The Consortium for Academic CME Earns Six Year Accreditation from the ACCME

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The Consortium for Academic Continuing Medical Education (CACME), of which Jefferson is a founding member, is a collaborating group of four medical schools in Pennsylvania dedicated to designing, delivering, and evaluating quality educational experiences/opportunities that stimulate, educate and empower physicians to provide the highest standard of care throughout the lifetime of professional practice. The four member medical schools are Thomas Jefferson University, Penn State College of Medicine, Temple University, and University of Pittsburgh.

The Accreditation Council of Continuing Medical Education (ACCME), at its July Meeting, approved CACME for accreditation, awarding it a six year accreditation, an achievement reached by only a few accredited CME sponsors (only 2% of the July decisions included a six-year accreditation period)\(^1\). CACME’s approach to accreditation and certification also earned exemplary ratings in several of the Essential Areas and Standards, and were recognized in the Summer 2000 ACCME Report as a source of information on “Best Practices” in CME\(^2\).

Exemplary ratings in Educational Planning and Evaluation singled out “innovative and creative planning processes” as well as “significant changes in processes for Grand Rounds.” For the area of Administration, the report cited both “demonstrated remarkable levels of organization, flexibility, accommodation, governance and management,” as well as “a range of innovative and creative practices: in the areas of disclosure and commercial support.”

How does this affect CME at Jefferson and the other CACME institutions? Now that CACME’s approach to CME certification for medical schools has been accepted by the ACCME, we will integrate CACME philosophy, policies and procedures more fully into our institutional accreditation processes. The primary goal is to emphasize the educational aspects of CME: intent and evaluation of achievement of intent. A corollary goal is to streamline the certification process and reduce paperwork.

The Concepts

There are three key concepts that will impact how CME activities are administered and approved for credit at JMC:

- Preplanning
- Risk Stratification
- Performance Monitoring

Pre-planning

The philosophy inherent in CACME’s pre-planning phase differs from the traditional approach to CME accreditation in that it takes a prospective approach and allocates administrative resources based on both the educational aspects of the activity (intent and outcomes), and its perceived risk. Pre-planning determinations affect the level of involvement of the CME Office in the implementation of an activity.
Risk Stratification

The CACME risk stratification tool attempts a prospective assessment of each proposed activity in terms of compliance with the Standards for Commercial Support. Various criteria are evaluated to develop a 'risk score'—that is categorized to a range from "low" to "very high" on a scale of 1 to 4. The level of risk assessed then factors into the level of CME Office and/or CME Committee involvement in the implementation of an approved activity. The CACME Risk Stratification tool outlines primary monitoring responsibilities for various risk levels and includes appropriate monitoring and implementation activities for high and very high risk activities.

Performance Monitoring System

The centerpiece of the CACME system is the Performance Monitoring System, an ACCESS-based database that will ultimately allow JMC, CACME and the ACCME to review activity and program data in a variety of "slices" at various points during its implementation, not just retrospectively. Performance Monitoring collects data from three distinct portions of certified activities: pre-planning, compliance, and evaluation/outcomes. CACME has been developing a series of standard criteria and accompanying quantifiable data elements, as well as taking beginning steps in developing standard reporting protocols.

CACME (The Consortium for Academic Continuing Medical Education) recently won the Alliance for CME’s Annual Award for “Outstanding CME Collaboration.” The purpose of this award is “to recognize organizations best demonstrating innovation or uniqueness in achieving effective CME Collaboration.” The award not only recognizes the unique collaboration of the four medical schools involved in CACME, but also the collaboration on the part of the ACCME in fostering the development of CACME in its pilot project phase. A plaque and monetary award will be received by CACME and the ACCME during the January 2001 Alliance for CME meeting in San Francisco.

References

1. ACCME Report: The Official Newsletter of the Accreditation Counsel of Continuing Medical Education. 9.2; 3. 2000.

2. ACCME Report: The Official Newsletter of the Accreditation Counsel of Continuing Medical Education. 9.2; 4. 2000. CACME (the Consortium for Academic Continuing Medical Education) recently won the Alliance for CME’s Annual Award for “Outstanding CME Collaboration.” The purpose of this award is “to recognize organizations best demonstrating innovation or uniqueness in achieving effective CME Collaboration.” The award not only recognizes the unique collaboration of the four medical schools involved in CACME, but also the collaboration on the part of the ACCME in fostering the development of CACME in its pilot project phase. A plaque and monetary award will be received by CACME and the meeting in San Francisco.
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About the Author

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