

MedChi

The Maryland State Medical Society

MEDCHI's Instructions for Conducting a Self Study for Reaccreditation

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Purpose of the Self Study

The organizational Self Study is fundamental to the generation of descriptive information and assessment of the CME Program and to the program's plans for future improvement. The Self Study report will form the foundation for MEDCHI's Re-accreditation process. The goals of the Self Study are to provide an opportunity for the accredited provider to:

- Assess its commitment to and role in providing continuing medical education,
- Analyze its current practices, and compliance with the criteria and policies for accredited CME,
- Identify areas for improvement,
- Determine its future direction, and
- Effectively present the results to MEDCHI for re-accreditation purposes.

During the Self Study, the CME Provider is encouraged to assemble and/or seek information from stakeholders (administration, faculty, attendees and other appropriate constituents) to:

- Collect and analyze data collected about what, why and how the CME Program and its products and services are utilized,
- Assess how well they are performing, and
- Identify changes made and improvements planned to enhance its work.

This process is most effective if the participants represent those involved in the organization's entire CME Program. MEDCHI uses the Self Study report in addition to other data to evaluate the provider's ability to fulfill its educational mission effectively and comply with ACCME/MedChi's Essential Areas and Criteria and the MedChi, ACCME and AMA Policies regarding accredited CME activities.

Administration of the Self Study

The organization and planning for a Self Study requires time and effort from many constituents involved in the provider's continuing medical education program. Appropriate leadership and broad involvement of constituents are two important factors to a successfully planned and implemented Self Study.

Leadership

The Provider should identify an individual who is responsible for the organization and completion of the Self Study. That individual should have a formal connection with the CME Program and be able to facilitate the collection of needed data and support for the effort. The individual would be responsible for the preparation of the final report about the program to MEDCHI.

Constituent Involvement

Every constituency that has a connection with the CME Program should be involved in the Self Study, possibly through a Self Study Task Force or Team. The constituencies include, but are not limited to, the CME staff, faculty, administration, participants and others such as librarians, quality improvement staff, or other partners that are relevant to the venue of the program.

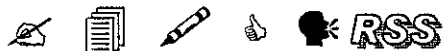
Completing the Self Study Report




The Self Study Report is intended to address two major components of accreditation: (1) a documentation of the CME Program's compliance with MedChi's Essential Areas and Criteria and Policies and (2) an outline of the plans for improvement of the Program.




Compliance with the Essential Areas and Policies

The CME provider should review the past and current performance of the program in meeting each Criterion in all three Essential Areas and the MedChi, ACCME, and AMA Policies. Evidence should be presented in the Self Study report of current compliance. If the provider determines that the program is in noncompliance or in partial compliance, the report should note the deficiency and outline a plan to improve the deficiency.

Providers are expected to describe their practices and verify these practices through documentation. Throughout the application providers will find the following symbols:



These symbols are included to allow provider to identify what types of information they are expected to submit. The symbol  indicates the need for a narrative or description to provide an understanding of an organizations practice(s). The symbol  indicates that documents or documentation must be provided to confirm or verify any practices. The  indicates that a provider may want to highlight information to assist the surveyors in identifying evidence of compliance.

The  indicates that if a provider conducts regularly scheduled series (RSS) that this is an area where you will need to include descriptions of your RSS planning and if appropriate any summaries and analyses of your monitoring data. The  symbol indicates specific instructions for that area of the self-study. The  indicates a hint regarding how to put together your self-study.

Plans for Improvement

In addition to outlining improvement plans for identified problems in the Essential Areas, the provider should review the practice of CME and the environment in which the provider practices to determine what improvements the overall CME Program should make. Those improvements could be in the context of the Program itself, the way CME is practiced or should be practiced by providers, or in reference to the changes in the health care environment that the Program functions. These plans for improvement will reflect the vision and values of the Program and provide a frame of reference for the improvement process for the program.

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Submission of the Self Study

The Self Study must be typed with at least 1 inch margins (top, bottom and sides), using 11 point type or **larger**. If the Self Study is produced on a computer, type the Sections from the application in bold larger font size type, clearly separated from the font size of your answers.

When the Self Study materials have been assembled, **they should be placed in a 2 inch three ring binder**. The Sections of the Self Study Report **should be tabbed and should correspond with the sections of the application. Please be sure each page in the binder is consecutively numbered**. The name (or abbreviation) of your organization should appear with the page number on each page. **Include a Table of Contents** using these page numbers. Please **submit a total of three (3) copies of the completed Self Study**. Be sure to keep a separate copy for your use during the survey. The applications should be mailed to:

Attn: MAPS/CMERC –ACCREDITATION/REACCREDITATION
Department of Continuing Medical Education
MedChi, the Maryland State Medical Society
1211 Cathedral Street
Baltimore, MD 21201-5516

Reaccreditation Fees

The reaccreditation fee is \$2000.00. *Payment is due with the Self Study application, an invoice is included with this packet.* Your organization has two choices for payment of its reaccreditation fee: 1) Sending a check to MEDCHI or 2) making a credit card payment by the stated deadline.

In addition, you are responsible for the Site Survey fee (\$500.00) and any expenses associated with a site survey and for the survey team, as well as any expense for an activity review if such a review is necessary. The fee for the Site Survey and expenses will be billed to your organization after the survey.