

To: CME Administrators; CME Directors in Departments & Divisions
Subject: Recognition Cycle for Regularly Scheduled Series CME, 2021-2022
From: Rob Martin, Assistant Dean, Director of CME

Please prepare to renew your Grand Rounds and other Regularly Scheduled Series (RSS) for CME credit for the 2021-2022 cycle.

- De novo recognition of series not previously recognized will be accepted on a rolling basis without formal deadline; however, the process takes 2-3 weeks to approve.
- Renewal material **is due Monday, Nov. 30, 2020, for series expiring Dec 31, 2020.**
- Your CME series' ability to award CME and CE credits will expire on **December 31, 2020, unless you complete the Renewal cycle as described.**
- **Series that fail to comply with Renewal requirements will be de-certified, and must cease awarding CME or CE credits.**
- Series may also voluntarily choose to de-certify or go inactive.
- De-certified series are required to post notice that sessions grant no CME or CE credit.
- Sessions in 2021 will be ineligible to award CME/CE credit to learners **unless all nine of the below Renewal/Approval requirements have been met:**

9 Steps of the CME Series Approval Cycle for 2021-22

1	Dept. Admin. Duties
2	Faculty Duties
3	CME Office Duties



Detailed Checklist and Timeline

1) DESIGN: Clinical Faculty (Activity Director) submits Curriculum/ Audience Intent Plan (CAIP) to the CME office.

- ___ (a) RSS Series Renewal/Recognition Opens on October 15, 2020. Paper CAIP submissions are not accepted. Complete CAIP online at: <https://www.surveymonkey.com/r/RSScme2021> (valid only UNTIL October 14, 2020)
- ___ (b) Identify all content planners, administrators, speaker coordinators, and any others who help plan your series. Each of these persons must complete a Disclosure annually.
- ___ (c) Identify any credits you wish to award to physicians and non-physicians (Physician CME, Nurse Contact Hours, Social Worker CEU's etc.)



___(d) If you Direct or Co-plan multiple series, please submit a separate CAIP for each series title: e.g. Grand Rounds, M&M conference, Tumor Board, Case Conference, Journal Club, etc.

___(e) Deadline for electronic CAIP submission is 12:00 noon EST on Nov. 30, 2020.

2) **BALANCE:** Clinical Faculty (Activity Director) will master protocols of Content Validation, Independence, & Conflict of Interest Resolution.

___(a) Faculty Director and all administrators/clinicians/coordinators who help plan the series, regardless of profession, **must complete a Disclosure every 12 months.**

___(b) In the event of absence, leave, or exit of the CME Field Agent (administrative coordinator) of the series, **the Activity Director must name a qualified replacement and direct them to the CME office for certification as CME Field Agent (CMEFA).** Any lapse in CMEFA tenure will prevent CME/CE credits from being awarded during the lapse.

Faculty Director must sign agreements with the CME office, consenting to follow defined policies of Standard of Conduct, Content Validation, and Resolution of Conflicts of Interest.

3) **TRAIN:** Each series' CME coordinator completes CME Field Agent (CMEFA) Training Certificate and annual training updates.

___(a) CME office releases CME Field Agent video training modules to all current coordinators of CME Series. If you are a new CME coordinator or do not receive a registration notice for the CMEFA training modules, please alert the CME office.

___(b) Academic CME Coordinator must complete the CME Field Agent training modules, including viewing of all videos, scoring 80% or better on the Quiz, and download their passing Certificate by November 30, in order to qualify their series for recognition/renewal of CME credit-granting privileges.

___(c) CMEFA Certificate requirement varies by the type of series you will manage:

- CMEFA Level 1 Certificate is required if you will manage series that awards only physician CME credits.
- Both CMEFA Level 1 and Level 2 Certificates are required if you will manage a series that awards any of these kinds of credit:
 - Interprofessional credits: Physicians and [Nurses OR Social Workers OR other clinicians], -OR-
 - Physician MOC specialty credit based on written assessment, -OR-
 - CME/CE credit for any on-demand/recorded/print/enduring material.
- The CMEFA Level 1 and Level 2 training and testing modules can be accessed at <https://winthrop.cloud-cme.com/default.aspx?P=1100>



4) RECOGNIZE: CME office reviews and approves your department’s staffing of the series, and Curriculum/Audience Intent Plan.

- ___ (a) The CME office will respond to CAIP submissions within 2 weeks.
- ___ (b) **If your submission is incomplete**, you must provide gap items within 48 hours.
- ___ (c) A satisfactory review will result in the CME office sending a Series Recognition Letter (SCL) outlining next steps to the Activity Director and CME Field Agent

5) AGREE: CME Field Agent & Faculty Activity Director each sign and return the SCL.

- ___ (a) **Both the Faculty Director and CMEFA must assent to follow** weekly CME documentation and compliance protocols, and maintain consistent staffing of series.
- ___ (b) **Any discontinuity of service by either Faculty Director or CMEFA** will suspend the series’ credit-granting privileges until a suitable replacement is approved.

6) ASSENT: After CME office receives the signed Assent, it provides CME system access to the CME Field Agent and the Faculty Director.

- ___ (a) Administrative access to the Cloud-CME compliance system is granted for the purpose of recording Content Review sign-offs, resolving conflicts of interest, scheduling sessions, and recording attendance and credits.
- ___ (b) **Use of the Cloud-CME system for any fraudulent purpose or non-compliant award** of CME credit will be grounds for immediate termination of the Series CME recognition, and possibly other disciplinary actions.

7) DATA: CME Field Agent manages the session schedule, content, compliance, attendance and logistics.

- ___ (a) **CMEFA must enter or import the session Attendance in the Cloud-CME electronic credit system within 7 days after the session occurs.**
- ___ (b) **CMEFA must retain all session documentation flyers, disclosures, and instructional materials**, organized in an electronic manner specified by the CME office, in order to be immediately retrievable in the event of an ACCME audit.
- ___ (c) **CMEFA must make reasonable efforts** to support series attendees’ use of E-Sign-In and self-claiming of credit, to streamline attendance-keeping times.
- ___ (d) **Late/delayed attendance-keeping damages the professional credentialing** by specialty boards and Medical Staff Services of the clinicians who attend your series.
- ___ (e) **Non-compliance with series documentation responsibilities** may result in loss of the series CME recognition, in order to protect the institution’s accreditation standard.



8) REVIEW: Faculty Director resolves Conflicts of Interest that arise, and reviews/validates all CME content, by directing planners & instructors

- ___ (a) *Conflict of Interest Resolution duty:*
- ___ 1. The Faculty Director of a CME series **cannot have relevant conflicts of interest within the therapeutic area** they are educating.
 - ___ 2. Conflict of Interest Resolution(COIR) includes:
 - ___ a. Disclosure by all planners/instructors before planning an activity;
 - ___ b. Analyzing the need for conflict resolution immediately upon disclosure;
 - ___ c. **Directing recusal, replacement or modified content** to resolve COI; and
 - ___ d. **Faculty Director completes COIR form** to document the action.
- ___ (b) *CME Content Validation duty:*
- ___ 1. Prior to activity occurring, **all CME content is reviewed/validated by a qualified clinician or scientist** (e.g. Faculty Activity Director, OR supervising clinical chair/designee, OR a qualified house officer of PGY-3 or higher.)
 - ___ 2. **Clinical Content Review is documented** using the Clinical Content Review Attestation Form, to assure that:
 - i. **Content is non-promotional.** Chemical names/engineering descriptors of interventions appear instead of brand names, and no logos appear.
 - ii. **Content includes only Evidence-Based Science.** Recommendations involving clinical medicine must be **based on evidence accepted within the profession of medicine** as justification for indications and contraindications in the care of patients.
 - iii. **Content avoids/eliminates advocacy of unscientific modalities.** Scientific research in patient care recommendations conforms to generally accepted standards of experimental design, data collection and analysis.
 - iv. **Content devoted to advocacy of unscientific modalities,** or that promotes recommendations, treatment, or manners of practicing medicine known to have risks or dangers that outweigh the benefits; or known to be ineffective in the treatment of patients; **are not within the definition of CME, and must not be provided as CME content.**
 - v. Instructors must pre-alert to audience if they will be discussing “off-label” indications of non-FDA-approved indications during CME.

9) ASSESS: CME office reviews and audits CME compliance requirements in real time, and provides feedback to faculty & CME Field Agent



- ___(a) **As a condition of renewing a series CME recognition**, the CME office will review the Retrospective Curriculum Summary (RCS) for series, which may take the form of **-EITHER-**:
- ___A Curriculum Summary (logbook) listing the past year's topics, dates, learning objectives and speakers for the entire year in tabular form; **-OR-**
 - ___A comprehensive compendium of all CME Session Flyers reflecting the data equivalent to the Curriculum Summary (logbook);
- ___(b) **The RCS must contain the full 24-month look-back**, including every session held since the start date listed in your current Series Recognition Letter.
- ___(c) **Prepare only one document containing all session data**, and include it with your Faculty Directors CAIP submission (PDF format is preferred)
- ___(d) Collate the pages of your RCS **in advance** so that your Faculty Activity Director can submit a complete RCS with the CAIP submission.



Other important dates

- Friday, October 15, 2020: **CME office releases CME Field Agent training modules** to all current coordinators of CME Series. If you are a new CME coordinator, or do not receive a registration notice for the CMEFA training modules, please alert the CME office.
- Friday, October 15, 2020: Electronic submission of **CAIP for RSS Series’ renewal/recognition opens**. Paper submissions not accepted. **Submit at: <http://bit.ly/NYUWHrss>**
- Monday, November 30, 2020: **CAIP Renewal/Recognition submissions due by 12:00n**.
- Monday, November 30, 2020: **Coordinators of series must complete CME Field Agent modules appropriate to their series** and pass the Certification Quiz with 80% score, in order for series to be Renewed/Recognized.
- Monday, December 14-31: **CME office issues Renewal/Recognition decisions** via SCL letter to Director/Coordinator.
- Friday, January 1, 2021: **Renewed /Recognized Series are alone eligible to offer credit-bearing CME/CE sessions**. After this date, non-recognized series must post notice of no credit to be awarded on sessions held.

Glossary of Terms and Abbreviations

CAIP (Curriculum/Audience Intent Plan): A designed curriculum based on evidence of need for particular learning objectives and clinical audiences.

CMEFA (CME Field Agent): A staff person within a clinical or academic department trained to administer CME activity compliance, and certified by the CME office for competency.

COIR (Conflict of Interest Resolution): A process to ensure commercially interested individuals disclose financial relationships, and do not influence selection/presentation of CME content.

RCS (Retrospective Curriculum Summary): Logbook or compendium of session flyers containing comprehensive look-back of all sessions held in the Recognition term.

RSS (Regularly Scheduled Series): A CME activity, including Grand Rounds, Tumor Boards, M&M, Journal Club, Lecture Series, Visiting Professor Lecture Series, and Case Conferences.

SRL (Series Recognition Letter): An offer of recognition of series’ eligibility to award CME credit, which becomes binding once signed by the Faculty Activity Director and the CME Field Agent.

