



## THE NSMA'S ESSENTIAL AREAS AND THEIR ELEMENTS

### ESSENTIAL AREA 1: PURPOSE AND MISSION

The provider must,

- Element 1 Have a written statement of its CME mission, which includes the CME purpose, content areas, target audience, type of activities provided, and expected results of the program.

### ESSENTIAL AREA 2: EDUCATIONAL PLANNING

The provider must,

- Element 2.1 Use a planning process(es) that links identified educational needs with a desired result in its provision of all CME activities.
- Element 2.2 Use needs assessment data to plan CME activities.
- Element 2.3 Communicate the purpose or objectives of the activity so the learner is informed before participating in the activity.
- Element 3.3 Present CME activities in compliance with the NSMA's policies for disclosure and commercial support.

[NOTE: The NSMA's policies for disclosure and commercial support are articulated in: (1) *The Standards For Commercial Support: Standards to Ensure Independence in CME Activities*, as adopted by NSMA in September 2004; and (2) NSMA policies applicable to commercial support and disclosure. All materials can be found on [www.nsmadocs.org](http://www.nsmadocs.org).]

### Essential Area 3: Evaluation and Improvement

The provider must,

- Element 2.4 Evaluate the effectiveness of its CME activities in meeting identified educational needs.
- Element 2.5 Evaluate the effectiveness of its overall CME program and make improvements to the program.

### COMPLIANCE WITH THE FOLLOWING WILL BE DETERMINED AT PRE APPLICATION AND, AS REQUIRED, DURING THE PROVIDER'S TERM OF ACCREDITATION

#### ADMINISTRATION

The provider must,

- Element 3.1 Have an organizational framework for the CME unit that provides the necessary resources to support its mission including support by the parent organization, if a parent organization exists
- Element 3.2 The provider must operate the business and management policies and procedures of its CME program (as they relate to human resources, financial affairs and legal obligations), so that its obligations and commitments are met.

## 2006 *UPDATED* DECISION-MAKING CRITERIA RELEVANT TO THE ESSENTIAL AREAS AND ELEMENTS

Measurement criteria have been established for the Elements of the Essential Areas. If a provider meets the criteria for the Elements within the Essential Area, the provider will be deemed to be 'In Compliance.'

Essential Area and Element(s)		Criteria for Compliance
<b>Essential Area 1: Purpose And Mission</b>	<p>The provider must,</p> <p><b>E 1</b> Have a written statement of its CME mission, which includes the CME purpose, content areas, target audience, type of activities provided, and expected results of the program.</p>	<p>C 1 The provider has a CME mission statement that includes all of the basic components (CME purpose, content areas, target audience, type of activities, expected results) with expected results articulated in terms of changes in competence, performance, or patient outcomes that will be the result of the program.</p>
<b>Essential Area 2: Educational Planning</b>	<p>The provider must,</p> <p><b>E 2.1</b> Use a planning process(es) that links identified educational needs with a desired result in its provision of all CME activities.</p> <p><b>E 2.2</b> Use needs assessment data to plan CME activities.</p> <p><b>E 2.3</b> Communicate the purpose or objectives of the activity so the learner is informed before participating in the activity.</p> <p><b>E 3.3</b> Present CME activities in compliance with the NSMA's policies for disclosure and commercial support.</p>	<p>C 2 The provider incorporates into CME activities the educational needs (knowledge, competence, or performance) that underlie the professional practice gaps of their own learners.</p> <p>C 3 The provider generates activities/educational interventions that are designed to change competence, performance, or patient outcomes as described in its mission statement.</p> <p>C 4 The provider generates activities/educational interventions around content that matches the learners' current or potential scope of professional activities.</p> <p>C 5 The provider chooses educational formats for activities/interventions that are appropriate for the setting, objectives and desired results of the activity.</p> <p>C 6 The provider develops activities/educational interventions in the context of desirable physician attributes (e.g., IOM competencies, ACGME Competencies).</p> <p>C 7 The provider develops activities/educational interventions independent of commercial interests (SCS 1, 2 and 6).</p> <p>C 8 The provider appropriately manages commercial support (if applicable, SCS 3).</p> <p>C 9 The provider maintains a separation of promotion from education (SCS 4).</p> <p>C 10 The provider actively promotes improvements in health care and NOT proprietary interests of a commercial interest (SCS 5).</p>
<p>[Note: Regarding E 3.3 and C7 to C10 - The NSMA's policies for disclosure and commercial support are articulated in: (1) The Standards For Commercial Support: Standards to Ensure Independence in CME Activities, as adopted by NSMA in September 2004; and (2) NSMA policies applicable to commercial support and disclosure. All these materials can be found on <a href="http://www.nsmadocs.org">www.nsmadocs.org</a>.]</p>		

Essential Area and Element(s)	Criteria for Compliance
<p style="text-align: center;"><b>Essential Area 3: Evaluation and Improvement</b></p> <p>The provider must,  <b>E 2.4</b> Evaluate the effectiveness of its CME activities in meeting identified educational needs.  <b>E 2.5</b> Evaluate the effectiveness of its overall CME program and make improvements to the program.</p>	<p>C 11. The provider analyzes changes in learners (competence, performance, or patient outcomes) achieved as a result of the overall program's activities/educational interventions</p> <p>C 12. The provider gathers data or information and conducts a program-based analysis on the degree to which the CME mission of the provider has been met through the conduct of CME activities/educational interventions.</p> <p>C 13. The provider identifies, plans and implements the needed or desired changes in the overall program (e.g., planners, teachers, infrastructure, methods, resources, facilities, interventions) that are required to improve on ability to meet the CME mission.</p> <p>C 14. The provider demonstrates that identified program changes or improvements, that are required to improve on the provider's ability to meet the CME mission, are underway or completed.</p> <p>C 15. The provider demonstrates that the impacts of program improvements, that are required to improve on the provider's ability to meet the CME mission, are measured.</p>
<p style="text-align: center;"><b>Accreditation with Commendation</b></p> <p>In order for an organization to achieve the status Accreditation with Commendation, the provider must demonstrate that it fulfills the following Criteria 16 - 22, in addition to Criteria 1-15.</p>	<p>C 16. The provider operates in a manner that integrates CME into the process for improving professional practice.</p> <p>C 17. The provider utilizes non-education strategies to enhance change as an adjunct to its activities/educational interventions (e.g., reminders, patient feedback).</p> <p>C 18. The provider identifies factors outside the provider's control that impact on patient outcomes.</p> <p>C 19. The provider implements educational strategies to remove, overcome or address barriers to physician change.</p> <p>C 20. The provider builds bridges with other stakeholders through collaboration and cooperation.</p> <p>C 21. The provider participates within an institutional or system framework for quality improvement.</p> <p>C 22. The provider is positioned to influence the scope and content of activities/educational interventions.</p>