# Data Sources for the Accreditation Process

| Source Type | Goals | Objectives | Format |
|---|---|---|---|
| **Application and Self-Study** | The application and Self-Study is the foundation for the accreditation process. The goals of the application and self-study are to provide an accredited provider or initial applicant the opportunity to assess its commitment to and role in providing CME, analyze its current and past practices, identify areas for improvement, and determine its future direction. | ❖ Analyze data collected about what, why and how the CME program and its products and services are utilized. <br> ❖ Determine a provider's level of compliance with the required Essential and their Criteria, the Standards for Commercial Support and the Policies of MedChi, the ACCME and the AMA <br> ❖ Assess how well a provider is performing, and <br> ❖ Identify changes and improvements to be implemented to be a successful provider in the future | How the self-study is accomplished is the responsibility of the provider. The report should address the goals and objectives, as describe. Providers are given a guide for the application and self-study that includes key questions for review and study by the provider. This guide is designed to assist the provider in assessing its program and compliance. Using the guide, a provider should be able to perform a thorough assessment and prepare a comprehensive report for use in the accreditation decision process. |

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| **Site Survey** | The goals of the site survey are to gather data about administration, documentation, and performance in practice; to verify and clarify compliance with the Criterion in all Essential Areas and to seek out and acknowledge excellence and innovative and creative practices. | ❖ To provide the provider an opportunity to clarify the information supplied in the application and self-study and to demonstrate performance in practice of its program. <br> ❖ To allow the provider to demonstrate the adequacy of administrative support and resources which support the CME unit <br> ❖ To give MedChi the opportunity to audit documentation; to ensure that any specific documentation required by MedChi, the ACCME or the AMA is present. <br> ❖ To ensure that sufficient data, documentation and information are collected and available to CMERC for the formulation of an accreditation decision. | The format involves interviews between representatives of the provider's organization and the surveyor(s) for the MAP System and CMERC. A review of activity documentation is conducted and if appropriate a direct review of a CME activity. <br><br> Components of the site survey generally include the following: <br> • Introductory session <br> • Meeting with CME principals/administration/CME committee members/staff <br> • Activity documentation review <br> • Direct activity review <br> • Exit review |

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| **Activity Documentation Review** (Part of the Site Survey) | The goal of the activity documentation review is to gather data regarding a provider's compliance with the accreditation Essentials and their Criteria; the Standards for Commercial Support; and the policies of MedChi, the ACCME and the AMA. It is a measure of a provider's performance in practice. | ❖ Determine whether there is documentation to support that activities have been planned, presented and evaluated in Compliance with the Criterion in all Essential Areas in the manner that the provider has represented its practices ❖ Assess that specific documentation that is required by MedChi, ACCME and AMA policy is present ❖ Seek out examples of excellence for acknowledgement | MedChi selects activities from the provider's documentation for review. All provider activity files from the current accreditation period (or the last 2 years for initial applicants) must be available for review.<br><br>A provider may also be requested to provide other documentation of compliance during the review.<br><br>A provider may also request to submit for review additional activity files (within reason) to support evidence of performance in practice. |

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| **Direct Activity Review** | The goal of the direct activity review of an applicant/accredited provider/or Joint Sponsor is to gather data about the application of the Essential Areas and their Critieria and the policies of MedChi, the ACCME and the AMA. The direct activity review affords a unique opportunity to observe a CME activity in real time and measure performance in practice. It allows an applicant/accredited provider/or Joint Sponsor to demonstrate in action the CME practices it represents its program to have in place. | ❖ Document compliance with those criteria of the Essential Areas and their Criteria and the policies of MedChi, the ACCME and the AMA. ❖ Gather data regarding a provider's performance in practice through the experience of real time activity observation. ❖ Get clarification from the applicant/accredited provider/or Joint Sponsor on questions that might arise as a result of an activity. | A Direct Activity Review can occur at the time of a Site Visit, in conjunction with the joint sponsorship process or as part of the routine monitoring of the activities of the providers in the MAP System (independent from a site visit).<br><br>The process of the Direct Activity Review includes:<br><br>• Direct observation of an activity (live, through the internet or through review of an enduring material or journal CME activity).<br>• Interview with the staff of the provider/applicant or joint sponsor.<br>• Completion of the Direct Activity Review form by the Surveyor or reviewer. |

# MedChi
*The Maryland State Medical Society*

**MAP System**
**Accreditation Approach**
**And**
**Decision Making Criteria**

## Data Sources for the Accreditation Process

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| **Annual Report and Monitoring** | The goals of the annual report and monitoring process are to gather data about  an accredited provider's CME program, as required by the ACCME, and to gather data about that provider's program and changes to that program; as well as monitor activities, trends and changes throughout the MAP System. | ❖ Provide an opportunity for providers to report on progress of changes and improvements in their programs<br>❖ Collect standardized data, using the ACCME report tool, about the products, services, and processes of all MAP System providers<br>❖ Develop feedback on the issues of accreditation that should be reviewed and improved. | Information is gathered using a standardized form developed by the ACCME and supplemented with additional questions from MedChi. The form is mailed to all MAP System providers. It can be completed in paper form or in electronic form upon request. Provider information is reported to the ACCME as required, but otherwise is maintained in a confidential manner. The ACCME follows a similar policy regarding the confidentiality of the information.<br>Any information collected during a complaint and inquiry process may also be included in the summary of the annual report. This information is not part of the information shared with the ACCME, unless requested as part of a larger investigation of a provider. |