



OFFICE OF CONTINUING PROFESSIONAL DEVELOPMENT (OCPD)

Planning Document for Regularly Scheduled Series (RSS)

Telephone: (813) 224-7862; Fax: (813) 224-7864

The planning document for RSS is completed and approved on an annual basis (June)

OCPD Use Only Directly Sponsored Jointly Sponsored

Program Code: _____ Division: _____

APPLICANT INFORMATION

(Please Print or Type)

RSS Activity Title: _____

Department and/or Organization: _____

RSS Program Director: _____ Phone: (____) _____

Fax: (____) _____ E-mail: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

RSS Dept Liason: _____ Phone: (____) _____

(If other than Program Director)

Fax: (____) _____ E-mail: _____

Mailing Address: _____

City: _____ State: _____ ZIP Code: _____

Educational Planning:

Educational Format

- Grand Rounds
- Journal Club
- Tumor Board

- Case Studies
- M&M Conferences
- Other _____

Frequency: Weekly Monthly Quarterly Other: _____

Usual Date(s) & Time(s) for Activity: _____

Usual Location: _____

Projected Attendance: _____ Attendance Limit(s) if any _____

Target Audience: (This CME activity is planned to meet the needs of what group(s) of practicing physicians?)

Physician Nurse Pharmacist Psychologist Other: _____

Type of Result for this Activity

Our CME Mission Statement and the ACCME require that every CME activity focus on Improvements in 1) competence and/or 2) performance in practice and/or 3) patient outcomes. Please state what your RSS series will focus on (check all that apply):

- Improved Competence (includes knowledge transfer by definition)
- Performance in Practice
- Patient Outcomes

GAP ANALYSIS

What procedures were used to identify the existing gap(s) between current and best practices? Documentation must be summarized **and attached**.

- | | |
|--|---|
| <input type="checkbox"/> Survey of targeted learners | <input type="checkbox"/> New information (diagnostic techniques, treatment plans, etc |
| <input type="checkbox"/> Clinical practice data | <input type="checkbox"/> Opinion leader interviews |
| <input type="checkbox"/> Quality assurance studies | <input type="checkbox"/> Summary of previous outcomes data |
| <input type="checkbox"/> Practice profiles | <input type="checkbox"/> Practice guidelines or specialty society clinical guidelines |
| <input type="checkbox"/> Opinion of experts in specialty field(s) | <input type="checkbox"/> Faculty and/or planning committee's perception of need |
| <input type="checkbox"/> Gap(s) identified by target audience/expert | <input type="checkbox"/> Focus panels (interviews) |
| <input type="checkbox"/> Requirements of state licensing board, specialty societies, etc | <input type="checkbox"/> Review of peer-reviewed literature |
| <input type="checkbox"/> Committee findings/audits | |
| <input type="checkbox"/> Public health data | |

The key to planning the RSS for this year is that you have clearly identified the “gap(s)” in your practice. The educational or practice gap is based on the difference between what the learners do now, versus what you want them to do (also known as “BEST PRACTICE”).

Therefore, please complete the chart below by stating 1) current practice, followed by 2) the best practice that you intend for the learner to achieve as a result of this RSS series, followed by 3) the gap, which is what your series will focus on this year. State two or more gaps as you plan for the upcoming year.

<Add or delete rows as needed>

IDENTIFIED GAP WHAT ARE THE <i>LEARNERS'</i> NEEDS? (Current Practice)	DESIRED RESULTS (Best or Evidence-Based Practice)	The Resulting Gap

****Please see Gap Analysis Worksheet as a tool to assist in determining the gap.**

Please attach documentation for the above identified gaps such as result of literature searches, specialty societies, guidelines, surveys of departmental physicians, pas evaluations, annual RSS planning notes, etc.

Physician Competencies and Attributes

Based on the Maintenance of Certification (MOC) competencies designated by the American Board of Medical Specialties (ABMS), what competency areas will you address in this RSS activity? Check **all** that apply and specify the content you will incorporate into this activity.

ABMS Competencies	How will you address these competences in your series?
<input type="checkbox"/> Patient care (provide care that is compassionate, appropriate and effective treatment for health problems and to promote health)	
<input type="checkbox"/> Medical knowledge (demonstrate knowledge about established and evolving biomedical, clinical and cognate sciences and their application in patient care)	
<input type="checkbox"/> Practice-based learning and improvement (investigate and evaluate patient care practices, appraise and assimilate scientific evidence and improve practice of medicine)	
<input type="checkbox"/> Systems-based practice (demonstrate awareness of and responsibility for larger context and systems of healthcare; call on system resources to provide optimal care, eg, coordinating care across sites or serving as the primary case manager when care involves multiple specialties, professions or sites)	
<input type="checkbox"/> Professionalism (demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles and sensitivity to diverse patient populations)	
<input type="checkbox"/> Interpersonal and communication skills (demonstrate skills that result in effective communication and teaming with patients, their families and professional associates, such as fostering a therapeutic relationship that is ethically sound; using effective listening skills with non-verbal and verbal communication; working as both a team member and at times as a leader)	

EDUCATIONAL BARRIERS

Planners are encouraged to give consideration to the system of care in which the learner will incorporate new information or practices or validate existing behaviors and/or knowledge. Planners must address anticipated barriers that could prevent implementation (eg, formulary restrictions; insufficient time for implementation of new skills or behaviors; lack of insurance reimbursement; lack of organization's support; lack of resources; policy issues within organization).

- No relevant system barriers have been identified at this time for the overall series.
- The following barriers have been identified and will be addressed in the educational intervention (add lines as needed):

IDENTIFIED SYSTEM BARRIER	PLANNED DISCUSSION IN CONTENT

PATIENT SAFETY

Planners should examine CE activities for patient safety concerns in accordance with the national public interest. Please list issues of patient safety associated with these educational interventions that need to be addressed in this activity.

- No patient safety issues apply to this activity.
- The following patient safety issues will be addressed in this activity.

IDENTIFIED PATIENT SAFETY ISSUES	PLANNED DISCUSSION IN CONTENT

LEARNING OBJECTIVES

Learning objectives for RSS are written in a global manner to guide the content and learner expectations for the annual program. The objectives need to link to the identified gap(s) and content.

As a result of participating in this series, participants should be able to:

EVALUATION

A. Outcomes Evaluation Strategies

Evaluations are tools used to determine whether the result you intended for learners has actually been achieved. The choice of evaluation tools depends on (1) the goal of the activity (i.e., knowledge transfer, competency), (2) the mode of education and applicability of the tool (i.e., live activity, online, print), and (3) available resources, (i.e., budget, personnel). Please indicate the outcome tool(s) selected for this activity and the rationale for their selection:

METHOD SELECTED	
<input checked="" type="checkbox"/>	Post-Activity Evaluation (measures learner satisfaction) [minimum requirement]
<input type="checkbox"/>	Pre- and Posttest (<i>measures immediate learning</i>)
<input type="checkbox"/>	Commitment-to-Change Statement
<input type="checkbox"/>	Audience Response System (<i>identifies whether learners understand content and provides learning reinforcement</i>)
<input type="checkbox"/>	Focus Group (<i>qualitative measurement to collect more in-depth information</i>)
<input type="checkbox"/>	Posttest (<i>measures transfer of knowledge or verifies current knowledge</i>)
<input type="checkbox"/>	Case Discussions or Vignettes (<i>measures application</i>)
<input type="checkbox"/>	Post-Activity Follow-up Survey (<i>Identifies change in practice</i>)
<input type="checkbox"/>	Other (please specify):

ACTIVITY PROMOTION*

How will prospective participants be notified of the activity? (Check as many as apply)

- Brochure/Flyer E-Mail Health Sciences Center Newsletter
 Posted Announcement Fax Internet
 Other: _____

The OCPD must review and approve all drafts of brochure(s)/promotional material(s) PRIOR to printing, posting or mailing. Failure to obtain OCPD approval may result in reprinting of promotional material(s).

Commercial support

Do you accept commercial support for your activities? ___ Yes ___ No

If yes, is the support provided:

- On a program-by-program basis
 In support of a series of programs
 Other (describe) _____
 I have read and understand the Standards of Commercial Support. _____ initials

Disclosure

How will you communicate faculty disclosure to participants? (REQUIRED; check one or both)

- () written disclosure will be handed out to the participants at each session
() verbal disclosure when speaker is introduced. (Written Documentation of Verbal Disclosure form must be used)

CONTINUING EDUCATION CREDIT HOURS

The *proposed* yearly agenda, including topics and *proposed* speakers, must be submitted with the planning document in order for the OCPD.

I certify that the information contained in this document is true and correct to the best of my knowledge.

Activity Director Signature: _____

Department/Institution: _____

Return Planning Document to:

USF OCPD
12901 Bruce B. Downs Blvd., MDC Box 46
Tampa, FL 33612
Attn: Pam LeClair
Fax:(813) 224-7864
E-Mail: pleclair@health.usf.edu

OCPD Use Only

Date received: _____ By: Mail Fax Hand Delivered E-Mail

CE Committee Review: _____
Date

Committee Action:

- Series Approved for _____ hour(s) per session.
 Provisional approval, pending: _____
 Denied: _____ Reason: _____
Date

Associate Vice President/Associate Dean, USF Health, OCPD: _____

Date: _____

The 24 Member Boards of ABMS, including current contact information and Web site addresses, are:

The American Board of

Allergy and Immunology

111 S. Independence Mall East, Suite 701
Philadelphia, PA 19106
phone: (215) 592-9466
fax: (215) 592-9411
online: www.abai.org

The American Board of

Anesthesiology

4101 Lake Boone Trail, Suite 510
Raleigh, NC 27607
phone: (919) 881-2570
fax: (919) 881-2575
online: www.theaba.org

The American Board of

Colon and Rectal Surgery

20600 Eureka Road, Suite 600
Taylor, MI 48180
phone: (734) 282-9400
fax: (734) 282-9402
online: www.abcrs.org

The American Board of

Dermatology

Henry Ford Health System
1 Ford Place
Detroit, MI 48202
phone: (313) 874-1088
fax: (313) 872-3221
online: www.abderm.org

The American Board of
Emergency Medicine

3000 Coolidge Road
East Lansing, MI 48823
phone: (517) 332-4800
fax: (517) 332-2234
online: www.abem.org

The American Board of
Family Medicine

2228 Young Drive
Lexington, KY 40505
phone: (859) 269-5626 or
(888) 995-5700
fax: (859) 335-7501
online: www.theabfm.org

The American Board of
Internal Medicine

510 Walnut Street, Suite 1700
Philadelphia, PA 19106
phone: (215) 446-3500 or (800) 441-2246
fax: (215) 446-3473 or (215) 446-3590
online: www.abim.org

The American Board of
Medical Genetics

9650 Rockville Pike
Bethesda, MD 20814
phone: (301) 634-7316
fax: (301) 634-7320
online: www.abmg.org

The American Board of

Neurological Surgery

6550 Fannin Street, Suite 2139
Houston, TX 77030
phone: (713) 441-6015
fax: (713) 794-0207
online: www.abns.org

The American Board of

Nuclear Medicine

4555 Forest Park Boulevard, Suite 119
St. Louis, MO 63108
phone: (314) 367-2225
fax: (314) 362-2806
online: www.abnm.org

The American Board of

Obstetrics and Gynecology

2915 Vine Street, Suite 300
Dallas, TX 75204
phone: (214) 871-1619
fax: (214) 871-1943
online: www.abog.org

The American Board of

Ophthalmology

111 Presidential Blvd., Ste. 241
Bala Cynwyd, PA 19004
phone: (610) 664-1175
fax: (610) 664-6503
online: www.abop.org

The American Board of
Orthopaedic Surgery

400 Silver Cedar Court
Chapel Hill, NC 27514
phone: (919) 929-7103
fax: (919) 942-8988
online: www.abos.org

The American Board of
Otolaryngology

5615 Kirby Drive #600
Houston, TX 77005
phone: (713) 850-0399
fax: (713) 850-1104
online: www.aboto.org

The American Board of
Pathology

4830 Kennedy Blvd., Suite 690
Tampa, FL 33609 or
P.O. Box 25915
Tampa, FL 33622
phone: (813) 286-2444
fax: (813) 289-5279
online: www.abpath.org

The American Board of
Pediatrics

111 Silver Cedar Court
Chapel Hill, NC 27514
phone: (919) 929-0461
fax: (919) 929-9255
online: www.abp.org

The American Board of

Physical Medicine and Rehabilitation

3015 Allegro Park Lane SW
Rochester, MN 55902
phone: (507) 282-1776
fax: (507) 282-9242
online: www.abpmr.org

The American Board of

Plastic Surgery

Seven Penn Center, Suite 400
1635 Market Street
Philadelphia, PA 19103
phone: (215) 587-9322
fax: (215) 587-9622
online: www.abplsurg.org

The American Board of

Preventive Medicine

330 S. Wells, Suite 1018
Chicago, IL 60606
phone: (312) 939-2276
fax: (312) 939-2218
online: www.abprevmed.org

The American Board of

Psychiatry and Neurology

2150 E. Lake Cook Road, Suite 900
Buffalo Grove, IL 60089
phone: (847) 229-6500
fax: (847) 229-6600
online: www.abpn.com

The American Board of

Radiology

5441 East Williams Blvd., Ste. 200
Tucson, AZ 85711
phone: (520) 790-2900
fax: (520) 790-3200
online: www.theabr.org

The American Board of

Surgery

1617 John F. Kennedy Boulevard, Suite 860
Philadelphia, PA 19103
phone: (215) 568-4000
fax: (215) 563-5718
online: www.absurgery.org

The American Board of

Thoracic Surgery

633 N. St. Clair Street, Suite 2320
Chicago, IL 60611
phone: (312) 202-5900
fax: (312) 202-5960
online: www.abts.org

The American Board of

Urology

2216 Ivy Road, Suite 210
Charlottesville, VA 22903
phone: (434) 979-0059
fax: (434) 979-0266
online: www.abu.org

**The Accreditation Council for
Continuing Graduate Medical Education**

515 North State Street, Suite 2000
Chicago, IL 60610-4322
Phone: (312) 755-5000 Fax: (312) 755-7498
Online: www.acgme.org

OCPD PLANNING DOCUMENT INSTRUCTIONS AND CHECKLIST

INSTRUCTIONS

To receive **approval** for your RSS, please complete the Planning Document and provide the necessary attachments (listed below). Preliminary approval allows for the creation of an activity file in the OCPD database, and for assignment of a unique activity number.

Continuing education credit is contingent upon appropriate documentation of the planning process, as outlined in this Planning Document and compliance with required documentation for each session and compliance with the Standards of Commercial Support.

The entire document MUST be completed by the conclusion of the activity. Relevant sections should be completed **in detail** as information becomes available during the planning process. Updates to existing information should be made on a timely basis throughout the planning process.

REQUIRED DOCUMENTATION FOR EACH SESSION:

- Disclosure Form for all speakers, planners and others in a position to influence the content of the RSS series
- Documentation that appropriate disclosure to audience has taken place
- Letter to speaker regarding their participation in the RSS and their requirements to comply with the Standards for Commercial Support
- Copy of promotional materials that demonstrate the following information was communicated to the learners in advance of the CME activity/session:
 - Accreditation Statement and Credit Designation Statement
 - Global or sub-objectives for the session
 - Disclosure of Commercial Support (Grants or in-kind contributions) being provided for the activity
- Conflict of Interest Resolution Form - completed whenever someone in a position to influence the content of the RSS series have indicated a potential conflict of interest.
- Signed Commercial Support Letter of Agreement (if commercial support has been provided for the activity)
- Budget Information, including: honoraria, expenses, food and beverage costs, other costs associated with the session
- Evaluations
- Planned improvements, if the session or series warrants improvements
- Documentation that consideration has been given to the potential barriers that could prevent changes in practice
- Documentation that consideration has been given to Patient Safety issues

CHECKLIST

Please be certain to attach the following materials with your planning document:

- Gap Analysis – Summarized list of procedures used to identify the existing gap(s) between current and best practices
- Documentation from ABMS Member Board and/or ACGME regarding core competencies to be addressed
- Proposed program schedule
- Disclosure Forms for all speakers, planners, authors, etc, who are in control of content (includes RSS course director, department liaison, etc.)



GAP ANALYSIS WORKSHEET

Identification of Learner Gaps

1. Describe the Current Practice:

- A. Direct measurement of learners (identify source: i.e. previous outcomes survey)
- Clinical practice data
 - Quality assurance studies
 - Practice profiles
 - Gap(s) identified by target audience/experts
 - Committee findings/audits
 - Faculty and/or planning committee's perception of learners' need
 - Focus panels (interviews)
 - Opinion leader interviews
 - Summary of previous outcomes data

- B. Summarize current practice as indicated by external sources. (Identify source: i.e., practice guidelines by AAP (www.aap.org))
- Public health data
 - Review of peer-reviewed literature
 - New information, diagnostic techniques, treatment plans, etc.
 - Data from mainstream sources including journals and websites
 - National quality data sources such as *The Joint Commission* – [www:jointcommission.org](http://www.jointcommission.org))

2. Describe the Best Practice:

A. External Sources (Identify source: i.e. specialty societies, ACC)

[Empty box for describing external sources]

B. Other (Identify source: i.e. TGH credentialing requirements for medical staff)

- Performance mandates by various external agencies (e.g. the Joint Commission)
- Specialty specific requirements as determined by departments and divisions of the medical school and/or affiliate hospitals
- Institutional credentialing requirements as mandated by USF Health’s affiliate hospitals
- Authoritative national or specialty society guidelines and consensus statements
- Core competencies from AGME
- MOC

[Empty box for describing other sources]

3. Compare the description above outlining current practice and best practice, and identify the gap that exists between. This is the professional practice gap.

[Empty box for identifying the gap]

Is it a gap in: Knowledge Competence Performance

4. Once the professional practice gap has been determined, review the IOM and ABMS core competencies and determine if there are IOM, ABMS, AGME or other competencies related to this gap(s) and link the core competencies.

- Patient care** (provide care that is compassionate, appropriate and effective treatment for health problems and to promote health)
- Medical knowledge** (demonstrate knowledge about established and evolving biomedical, clinical and cognate sciences and their application in patient care)
- Practice-based learning and improvement** (investigate and evaluate patient care practices, appraise and assimilate scientific evidence and improve practice of medicine)
- Systems-based practice** (demonstrate awareness of and responsibility for larger context and systems of healthcare; call on system resources to provide optimal care, e.g., coordinating care across sites or serving as the primary case manager when care involves multiple specialties, professions or sites)
- Professionalism** (demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles and sensitivity to diverse patient populations)
- Interpersonal and communication skills** (demonstrate skills that result in effective communication and teaming with patients, their families and professional associates, such as fostering a therapeutic relationship that is ethically sound; using effective listening skills with non-verbal and verbal communication; working as both a team member and at times as a leader)

5. Needs Statement:

- A. Once the professional practice gaps have been determined and linked to the core competencies, the next step is to translate this into the needs statement for the activity. The needs statement will drive the development of the activity objectives and ultimately the outcomes measurement.

State the educational need below:

- B. What is this activity designed to change?

This activity will focus on bringing about a change in physician:

- Competence Performance Patient outcomes

6. Based on the desired results of the activity, what are the objectives of the activity?



OBJECTIVES WORKSHEET

Statement of Need

In order to adhere to standards set by ACCME, every Series must have a measurable statement of need or “Designation of Intended Result”. (MY NOTE – where is statement of need in planning doc. The sample given “Improvement in competence” = is there something that can be a little stronger in results?)

Learning Objectives

The Global learning objectives are tied to the identified GAP and content of the series. These objectives should be focused on a positive and measurable change in competence, performance, or patient outcomes. Always consider what you want the learner *to do* as a result of the activity.

ACCME has high standards in determining objectives. The below verbs are taken from Blooms Taxonomy and preferred by OCPD for Effective learning objectives. Verbs from Level III and greater are to be utilized in establishing objectives.

Level I Knowledge: remembering (recalling) of appropriate, previously learned information	Count, Define, Describe, Draw, Enumerate, Find, Identify, Label, List, Match, Name, Quote, Read, Recall, Recite, Record, Select, Sequence, Tell, View, Write
Level II Comprehension: grasping (understanding) the meaning of informational materials.	Classify, Cite, Conclude, Convert, Describe, Discuss, Estimate, Explain, Generalize, Give example, Illustrate, Interpret, Located, Make sense out of, Paraphrase, Predict, Report, Review, Restate (in own words), Summarize, Trace, Understand
Level III Application: use of previously learned information in new and concrete situations to solve problems	Act, Administer, Apply, Articulate, Assess, Change: Chart, Choose: Collect, Compute, Construct, Contribute, Control, Demonstrate, Determine, Develop, Discover, Dramatize, Establish, Extend, Imitate, Implement, Interview Include, Inform, Instruct, Participate, Predict, Prepares, Preserves, Produces, Projects, Provides, Relates, Reports, Shows, Solves, Teaches, Transfers, Uses, Utilizes.
Level IV Analysis: identifying motives or causes, making inferences, and/or finding evidence to support generalizations.	Analyze, Break down; Characterize, Classify, Compare, Contrast, Correlate, Debate, Deduce, Diagram, Differentiate, Discriminate, Distinguish, Examine, Focus, Illustrate, Infer, Limit, Outline, Point out, Prioritize, Recognize, Research, Relate, Separate, Subdivide

Level V:

Synthesis

applying prior knowledge and skills to produce a new or original whole

Adapt, Anticipate, Categorize, Combine, Communicate, Compare, Compile, Compose, Construct, Create, Design, Develop, Integrate, Intervene, Invent, Make, Modify, Negotiate, Organize, Perform, Plan, Produce, Progress, Propose, Rearrange, Rewrite, Structure, Substitute, Validate

Level VI:

Evaluation

judging the value of material based on personal values/opinions

Appraise, Argue, Assess, Choose, Compare & Contrast, Conclude, Criticize, Decide, Defend, Evaluate, Judge, Justify, Predict, Prioritize, Prove, Rank, Rate, Reframe, Select, Support