

GUIDE TO THE NCMS PROGRESS REPORT PROCESS For Progress Reports to be Reviewed in the July and November 2022 Cohorts

The NCMS expects providers found to be in noncompliance with Core Accreditation Criteria and/or applicable Standards for Integrity and Independence in Accredited Continuing Education (formerly Criteria 1-13) and/or applicable Accreditation Policies to demonstrate compliance through the progress report process. Descriptions of the specific performance issues that must be addressed in the progress report are provided in the decision report you recently received from the NCMS. Noncompliance findings in the Menu of Commendation Criteria should NOT be addressed in the progress report.

Contents of a Progress Report

For the specific performance issues described for noncompliance findings, providers must:

- describe improvements and their implementation; and,
- provide evidence of performance-in-practice to demonstrate compliance.

Expectations of Materials Submitted

All the materials submitted to the NCMS must not contain any untrue statements, must not omit any necessary material facts, must not be misleading, must fairly present the organization, and must be the property of the organization. Materials submitted for accreditation (progress report, evidence of performance-in-practice, other materials) must not include individually identifiable health information, in accordance with the Health Insurance Portability and Accountability Act (HIPAA).

Decision-Making

Providers will receive a decision from the NCMS based on a review of all the information and materials submitted as part of the progress report. A progress report review will result in the following feedback from the NCMS:

- All Criteria in Compliance: The provider demonstrated that it has corrected the criteria or policies that were found to be in noncompliance.
- All Criteria Not Yet in Compliance: The provider has not yet demonstrated that it has corrected all the criteria or policies that were found to be in noncompliance.

If all criteria or policies that were found to be in noncompliance are not corrected, the NCMS may require another progress report, a focused interview, and/or a change of status may result.

There may be circumstances when the NCMS requires clarification at the time of the provider's next review to verify compliance, or is deferred to a future cohort, because, for example, a provider has not had sufficient time within the context of its CME program to implement improvements or to produce evidence to support compliance.

Submission Instructions

All information and materials for your progress report review will be submitted to Russet Rogers at <u>rrogers@ncmedsoc.org</u>. The primary contact of your organization will receive by email a Progress Report Narrative to complete and Performance-in-Practice (PIP) Structured Abstracts (if applicable). Please provide concise narrative descriptions of policies, processes, and practices that support compliance with NCMS requirements.

Make all required submissions according to the NCMS's specifications and by established deadlines. Failure to do so may result in a delay in consideration of your progress report and/or a change of your organization's accreditation status. **Your submission must include:**

- a) In the Progress Report Self-Study Report form, narrative descriptions improvements made in specified areas of noncompliance in the Core Accreditation Criteria and/or applicable Standards for Integrity and Independence in Accredited Continuing Education (formerly Criteria 1-13) and/or applicable Accreditation Policies; and,
- b) In the Performance-in-Practice Structured Abstract, evidence of performance-in-practice for each activity selected, if applicable.
 - Address only those criteria, standards, and/or policies found to be in noncompliance at the time of your last review.
 - If an activity that has been selected does not offer your organization an opportunity to present evidence that reflects the improvements you have implemented to ensure and demonstrate compliance, please contact the NCMS to discuss possible options in the sampling process.

Reporting Requirements for ACCME Accreditation Criteria/Standards/Policies

The information below provides a guide for determining the content of the progress report to address noncompliance findings with Core Accreditation Criteria and/or applicable Standards for Integrity and Independence in Accredited Continuing Education (SII) and/or applicable Accreditation Policies. Responses should be developed in the context of the specific performance issue(s) identified in the decision report you recently received from the NCMS. Please contact NCMS staff if you have questions about what to include in your progress report.

CORE ACCREDITATION CRITERIA		
	CME Mission and Program Improvement	
Mission (formerly Criterion 1)	If you received a finding of noncompliance in C1 In the Progress Report Narrative: Enter the expected results component of your CME mission statement. The expected results must be articulated in terms of competence, performance, or patient outcomes.	
Program Analysis (formerly Criterion 12)	If you received a finding of noncompliance in C12 In the Progress Report Narrative: Describe your conclusions on the degree to which you have met the expected results of your mission. These conclusions should be based on the data you have obtained in your analysis of learner change across your overall program of accredited activities.	
Program Improvements (formerly Criterion 13)	If you received a finding of noncompliance in C13 In the Progress Report Narrative: Describe the needed or desired changes in the overall program required to improve on your ability to meet your CME mission that have been identified, planned, and implemented during the accreditation term.	

	Educational Planning and Evaluation	
Educational Needs	If you received a finding of noncompliance in C2	
	In the Progress Report Narrative:	
(formerly Criterion 2)	Describe how your organization identifies the professional practice gaps of your learners and the educational needs that underlie the practice gaps.	
	In each Progress Report Performance-in-Practice Structured:	
	State the professional practice gap(s) of your learners on which the activity was based	
	Check the educational need(s) that apply: knowledge; competence; performance.	
	State the educational need(s) that you determined to be the cause of the professional practice gap(s).	
Designed to Change	If you received a finding of noncompliance in C3	
_	In the Progress Report Narrative:	
(formerly Criterion 3)	Describe how your organization designs activities to change the competence, performance, or patient outcomes of your learners.	
	In each Progress Report Performance-in-Practice Structured Abstract:	
	Explain what competence, performance, or patient outcome this activity was designed to change.	
Appropriate Formats	If you received a finding of noncompliance in C5	
	In the Progress Report Narrative:	
(formerly Criterion 5)	Explain the basis for determining that the formats you choose are appropriate for the setting, objectives, and desired results of your activities.	
	In each Progress Report Performance-in-Practice Structured Abstract:	
	Explain why this educational format is appropriate for the activity.	
Competencies	If you received a finding of noncompliance in C6	
	In the Progress Report Narrative:	
(formerly Criterion 6)	Describe how your activities/educational interventions are developed in the context of desirable physician attributes.	
	In each Progress Report Performance-in-Practice Structured Abstract:	
	Select the desirable physician attribute(s) this activity addresses. The list below includes the Competencies of: ACGME/ABMS, Institute of Medicine, and Interprofessional Education Collaborative, or you may enter other competencies recognized by your organization.	

Analyzes Change	If you received a finding of noncompliance in C11	
	In the Progress Report Narrative:	
	(formerly Criterion 11)	Describe the strategies you use to obtain data on change in learners' competence, performance or patient outcomes and your conclusions as to whether or not you were able to change learner competence, performance or patient outcomes across your overall program of accredited activities.
		In each Progress Report Performance-in-Practice Structured Abstract:
		Describe the strategies used to obtain data or information about changes achieved in learners' competence or performance or patient outcomes as a result of their participation in this activity, including, for example, questions you asked the learner about changes in competence or performance or other change data such as quality improvement or patient outcomes. Attach the compiled or summative data or information generated from the activity about changes achieved in learners' competence or performance or patient outcomes.

	Standards for Integrity and Independence (SII)
SII Standard 1:	If you received a finding of noncompliance in the CME Content Validation Policy/ACCME Definition of CME and/or in C10
Ensure Content Is	In the Progress Report Narrative:
Valid	Describe how you ensure that the content of your CME activities and your accredited CME program meet all four elements of Standard 1.
(includes former CME Clinical Content Validation Policy/ ACCME Definition of CME and part of C10)	1. All recommendations for patient care in accredited continuing education must be based on current science, evidence, and clinical reasoning, while giving a fair and balanced view of diagnostic and

SII Standard 2: Prevent	If you received a finding of noncompliance in C7 (SCS 1) and/or in C10
Commercial Bias &	In the Progress Report Narrative:
Marketing in Accredited CME (includes parts of former C7 SCS 1 and C10)	 Accredited continuing education must protect learners from commercial bias and marketing. The accredited provider must ensure that all decisions related to the planning, faculty selection, delivery, and evaluation of accredited education are made without any influence or involvement from the owners and employees of an ineligible company. Accredited education must be free of marketing or sales of products or services. Faculty must not actively promote or sell products or services that serve their professional or financial interests during accredited education. The accredited provider must not share the names or contact information of learners with any ineligible company or its agents without the explicit consent of the individual learner.
	Describe how you ensure that the content of accredited activities and your accredited CME program meet expectations of elements 1 AND 2 of Standard 2.
	Describe what you do to ensure that names are not shared without the explicit consent of learners.
	In each Progress Report Performance-in-Practice Structured Abstract:
	Attest that the activity meets the expectations of all three elements of Standard 2.
SII Standard 3: Identify, Mitigate,	If you received a finding of noncompliance in C7 (SCS 1)
and Disclose	In the Progress Report Narrative:
Relevant Financial Relationships	Indicate if your organization uses employees or owners of ineligible companies in its accredited activities. (Yes/No)
(includes	If YES: Describe what you do to meet the expectations of Standard 3.2 (a-c).
parts of former C7 SCS 1 as well as C7 SCS 2 and C7 SCS 6.1 - 6.2)	 Accredited providers must take the following steps when developing accredited continuing education. Exclude owners or employees of ineligible companies: Review the information about financial relationships to identify individuals who are owners or employees of ineligible companies. These individuals must be excluded from controlling content or participating as planners or faculty in accredited education. There are three exceptions to this exclusion—employees of ineligible companies can participate as planners or faculty in these specific situations:
,	a) When the content of the activity is not related to the business lines or products of their
	employer/company. b) When the content of the accredited activity is limited to basic science research, such as preclinical research and drug discovery, or the methodologies of research, and they do not make care recommendations.
	c) When they are participating as technicians to teach the safe and proper use of medical devices, and do not recommend whether or when a device is used.
	In each Progress Report Performance-in-Practice Structured Abstract:
	If employees/owners of ineligible companies WERE used in the activity and they met one of the exceptions published by the ACCME to the requirements of Standard 3, describe which exception and the rationale for including the activity under the exception.
	OR
	If employees/owners of ineligible companies WERE NOT used in this activity, enter "There were no employees/owners of ineligible companies used in this activity." into the text box. (Narrative

SII Standard 3: Identify, Mitigate,	If you received a finding of noncompliance in C7 (SCS 2.1), related to the identification of relevant financial relationships
and Disclose Relevant Financial Relationships (CONT.) (Includes parts of former C7 SCS 1 as well as C7 SCS 2 and C7 SCS 6.1 - 6.2)	In the Progress Report Narrative:
	 Accredited providers must take the following steps when developing accredited continuing education. 1) Collect information: Collect information from all planners, faculty, and others in control of educational content about all their financial relationships with ineligible companies within the prior 24 months. There is no minimum financial threshold; individuals must disclose all financial relationships, regardless of the amount, with ineligible companies. Individuals must disclose regardless of their view of the relevance of the relationship to the education. Disclosure information must include: a) The name of the ineligible company with which the person has a financial relationship. b) The nature of the financial relationship. Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual's institution receives the research grant and manages the funds.
	Describe how you collect information from all planners, faculty, and others in control of educational content about all their relevant financial relationships with ineligible companies.
	Describe the process you use to determine which financial relationships are relevant to the educational content.
	In each Progress Report Performance-in-Practice Structured Abstract:
	Upload a single completed example of the form(s), tool(s), or mechanism(s) used to identify relevant financial relationships of all individuals in control of content. If you use different form(s), tool(s), or mechanism(s) within your process, upload a single copy example of each version used. Do not submit more than a single example of each form used. In each case, the example provided must be one that was actually completed by a person in control of content for the activity.
	Download and complete the spreadsheet linked <u>here</u> . Upload the spreadsheet as an EXCEL file in the field provided. In the spreadsheet, provide the information indicated in each of the five columns as follows. For everyone in control of content, list :
	1) the name of the individual, 2) the individual's role(s) (e.g., planner, reviewer, faculty, author, and/or other roles in control of educational content) in the activity, 3) the name of the ACCME-defined ineligible company(ies) with which the individual has a relevant financial relationship (or if the individual has no relevant financial relationship(s), 4) the nature of the relationship(s), and 5) the mechanism(s) implemented to mitigate all relevant financial relationships appropriate to the role(s) of the individuals in the activity.
SII Standard 3: Identify, Mitigate, and Disclose	If you received a finding of noncompliance in C7 (SCS 2.3), related to the mitigation of relevant financial relationships / resolution of conflicts of interest
Relevant Financial	In the Progress Report Narrative
Relationships (CONT.)	Describe the methods/steps you use to mitigate all relevant financial relationships appropriate to the role(s) of individuals in control of content. Note that the methods/steps used for planners are likely different than those used for faculty.
(Includes parts of former	In each Progress Report Performance-in-Practice Structured Abstract:
C7 SCS 1 as well as C7 SCS 2 and C7 SCS 6.1 - 6.2)	Download and complete the spreadsheet linked <u>here</u> . Upload the spreadsheet as an EXCEL file in the field provided. In the spreadsheet, provide the information indicated in each of the five columns as follows. For everyone in control of content, list :
	1) the name of the individual, 2) the individual's role(s) (e.g., planner, reviewer, faculty, author, and/or other roles in control of educational content) in the activity, 3) the name of the ACCME-defined ineligible company(ies) with which the individual has a relevant financial relationship (or if the individual has no relevant financial relationship(s), 4) the nature of the relationship(s), and 5) the mechanism(s) implemented to mitigate all relevant financial relationships appropriate to the role(s) of the individuals in the activity.

SII Standard 3: Identify, Mitigate,	If you received a finding of noncompliance in C7 (SCS 1) and/or (SCS 6.1 - 6.2), related to the disclosure of relevant financial relationships to learners …
and Disclose	In the Progress Report Narrative
Relevant Financial Relationships (CONT.)	Describe the ways you inform learners of the presence or absence of relevant financial relationships of all individuals in control of content.
(Includes	In each Progress Report Performance-in-Practice Structured Abstract:
parts of former C7 SCS 1 as well as C7 SCS 2 and C7 SCS 6.1 - 6.2)	Upload the information for disclosure of the presence or absence of relevant financial relationships for all individuals in control of CME content, including the statement that all relevant financial relationships were mitigated, as presented to learners.
SII Standard 4:	If you received a finding of noncompliance in C8 and/or C7 (SCS 6.3 - 6.5)
Manage Commercial Support (includes former C7 SCS 6.3 - 6.5	Accredited providers that choose to accept commercial support (defined as financial or in-kind support from ineligible companies) are responsible for ensuring that the education remains independent of the ineligible company and that the support does not result in commercial bias or commercial influence in the education. The support does not establish a financial relationship between the ineligible company and planners, faculty, and others in control of content of the education.
and C8)	 Decision-making and disbursement: The accredited provider must make all decisions regarding the receipt and disbursement of the commercial support. Ineligible companies must not pay directly for any of the expenses related to the education or the
	 learners. d) The accredited provider may use commercial support to fund honoraria or travel expenses of planners, faculty, and others in control of content for those roles only. e) The accredited provider must not use commercial support to pay for travel, lodging, honoraria, or personal expenses for individual learners or groups of learners in accredited education. f) The accredited provider may use commercial support to defray or eliminate the cost of the education for all learners. 2. <u>Agreement</u>: The terms, conditions, and purposes of the commercial support must be documented in an agreement between the ineligible company and the accredited provider. The agreement must be executed prior to the start of the accredited device and a commercial support in vill receive. 3. <u>Accountability</u>: The accredited provider must keep a record of the amount or kind of commercial support received and how it was used, and must produce that accounting, upon request, by the accrediting body or by the inlegible company that provided the commercial support. d) <u>Disclosure to learners</u>: The accredited provider must disclose to the learners the name(s) of the ineligible company (ies) that gave the commercial support, and the nature of the support if it was in-kind, prior to the learners engaging in the education. Disclosure must not include the ineligible companies' corporate or product logos, trade names, or product group messages. In the Progress Report Narrative: Indicate if your organization accepts commercial support. (Yes/No) If YES: Describe what you do to meet the expectations of all four elements of Standard 4.
	In each Progress Report Performance-in-Practice Structured Abstract:
	Indicate if the activity received commercial support. (Yes/No)
	If the activity was commercially supported
	 Complete the table provided, listing the name(s) of the commercial supporter(s) of the activity and the dollar value of any monetary commercial support and/or indicate non-monetary (in-kind) support.
	2) Upload each executed commercial support (monetary and non-monetary) agreement for the activity.
	 Upload the information for disclosure of commercial support (monetary and non- monetary), as presented to learners.

Standard 5: Manage Ancillary	If you received a finding of noncompliance in C9 (SCS 4.1 – 4.4)
Activities Offered in Conjunction with Accredited	Accredited providers are responsible for ensuring that education is separate from marketing by ineligible companies—including advertising, sales, exhibits, and promotion—and from nonaccredited education offered in conjunction with accredited continuing education.
Continuing Education	1. Arrangements to allow ineligible companies to market or exhibit in association with accredited education must not:
(includes former	 a) Influence any decisions related to the planning, delivery, and evaluation of the education. b) Interfere with the presentation of the education. c) Be a condition of the provision of financial or in-kind support from ineligible companies for the
C9 SCS 4.1 – 4.4)	 education. 2. The accredited provider must ensure that learners can easily distinguish between accredited education and other activities.
	a) Live continuing education activities: Marketing, exhibits, and nonaccredited education developed by or with influence from an ineligible company or with planners or faculty with unmitigated financial relationships must not occur in the educational space within 30 minutes before or after an accredited education activity. Activities that are part of the event but are not accredited for continuing education must be clearly labeled and communicated as such.
	b) Print, online, or digital continuing education activities: Learners must not be presented with marketing while engaged in the accredited education activity. Learners must be able to engage with the accredited education without having to click through, watch, listen to, or be presented with product promotion or product-specific advertisement.
	c) Educational materials that are part of accredited education (such as slides, abstracts, handouts, evaluation mechanisms, or disclosure information) must not contain any marketing produced by or for an ineligible company, including corporate or product logos, trade names, or product group messages.
	 Information distributed about accredited education that does not include educational content, such as schedules and logistical information, may include marketing by or for an ineligible company.
	3. Ineligible companies may not provide access to, or distribute, accredited education to learners.
	In the Progress Report Narrative:
	Indicate if your organization offers ancillary activities, including advertising, sales, exhibits, or promotion for ineligible companies and/or nonaccredited education in conjunction with your accredited CE activities? (Yes/No)
	If YES: Describe what you do to meet expectations of all three elements of Standard 5.
	In each Progress Report Performance-in-Practice Structured Abstract:
	Upload the required documentation described based on the type of the activity as requested in the SII Standard 1 section of the Performance-in-Practice Structured Abstract.
	If the activity is an Internet, Journal-Based or Enduring Material CME activity: Upload the CME product itself, so reviewers may experience the activity as your learners experience it. With your upload, provide a URL/link to the activity and generic login(s) and password(s), if necessary for access. The product mus be available for review from the point of submission through the end of your current accreditation term. In internet activities are no longer available online, you may provide access to an archived website. If this is not an option, then screen shots are acceptable.
	If the activity is a Regularly Scheduled Series (RSS): Upload a listing of the dates, faculty, location, and topics of each session.
	If the activity is any other type of activity: Upload the activity topics/content, e.g., agenda, brochure, program book, or announcement. The documentation must include the nature and the scope of the conte

	ACCREDITATION POLICIES
Accreditation Statement Policy	If you received a finding of noncompliance in the Accreditation Statement Policy In the Progress Report Narrative: Describe what you do to ensure that your CME activities meet the requirements of the Accreditation Statement Policy. In each Progress Report Performance-in-Practice Structured Abstract: Upload evidence of the use of the appropriate accreditation statement for the activity, as presented to learners.
CME Attendance Records Retention Policy	If you received a finding of noncompliance in the CME Attendance Records Retention Policy In the Progress Report Narrative: Describe the mechanism your organization uses to record and verify physician participation for six years from the date of your CME activities. Provide an example of the information or report(s) your mechanism can produce for an individual participant.
CME Activity Records Retention Policy	If you received a finding of noncompliance in the CME Attendance Records Retention Policy In the Progress Report Narrative: Describe the improvements you have identified and the timeline for implementation to ensure that your organization retains activity files/records of CME activity planning and presentation during the current accreditation term or for the last twelve months, whichever is longer. In each Progress Report Performance-in-Practice Structured Abstract: As applicable, produce the activity files/records of CME planning and presentation as requested for any noncompliance findings being addressed in the progress report.

Please contact Russet Rogers by email at <u>rrogers@ncmedsoc.org</u> if you have any questions about the NCMS's progress report review process.