

DOCUMENTATION REVIEW FORM

- Y = Yes, there is evidence that the provider's practice meets the IMS accreditation requirement.
- N = No, the evidence does **not** demonstrate that the provider's practice meets the IMS accreditation requirement.
- ENP = Evidence Not Provided (i.e. the provider included NO evidence in the file to demonstrate compliance with the IMS accreditation requirement.)
- NA = Not Applicable and requires an explanation.

		Pr er Name			
Activity Name					
Activity Date	Activity Type	Sponsorship	Commercial Support Received?		
Surveyor Name					

For <u> </u> does the provider's evidence demonstrate that the provider	Y	N	ENP	NA	Explanations:
C2 ...incorporated ... needs (knowledge, competence, or performance) that underlie a professional practice gap(s) of their own learners?					
C3 ... activity designed to change competence, performance, or patient outcomes (as described in its mission statement)?					
C4 ... content of this activity matched the learners' current or potential scope of professional activities					
C5 ... activity format was appropriate for the activities' setting, objectives and desired results?					
C6 ... developed the activity in the context of desirable physician attributes (e.g., IOM competencies, ACGME competencies).?					
C7 Q1 ... made all decisions... free of the control of commercial interests? (SCS1)					
C7 Q2 ... had disclosure information from all individuals in control of CME content regarding their relevant financial relationships? (SCS2.1)					
C7 Q3 ... disqualified anyone that refused to disclose? (SCS2.2)					
C7 Q4 ... implemented a mechanism(s) to identify and resolve conflicts of interest prior to the activity? (SCS2.3)					

C7 Q5	... disclosed to learners prior to the activity relevant (or no) financial relationships (with all required information) for all individuals in control of CME content? (SCS6.1, 6,2, 6,4, and 6.5)					
C7 Q6	... disclosed commercial support for the activity to learners prior to the activity (SCS6.3, 6,4, and 6.5)					
C8 Q1	... paid honoraria and reimbursement in compliance with the provider's policies ? (SCS 3.8)					
C8 Q2	... has written agreements that (1) specify terms and conditions ...; (2) are signed ..., (3) executed prior to ..., (4) for all commercial supporters? (SCS 3.8)					
C8 Q3	... has documentation detailing the receipt and expenditure of commercial support? (SCS 3.13)					
C 11	... evaluated changes in learners' competence <u>or</u> performance <u>or</u> patient outcomes that resulted from the CME activity?					

IMS Policies

Policies	The provider consistently utilizes the appropriate <u>Accreditation Statement(s)</u> for its activities.					
	The Enduring Material(s) produced consistently communicate the information as stated in the <u>Enduring Materials Policy</u> to participants prior to starting the activity.					
	The provider consistently demonstrates that the requirements as stated in the <u>Journal CME policy</u> are met for its journal-based CME.					
	The provider consistently demonstrates that the requirements as stated in the <u>Internet CME policy</u> are met for its internet-based CME.					

Criteria for Accreditation with Commendation

If the material you have reviewed offers evidence of practices that may support the IMS Criteria for Commendation, please specify your findings below.

Y = Yes, there is evidence that the provider’s practice meets the IMS accreditation requirement.

N = No, the evidence does **not** demonstrate that the provider’s practice meets the IMS accreditation requirement.

ENP = Evidence **Not Provided** (i.e. the provider included NO evidence in the file to demonstrate compliance with the IMS accreditation requirement.)

IMS' Criteria...	Y	N	ENP	Explanations:
C16 The provider operates in a manner that integrates CME into the process for improving professional practice.				
C17 The provider utilizes non-education strategies to enhance change as an adjunct to its activities/educational interventions (e.g., reminders, patient feedback).				
C18 The provider identifies factors outside the provider’s control that impact on patient outcomes.				
C19 The provider implements educational strategies to remove, overcome or address barriers to physician change.				
C20 The provider builds bridges with other stakeholders through collaboration and cooperation.				
C21 The provider participates within an institutional or system framework for quality improvement				
C22 The provider is positioned to influence the scope and content of activities/educational interventions.				

<p>If the material you have reviewed for this activity raises a concern regarding the provider’s compliance with any IMS expectation not explicitly addressed in the above questions, please explain your concerns and describe the material that you reviewed that led to your concerns.</p> <p>OR</p> <p>If you need to elaborate further on a comment from one of the above questions, please specify here the Criterion you are referencing and continue your comment.</p>	
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