAP Credit

1. The designation of AAP Credit ensures that the educational activity has been planned by, and appropriate for, pediatricians to enhance their knowledge and skills.
2. Activities receiving AAP Credit are listed in the **AAP CME Finder** at www.pedialink.org in the AAP Approved Credit CME Activities area. This provides visibility for an organization's educational activities.
3. AAP Fellows and Candidate Members who participate in AAP approved or sponsored CME activities may claim those credits towards the AAP CME/CPD Award. This award is granted to Fellow and Candidate Member pediatricians who complete at least 150 credits over a 3-year period.
4. Contact Virginia Roldan at 630/626-6653 or at vrolan@aap.org for AAP Credit information.



Virginia Roldan

STRAIGHT

OUTTA CME

Hello 2018

Are you thinking about advertising upcoming CME events? Keep this in mind when using Credit Statements ...



Activity NOT yet approved – Advertising (save-the-date) must be generic– DO NOT include, faculty, learning objectives or credit amounts

Unsure – contact the Accreditation Team – or visit one of our CME Open Labs

Activity APPROVED for CME Credit – use full credit statements – see complete information below

CREDIT STATEMENTS

Full CME statements must appear on all activity materials and brochures distributed by activity managers, with the exception of initial, save-the-date type activity announcements, provided such announcements contain only general, preliminary information about the activity such as the date, location, and title. If additional specific information is included, such as credit amounts, faculty and/or objectives, full statements must be included. The complete AMA Credit Designation Statement must always be used on any document or publication that references the number of *AMA PRA Category 1 Credits™* designated for the activity.

A “save the date” announcement (such as a card mailer with limited space) may indicate that the activity has been approved for *AMA PRA Category 1 Credit™* **without** stating an exact number of credits if the accredited CME provider has already *certified/* *approved* the activity. This announcement may read, “This activity has been approved for *AMA PRA Category 1 Credit™*” or similar language. Accredited CME providers or potential joint providers may **never** indicate that “*AMA PRA Category 1 Credit™* has been applied for”, is pending, or any similar wording.

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Thank you for your time and attention to this message. We look forward to circulating another CME accreditation update newsletter this summer!