



Office of Continuing Medical Education

POLICY AND PROCEDURES FOR REGULARLY SCHEDULED SERIES (RSS) ACTIVITIES

I. PURPOSE AND BACKGROUND

The University of Arkansas for Medical Sciences (UAMS) College of Medicine (COM) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. The UAMS COM Office of Continuing Medical Education (OCME) is administratively responsible for ensuring that CME activities comply with the ACCME Essential Areas, Criteria, Policies, and Standards for Commercial Support as well other regulations and institutional policies as they relate to the provision of CME.

In 2003, the ACCME implemented Policy 2003-A-08 requiring CME providers to describe and verify that it has a system in place to monitor Regularly Scheduled Series (RSS) activities. Each session of each RSS must be planned and implemented according to ACCME and Institutional requirements.

II. DEFINITION OF REGULARLY SCHEDULED SERIES

A RSS activity is defined as a weekly, bi-weekly, monthly, or quarterly CME activity primarily planned by, and presented to, the provider's professional staff. Many RSS activities take place on the UAMS campus or in medical facilities closely associated with UAMS College of Medicine (i.e., University Hospital, Arkansas Children's Hospital, Central Arkansas Veteran's Hospital System and the Arkansas Area Health Education Centers). As Arkansas' only ACCME accredited provider, the UAMS College of Medicine will consider joint sponsorship of RSS activities with other hospitals and medical organizations within the state.

III. DESCRIPTION

RSS activities provided by the UAMS COM OCME are organized into two activity types. Each RSS activity is monitored separately.

- A. Type 1 pertains to internal RSS activities that target UAMS College of Medicine faculty. These usually take place on the UAMS campus or in a medical facility closely related to UAMS College of Medicine located in the Greater Little Rock area. A separate file is maintained for each internal RSS within the OCME.
- B. Type 2 pertains to external RSS activities that target physicians who are not necessarily UAMS College of Medicine faculty members. These activities are jointly sponsored by the UAMS College of Medicine and take place in hospitals or medical facilities that are independent hospitals or medical facilities that may or may not be affiliated with UAMS through the Rural Health Program. A separate file is maintained for each jointly-sponsored RSS within the OCME.

IV. MONITORING SYSTEM

The UAMS College of Medicine OCME RSS monitoring system is described below:

A. PLANNING AND EVALUATION: All RSS activities are expected to be planned, implemented, and evaluated in compliance with the ACCME Essential Areas and Policies, Standards for Commercial Support, and OCME Policies and Procedures. All sessions must meet the AMA definition of continuing medical education where CME consists of educational activities which serve to maintain, develop, or increase the knowledge, skills, and professional performance and relationships that a physician uses to provide services for patients, the public or the professions. The content of CME is the body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public [AMA PRA Category 1 Credit(s)TM House of Delegates policy #300.988].

1. Most RSS activities will be placed in one of two, two-year application cycles. This will require the program to complete and submit the Application/Planning Document to the OCME with all supporting documentation every other year, by the deadline of the application year. The RSS Administrator will notify the Course Director and CME Associate as to what application cycle applies for their activity. Reminders will also be sent by the RSS Administrator during the non-application year for the documentation necessary to continue the credits into the second year (see item h below). The OCME reserves the right to require CME activities with compliance issues to submit annual applications.
2. Each continuing RSS must be reassessed through an annual planning and evaluation process. Those individuals participating in this process will be determined by each department or designated by hospital administration. Planning participants should include at least a course or activity director and a coordinator (CME Associate). During the planning process, planners will:
 - a. Review past evaluations and engage in faculty or medical staff discussions to determine if the needs of the target audience were met during the last series.
 - b. Conduct a needs assessment to identify existing professional practice gaps to address during the next series.
 - c. Identify and plan to address components of the American Board of Medical Specialities (ABMS), Institutes of Medicine (IOM), and the Accreditation Council for Graduate Medical Education (ACGME) competencies.
 - d. Develop goals and/or objectives for the overall series that address the identified gaps and link them to the desired results. These goals and/or objectives must be communicated to the learners throughout the series.
 - e. Plan and conduct an annual evaluation that will effectively measure results of the educational activities. An annual summary of the evaluation results is submitted to the OCME at the end of the series.
 - f. Disclose all relevant financial relationships with commercial interests. The Course Director is responsible for reviewing the disclosure forms and identifying relevant financial relationships. The Course Director is also responsible for resolving any conflicts of interest (see UAMS Disclosure of Financial Relationships and Resolving Conflicts of Interest policy).
 - g. All planning decisions must ensure complete independence of any control by commercial interests. (See The ACCME Standards for Commercial SupportSM).

h. In order to receive credits for the second year of the two-year application period, the following conditions must be met during the non-application year:

1. An evaluation must be performed to assess the effectiveness of the RSS activity over the past year as specified in the ACCME criteria for compliance.
2. An evaluation summary must be submitted to the OCME for review that demonstrates compliance with ACCME criteria.
3. Annual disclosure forms must be signed for speakers, planners, and anyone else who has control of the content and a copy sent to the OCME.
4. The annual credit fee must be paid for the upcoming year.
5. There must be no unresolved compliance issues from the past year (outstanding closing reports, missing documentation, etc.) The OCME reserves the right to require programs who have demonstrated past compliance issues to submit yearly applications.

B. REVIEW AND AUDITS: The review and audit system is designed to monitor each RSS for compliance with the ACCME Elements, Policies, Standards for Commercial Support, and OCME Policies and Procedures.

1. The OCME Staff reviews all RSS applications for compliance when received.
 - a. Deficiencies must be corrected before the RSS activity is approved for *AMA PRA Category I™* credit.
 - b. All RSS application data is recorded in an Excel spreadsheet so that compliance issues for each component of the ACCME Criteria, Standards of Commercial Support, and other requirements can be easily identified and addressed.
2. CME Associates, who oversee a series, must complete an activity session report following each session of each series.
 - a. Session reports and supporting documentation are sent to the OCME, reviewed by the RSS Administrator, and pertinent information is recorded in an Excel spreadsheet. The session reports are due within two weeks of a weekly series session and one month from a monthly or quarterly series session.
 - b. If no deficiencies are found, the session reports are filed in the RSS series file. If deficiencies are found, the OCME RSS Administrator contacts the CME Associate to remediate the deficiency.
 - c. Attendance for each RSS is recorded in a CME database (CME Tracker) from which transcripts can be issued for each learner.
3. The RSS Administrator conducts an audit in person at least once during each series.
 - a. First round audits are to be completed by December 31.

- b. During the audit, information reflecting CME compliance is collected on the RSS audit form.
 - c. The RSS Administrator and OCME Assistant Director review audit forms. A report of the audit is sent to the CME Associate for the RSS.
 - d. If deficiencies exist, remediation will occur (see section 5 for remediation procedures). A second audit is scheduled.
 - e. Audit results are recorded in an Excel spreadsheet.
4. The OCME compiles the audit data from its monitoring system in order for the OCME to review and analyze the results.
 5. Remediation procedures for deficiencies found with any RSS policy will result in further action by the OCME administrative staff.
 - a. First round deficiencies - the OCME RSS Administrator will contact the CME Associate directly, by phone or email, in an attempt to remedy the compliance issue and provide consultation.
 - b. Second round deficiencies – the OCME RSS Administrator or higher administrative staff will contact the CME Associate and the CME Course Director to attempt to remedy the problem(s) and provide consultation.
 - c. Third round deficiencies – the OCME RSS Administrator or higher administrative staff will contact the Associate Dean for CME who will inform the department chair of the problem(s). At this time, the series will be placed on probation until the problems are corrected. The terms or period of time for the probation may vary dependent on the types and circumstances for the deficiencies. A plan must then be agreed upon between OCME administration and the Course Director and implemented within a reasonable period or the remediation process escalates to 5d.
 - d. If deficiencies are not corrected in the agreed upon period, the CME credit for the RSS will be discontinued.
- C. TRAINING:** The OCME will provide ongoing training for CME Associates and Course/Activity Directors to provide updates in ACCME Essential Areas and Policies and the OCME policies and procedures. CME Associates and Course Directors are expected to participate in updating and maintaining their knowledge of current ACCME criteria. Training interventions will include seminars, workshops, individual consultations, web-based materials, and CME newsletters.

Revised March 2010

**ADDENDUM TO POLICIES AND PROCEDURES FOR RSS ACTIVITIES
NEW REGULARLY SCHEDULED SERIES (RSS) DEADLINES AND MONITORING PROCEDURES**

Effective for the 2010/2011 Academic Year

A. Applications: Due Dates and Late Fees

1. Applications are due, complete with documentation and credit fee, by **May 14, 2010**.
2. Any application received after, or is incomplete on (missing necessary components to document compliance with ACCME Essential Areas and Elements, as indicated by RSS Administrator), **July 1, 2010, will not receive credit until approved**. RSS activities not approved by the beginning of the academic year will receive credit only from the approval date through the end of the academic year.
3. An incomplete application fee will be applied 30 days after notification of insufficient documentation or non-payment of the credit fee.

B. Closing Session Reports: Due Dates

1. If the RSS conference meets weekly or bi-weekly, the closing session report is due, complete with the appropriate documentation, *within two weeks* from the conference date.
2. If the RSS conference meets monthly or quarterly, the closing report, complete with the appropriate documentation is due *within one month* from the conference date.

C. Applications: Review and Monitoring Procedures

All RSS applications are reviewed upon receipt to determine if the ACCME Essential Areas and Elements for compliance have been met and are properly documented. The following procedure explains how the results of this review are communicated to the RSS Course Director and CME Associate:

1. After reviewing the application, if the application is complete and demonstrates compliance with the ACCME Essential Areas and Elements, an approval letter will be sent to the Course Director and CME Associate for the RSS. CME credit will be awarded at the beginning of the academic year.
2. If the application is incomplete and does not comply with the ACCME Essential Areas and Elements, the CME Associate will be notified via email from the RSS Administrator identifying what issues need to be resolved. *CME credit will not be awarded until all issues are satisfactorily addressed and approval is obtained.*
3. If the CME Associate does not reply in order to address the incomplete application within one week, a second email will be sent to the CME Associate and the Course Director, restating the need to resolve all issues prior to obtaining approval for CME credit. *CME credit will not be awarded until all issues are satisfactorily addressed and approval is obtained.*
4. If the application is not complete by the appropriate deadline, an invoice will be sent to the CME Associate and Course Director for the appropriate late fee(s).

D. Closing Session Reports: Review and Monitoring Procedures

A weekly review of the RSS files is performed to determine the status of RSS closing session reports. Please read the new policy about due dates for session reports.

1. If closing session reports have not been received by the due date, an email is sent to the appropriate CME Associate as a reminder of the closing report policy and the need to send to the Office of Continuing Medical Education (OCME) the overdue reports.
2. When reports are overdue for a second week, another email will be sent to the appropriate CME Associate with a copy addressed to the OCME Assistant Director.
3. If the reports are still overdue for the third week, the Course Director will be notified by email with a copy sent to the CME Associate and OCME Assistant Director.
4. If the reports are still overdue for the fourth week, a meeting will be set with the Course Director and CME Associate to develop a plan that will bring the reports up-to-date and that will continue to keep future reports from becoming overdue.
5. If the session reports remain overdue after the date that was agreed upon in the meeting with the Course Director and CME Associate, the Associate Dean for CME will be advised of the situation. At this time, approval for the RSS activity may be suspended resulting in the loss of *AMA PRA Category 1 Credit(s)*TM.

E. FEE SCHEDULE – 2010/2011 Academic Year

PROGRAM TYPE	BASIC SERVICE FEE Directly Sponsored	BASIC SERVICE FEE Jointly Sponsored
Received by May 14	\$1060	\$2120
Received May 15-June 1	\$1110	\$2170
Received after June 1	\$1160	\$2200
Multiple RSSs per application*	\$300 each additional RSS	\$300 each additional RSS
Incomplete application fee applied 30 days after notification of insufficient documentation or non-payment of fee	\$50	\$50

***Guidelines for Combining More than One RSS Activity within One Application**

1. **The activities must be in the same type of category, for example each of these are considered one category:**
 - a. Journal Clubs
 - b. Case conferences or tumor conferences
 - c. Grand Rounds
2. **No more than three activities of any category type may be combined on one application**
 - a. The **first** activity will be assessed the basic application fee.
 - b. **Each** activity after the first, will be assessed the additional fee to cover the administrative costs of processing the additional paperwork for the additional sessions.
 - c. **Each** activity must have the practice gaps identified through a needs assessment process.

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