



# GUIDE TO THE PROCESS FOR UMA REACCREDITATION: AN OVERVIEW AND SUBMISSION REQUIREMENTS

## Overview and Background Information

### Conducting Your Self-Study for Reaccreditation

The self-study process provides an opportunity for the accredited provider to reflect on its program of CME. This process can help the organization assess its commitment to and role in providing continuing medical education and determine its future direction. The UMA has specific requirements for the *Self-Study Report* content outline, but the process of conducting a *self-study* is unique to your organization. Depending on the size and scope of your CME program, you may involve many or just a few individuals in the process.

### Data Sources Used in the Reaccreditation Process

The UMA's reaccreditation process is an opportunity for each accredited provider to demonstrate that its practice of CME is in compliance with the UMA's accreditation requirements through three primary sources of data about the provider's CME program:

#### Self-Study Report

Organizations are asked to provide descriptions, attachments, and examples to give the reviewers an understanding of CME practice(s) related to UMA Accreditation Requirements and Policies. Descriptions are narrative explanations. Attachments are specific documents. Examples are demonstrations of the implementation of the practices described that may include narrative and/or attachments.

#### Performance-in-Practice Review

Organizations are asked to verify that their CME activities are in compliance with UMA Accreditation Requirements and Policies through the documentation review process. The UMA will select up to 12 activities from the current accreditation term for which the organization will be expected to present evidence of performance-in-practice to the UMA for documentation review.

#### Accreditation Interview

Organizations are presented with the opportunity to further describe the practices presented in the Self-Study Report and activity files, and provide clarification as needed, in conversation with a team of volunteer surveyors who are colleagues from the CME community, trained by the UMA.

## **Expectations about Materials**

Materials submitted to the UMA, in any format, must not contain any untrue statements, must not omit any necessary material facts, must not be misleading, must fairly present the organization, and are the property of the organization.

Materials submitted for accreditation (Self-Study Report, activity files, other materials) must not include individually identifiable health information, in accordance with the Health Insurance Portability and Accountability Act (HIPAA).

## **Missing or Incomplete Information**

Providers that meet all of the deadlines and submission requirements of the reaccreditation review process will receive an accreditation decision from the UMA. Please note, if the UMA is unable to render a decision due to missing or incomplete information, the UMA reserves the right to request additional information, the expenses for which will be borne by the provider.

## **Accreditation Interview**

The accreditation interview offers the provider the opportunity to discuss its CME program with qualified surveyors. UMA surveyors will be assigned to review the self-study materials you submit to the UMA. They will meet with representatives of your CME program to engage in a dialogue about your organization's policies and practices that ensure compliance with the Accreditation Criteria, including the Standards for Commercial Support and Accreditation Policies.

At the interview, the surveyors will seek clarification about any questions they may have regarding the self-study materials you submitted to the UMA. You can expect UMA surveyors to 1) conduct their interactions with providers in a professional manner; 2) be familiar with your materials and the UMA's Accreditation Requirements and Policies; and 3) communicate clearly and effectively with providers without offering consultative advice or feedback regarding compliance or the expected outcome of the accreditation review.

The UMA utilizes the live interview as its standard accreditation interview format; however, other interview formats are available, including conference call. Live interviews may be a face-to-face meeting at the UMA offices or an on-site meeting at your organization's offices or the site of an activity. Interviews typically average 90 minutes in length.

To ensure the validity of the process and based on circumstances and available resources, the UMA reserves the right to make all final decisions regarding the interview format, date, time, and/or composition of the survey team.

The UMA will provide information about the process of scheduling the accreditation interview. The UMA will confirm your assigned surveyor(s) and the interview date and time in advance via email. Your organization will be asked to confirm receipt of this communication.

## **Decision-Making Process**

Your organization's accreditation decision is based on three components – the self-study, a review of activity files, and the interview. The UMA will also consider data from monitoring issues, if such data are applicable to the provider. The data and information are analyzed and synthesized by the site surveyors. The surveyors make recommendations on findings and status which are forwarded for action by the UMA's Accreditation Committee. All accreditation decisions are made by the full membership of the Accreditation Committee. The Committee meets three times each year (generally, in March, July, and November).

This multi-tiered system of review provides the checks and balances necessary to ensure fair and accurate decisions. The fairness and accuracy of UMA decisions are also enhanced by the UMA's use of a criterion-referenced decision-making system. Accreditation decision letters are sent to providers via mail following the UMA Accreditation Committee meeting.

## Requirements for Organizing and Formatting Your Self-Study Report

The Self-Study Report must be formatted as indicated to facilitate the review of your CME program:

The cover of each of the four Self-Study Report binders should clearly identify your organization by name and ACCME provider number. Use the full name of your organization as it is known to the UMA (no acronym or abbreviations).

1. Each page in the binder, including the attachments, must be consecutively numbered. The name (or abbreviation) of your organization must appear with the page number on each page.
2. The Self-Study Report must be organized using divider tabs as specified by the UMA.
3. Narrative, attachments, and examples must be provided as indicated in the UMA Self-Study Report Outline.
4. The Self-Study Report must be typed with at least 1" margins (top, bottom and sides), using 11 point type or larger; double-sided printing is acceptable.
5. Pertinent excerpts must be photocopied on standard paper for inclusion in the binder. Do not use plastic sleeves for single pages or for multi-page documents (i.e. brochures, handouts, etc.).
6. The Self-Study Report must be submitted in a three-ring binder. The rings may not be more than 1 ½ inches in diameter and the materials may not be more than 1 ½ inches in thickness.
7. Three hard copies of the Self-Study Report must be submitted to the UMA. Keep a separate duplicate copy for your reference at any time during the accreditation process, but especially at the time of the accreditation interview.
8. One electronic copy of the Self-Study Report in its entirety must be submitted to the UMA (in addition to the three binders), as a single PDF file on a USB flash drive, bookmarked according to the seven sections of the UMA Self-Study Report Outline.

### Regarding Self-Study Report Divider Tabs

The Self-Study Report must be organized using divider tabs to separate the content of the report in the seven sections of the UMA Self-Study Report Outline. For the purpose of printing tabs, the titles of the sections have been abbreviated as follows:

- I) Prologue
- II) Purpose And Mission (C1)
- III) Educational Activities (C2-7 and Policies)
- IV) CME Program and Educational Activities (C8-9)
- V) Content of Educational Activities (C10 and Content Validation)
- VI) Evaluation and Improvement (C11-13)
- VII) Engagement with the Environment (C16-22)

**Please pay careful attention to the requirements for organizing and formatting the Self-Study Report.**

These requirements facilitate the review of your CME program. If they are not fulfilled, then: 1) The reaccreditation process will be suspended, and the provider's review will be deferred to the next cohort with new deadlines and milestones established; 2) A fee that is equal to twice the standard extension fee will be required; and, 3) All self-study materials will be discarded by the UMA, and another complete set will be required by the UMA by the new deadline.

## The UMA's Review of Performance-in-Practice

The UMA's performance-in-practice review allows providers to demonstrate compliance with the UMA's expectations and offers providers an opportunity to reflect on their CME practices.

Materials that demonstrate compliance with the UMA's expectations may result from work done for individual activities or as part of the overall CME program. In this process, you will present materials that you developed and utilized for the activity to help your organization demonstrate compliance. Blank forms, blank checklists, and policy documents alone do not verify performance-in-practice.

The UMA's review of a provider's performance-in-practice entails the following process:

1. The provider's submission of CME activity data
2. The UMA's selection of activities for performance-in-practice review
3. The provider's submission of evidence of performance-in-practice for activities selected

### Submitting your CME Activity Data

Using the ACCME's Program and Activity Reporting System, or "PARS," ([pars.accme.org](http://pars.accme.org)), you will submit known information about the CME activities that your organization has provided, or will provide, under the umbrella of your ACCME accreditation statement, from the beginning of your current accreditation term to the expiration. The UMA adopted PARS for 2014 activity reporting; you may download a PARS report for activities provided in 2014 and following years. Providers must submit activities in an Excel spreadsheet for 2013 and prior years. For more information about PARS, visit

<http://education.accme.org/help/pars>.

### Selecting Activities for Performance-in-Practice Review

Based on the CME activity data you provide to the UMA, the UMA will select up to 15 activities for review. The UMA notifies providers via email of the activities selected for review. Your organization will be asked to confirm receipt of this communication. Providers are accountable for demonstrating performance-in-practice for all activities selected. It is important that you carefully review the list of activities selected by the UMA. If you note an error, such as an incorrect activity date or format, or if an activity was cancelled or otherwise did not occur, contact the UMA Accreditation office immediately to make any necessary corrections or adjustments to the sample of activities selected for performance-in-practice review.

## Requirements for Assembling and Submitting Performance-in-Practice Materials

### Submitting Evidence for Performance-in-Practice Review

The UMA utilizes the review of a provider's performance-in-practice, as seen in materials from CME activities, to verify that the provider meets the UMA's expectations. The requirements for assembling and submitting performance-in-practice materials to the UMA for the accreditation process and for the AMA are outlined in this section.

Providers have the following options for submitting evidence of performance-in-practice to the ACCME:

## Option 1: Submit Evidence Using the ACCME Performance-in-Practice Structured Abstract

The ACCME Performance-in-Practice Structured Abstract may be downloaded from the ACCME Web site or by contacting the UMA. Using the Structured Abstract, you will complete text-limited fields, tables, and attach evidence that verifies the activity meets the UMA's requirements.

## Option 2: Submit Labeled Evidence of Performance-in-Practice

### Downloading the Labels

Download the ACCME Documentation Review Labels. To download the labels, go to [http://www.utahmed.org/wcm/PhysicianSupport/CME\\_Accreditation.aspx](http://www.utahmed.org/wcm/PhysicianSupport/CME_Accreditation.aspx) and then click on "Performance in Practice Review Labels." This label template is pre-formatted to print onto *Avery Standard File Folder Labels #5266*. Affix the labels to evidence that verifies the activity meets the UMA's requirements. If the evidence applicable to a label is several pages in length, you may apply the corresponding label to the first page or on a coversheet. Use labels, arrows, highlighting, or other methods to make explicit where the evidence is located.

For Options 1 and 2, providers may submit evidence in either hard copy or electronic format.

### Instructions for submitting in hard copy:

1. Submit labeled evidence for each activity selected in an 8 ½" by 11" file folder; do NOT submit evidence in binders.
2. Affix a label on the front cover of each file folder that specifies:

• Full name of your organization	• Activity type, as submitted in PARS
• Activity title, as submitted in PARS	• Directly or jointly provided
• Activity date and location, as submitted in PARS	• Commercial support was/was not accepted

### Instructions for submitting in electronic format:

**Note:** Submission in electronic format requires Adobe Acrobat version 8.0 or more recent.

1. Save the evidence for your activity as a separate PDF file. The file you create should appear as a single document when opened. Do not use the Acrobat option to make a PDF "portfolio" style file. Use the following format for the file name: Brief activity title\_Date of activity(YYYYMMDD)
2. Create a cover page for your activity file with the following information displayed. This cover page must be the first page of the activity file.

• Full name of your organization	• Activity type, as submitted in PARS
• Activity title, as submitted in PARS	• Directly or jointly provided
• Activity date and location, as submitted in PARS	• Commercial support was/was not accepted

3. If you use the labels, create a bookmark for each label, and use the language of the label as your bookmark, e.g., "C2 The professional practice gap(s) of your learners on which the activity was

based.” If you use the abstract, create a bookmark for each attachment, and use the number of the attachment as your bookmark, e.g., “Attachment 1.”

4. Save all of the PDF files to a single CD-ROM or USB flash drive. Submit two CD-ROMs or flash drives, each with a complete set of PDF activity files.

### Enclosing the CME Product

If the activity for which you are labeling evidence is an enduring material, journal, or Internet CME activity, you are required to demonstrate that the activity is in compliance with the UMA Policy that is specific to its activity type, in addition to demonstrating compliance with the Accreditation Criteria and other UMA Policies. Please refer to the specific policies related to these activity types on [http://www.utahmed.org/wcm/PhysicianSupport/CME\\_Accreditation.aspx](http://www.utahmed.org/wcm/PhysicianSupport/CME_Accreditation.aspx).

Where possible, affix the ACCME performance –in-practice labels to hard copy evidence to show how these activities comply with the applicable policy. In addition, you must submit the CME product in its entirety for each Internet, journal-based and/or enduring material CME activity selected. In the product, you may also highlight, flag, note, describe, or otherwise provide written directions to ensure that you are showing where you are meeting the policy requirements.

For Internet activities, provide a direct link to the online activities or the URL, and a username and password, when necessary. If an Internet activity selected is no longer available online, you may submit the activity saved to CD-ROM or provide access on an archived Web site. If UMA surveyors have difficulty accessing the activities or finding the required information, you will be expected to clarify this evidence at the time of the interview. Active URLs, login IDs, and passwords must be made available for the duration of your organization’s current accreditation review.

## Documentation Requirements for AMA PRA Category 1 Credit™

The **American Medical Association’s** collection of evidence from a representative sample of your activities demonstrates how well and how consistently your organization is meeting some of the **AMA’s PRA Category 1 Credit™** requirements.

As a service to both the provider and the credit system, the UMA is collecting this evidence and transmitting it for the AMA’s review and follow-up with providers. This information will not be considered as part of your UMA accreditation decision and will not elicit feedback from the UMA.

### Download the Labels

Click here for [AMA PRA Labels](#).\* This label template is pre-formatted to print onto *Avery Standard File Folder Labels #5266*. You may use either white or colored labels.

\* [http://www.accme.org/dir\\_docs/doc\\_upload/a061c230-fe8d-47b4-aa8e-69e0ea1c5444\\_uploaddocument.doc](http://www.accme.org/dir_docs/doc_upload/a061c230-fe8d-47b4-aa8e-69e0ea1c5444_uploaddocument.doc)

### Label the Documents

Assemble one **separate file folder** that indicates the full name of your organization (no acronyms or abbreviations) on the cover of the file folder and includes, for each activity selected, evidence of your organization’s use of the:

- **AMA PRA Category 1 Credit™** Designation Statement by submitting a copy of the page of the brochure or handout which indicates the AMA’s PRA statement
- AMA New Skills and Procedures Levels (if applicable)

**Submit a Separate File Folder of AMA Documentation** to the UMA at the same time that you submit the UMA performance-in-practice review materials.

## Submitting Materials to the UMA

The following materials must be shipped, using a method that has a reliable electronic, web-enabled delivery tracking system, for the UMA's receipt by the published due date:

- Three copies of the Self-Study Report in binders formatted and organized as specified
- One electronic copy of the Self-Study Report as a single PDF file on a CD-ROM or flash drive
- One set of your evidence of performance-in-practice for selected activities
- One copy of the CME product(s) for any enduring materials, Internet, or journal-based CME activities selected for performance-in-practice review
- One set of your evidence of use of the AMA credit designation statement and (if applicable) the AMA new skills and procedures levels

**Do not ship original documents.** Activity files will not be returned. Retain a duplicate set of materials including the Self-Study Report and labeled evidence of performance-in-practice for your own reference at any time during the accreditation process, but especially at the time of the accreditation interview. If the need arises, the UMA may ask for a second copy of a file or set of files.

### MAILING ADDRESS

Accreditation Committee  
Utah Medical Association  
310 East 4500 South, Suite 500  
Salt Lake City, Utah 84107-4250