

RSS/GRAND ROUNDS APPLICATION FORM
DOCUMENTATION OF THE EDUCATIONAL PLANNING PROCESS FOR
REGULARLY SCHEDULED SERIES (RSS) OR GRAND ROUNDS

➔ ATTACHMENT: The ACCME's Essential Areas and Their Elements (identifying 22 criteria) and including the Standards for Commercial Support (Mar 2007)

A. Confirm each statement to validate the need for the planned educational intervention:

- Content is based on evidence that constitutes "best practices"
- Gap exists between current and best practices
- Closing the gap will result in improvement in the health and/or outcomes of patients
- The proposed educational intervention will result in changes in current practice

| | | |
|---|--|--|
| 1. Date Submitted | | |
| 2. RSS Activity Title | | |
| 3. Schedule | Frequency: <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other: _____ Day: <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri Time: | |
| 4. Location | | |
| 5. Requested Credit Hours/Session | | |
| 6. Course Chair Contact Information: | Name: | |
| | Academic Title: | |
| | Address: | |
| | Phone: | |
| | Fax: | |
| | Email: | |
| 7. RSS Coordinator Contact Information: | Name: | |
| | Title: | |
| | Address: | |
| | Phone: | |
| | Fax: | |
| | Email: | |
| 8. Planning Committee Members/Contact Info | | |

Comment [KB1]: Course chair is the faculty (physician) representative who is overseeing the Grand Rounds.

Comment [KB2]: RSS Coordinator could be the administrator, or faculty designee, who will act as liaison to the OCME, collect faculty disclosures, publish events, manage sign-in sheets, etc.

| | |
|---|---|
| 9. Target Audience | Occupations (select all that apply): <input type="checkbox"/> MD <input type="checkbox"/> Resident <input type="checkbox"/> Medical Student <input type="checkbox"/> PharmD <input type="checkbox"/> PhD <input type="checkbox"/> RN <input type="checkbox"/> NP <input type="checkbox"/> PA <input type="checkbox"/> Other: _____ |
| 10. To demonstrate with ACCME Essential Areas, CRITERION 4 | <input type="checkbox"/> Attach agenda for series, or topics to be covered. |

Comment [KB3]: A schedule of your planned grand rounds, or an agenda of programming.

**SECTION I:
IDENTIFYING GAPS IN KNOWLEDGE AND/OR PERFORMANCE
(To demonstrate compliance with ACCME Essential Areas, Criteria 1, 2, 3, 6, 16, 21, 22)**

In accordance with the UMMS CME mission, this RSS will need to address either:

- **physician competence** as determined by learner gap analyses or national or specialty society guidelines, specialty credentialing boards, other sources of national priority (i.e., Institute of Medicine);
- **physician performance-in-practice**; and/or
- **patient outcomes.**

1. To identify these gaps/needs, planners will utilize the following resources. Please check all that apply:

- Focus panels Departmental survey Hospital quality analyses
- Expert opinions Guidelines Peer-Reviewed Literature
- Epidemiologic findings Previous Evaluation/Outcomes Measurement Summaries
- Other - please identify sources: _____

2. Based on resources, state one or more gaps/needs in knowledge or performance for departmental physicians.

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|----------------------------------|
| <p>a. <state gap/need></p> |
| <p>b. <state gap/need></p> |

3. Please attach back up for the above gaps such as guidelines, surveys of departmental physicians, literature searches, annual RSS planning notes, etc.

4. The key to planning according to the ACCME criteria is to clearly identify the “gap.” The educational or practice gap is based on the difference between what the learners do now vs. what you want them to do by completing the table below. The function of this RSS is to address and close the gaps identified below. Insert additional lines as needed:

Comment [KB4]: Examples of this include MMR reports, previous grand rounds surveys, reference lists, etc.

| 1) Current Practice (what is) | 2) Best Practice (what should be) | 3) Resulting Gap (intervention to close the gap) |
|--|---|--|
| <i>Example: Difficulty associated with delivery of the diagnosis of dementia to the patient and the family</i> | <i>Example: Family and patient accept the diagnosis of AD</i> | <i>Example: Ability to summarize the diagnostic criteria in language that the patient and family will understand</i> |
| | | |
| | | |

5. Please attach documents and/or identify sources that were the basis of the analysis of current practice and best practice.

6. Complete the table below. Insert additional lines as needed

Comment [KB5]: Can be the same documentation as submitted in #3.

| Source for Current or Best Practice or Desirable Attribute | What are the Key Points in the Evidence? | Location of the Source (file name, URL, publication name and date) |
|--|---|---|
| <i>Example: ABMC MOC communication with patients/caregivers (AAFP)</i> | <i>Example: Summary of diagnostic criteria in language that the patient and family understand</i> | <i>Example: Guidelines for Managing Alzheimer's Disease, 2002 http://www.aafp.org/afp/20020601/2263.pdf</i> |
| | | |
| | | |

Section II: TYPE OF RESULT PLANNED FOR THIS ACTIVITY, Using ACCME Essential Areas, Criterion 3:

1. The UMMS CME mission statement and the ACCME require that every CME activity focus on improvement in one or more of the following areas. State the focus of your RSS series (check all that apply):

- Competence
- Performance-in-practice
- Patient outcomes

Section III : COMPETENCIES/BARRIERS/PATIENT SAFETY, Using ACCME Essential Areas, Criterion 4, 6:

1. **Physician Attributes/Competencies, MOC/ABMS Competencies:** Based on the Maintenance of Certification (MOC) competencies, designated by the American Board of Medical Specialties (ABMS) and/or the ACGME, which of the following competency areas will you address in this RSS (all of the sessions that make up your yearly grand rounds program)? Check all that apply and specify the content you will incorporate into this activity:

| ABMS Competencies | How will you address these competencies In your series? |
|--|--|
| <input type="checkbox"/> Patient care <i>Provide care that is compassionate, appropriate and effective treatment for health problems and to promote health</i> | |
| <input type="checkbox"/> Medical knowledge <i>Demonstrate knowledge about established and evolving biomedical, clinical, and cognate sciences and their application in patient care</i> | |
| <input type="checkbox"/> Practice-based learning and improvement <i>Able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their practice of medicine</i> | |
| <input type="checkbox"/> Interpersonal and communication skills | <i>Example: AAFP Guidelines for Managing Alzheimer's</i> |

| | |
|---|---------|
| <i>Demonstrate skills that result in effective information exchange and teaming with patients, their families and professional associates; e.g. fosters a therapeutic relationship that is ethically sound, uses effective listening skills with non-verbal/verbal communication, works as a team member and at times as a leader</i> | Disease |
| <input type="checkbox"/> Professionalism <i>Demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to diverse patient populations</i> | |

2. System Educational Barriers and Opportunities, Using ACCME Essential Areas, Criterion 18, 19:Planners are encouraged to give consideration to the **system of care** in which the learner will incorporate new or validate existing learned behaviors. Planners must address anticipated barriers that could block implementation (e.g. formulary restrictions, time not allotted for implementation of new skills, behaviors, insurance doesn't reimburse for treatments, organization doesn't support, lack of resources policy issues within organization, etc.):

- This activity has no relevant system barriers
- The following barriers have been identified and will be addressed in the educational Intervention

3. Identify these barriers using the table below. Insert additional lines as needed

| IDENTIFIED SYSTEM BARRIER | PLANNED DISCUSSION IN ACTIVITY CONTENT |
|---------------------------|--|
| | |
| | |

4. Patient Safety Considerations - Planners should examine planned 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:

- There are no patient safety issues applicable to this activity.
- The following patient safety issues will be addressed in the educational intervention.

5. Identify safety issues using the table below. Insert additional lines as needed.

| IDENTIFIED SAFETY ISSUES | PLANNED DISCUSSION IN ACTIVITY CONTENT |
|--------------------------|--|
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| | |

Section IV: PREPARING LEARNING OBJECTIVES , Using Criteria 2, 3

Learning objectives for RSS are written in a global manner to guide the content and learner expectations for the annual program. Examples of good global objectives for a RSS:

Critically evaluate evidence-based literature in order to incorporate appropriate best practices into the clinical care of women.

By examining patients and utilizing current literature, hone diagnostic skills and update therapeutic knowledge so that patient management and outcomes are improved.

Based on the Colorectal Cancer Screening Guidelines, you will incorporate these guidelines into clinical practice to improve detection rates.

By writing objectives using a condition, action oriented verbs, and a standard, you will be able to measure whether physicians have implemented this knowledge, skill or behavior into practice.

1. **Global Objective for the Year:** Stated from the learner's perspective

Comment [KB6]: Reminder: This objective is the overlaying theme that connects all grand rounds. Do not list specific objectives for each session.

Section V: SELECTION OF EVALUATION TOOLS, Using ACCME CRITERIA 11, 14, 15

Evaluations are tools used to determine if the result you intended for learners has actually been achieved. The choice of which evaluation tools to use depends on 1) the goal of the activity (i.e., improved competence, performance or patient outcomes), 2) the mode of education and the applicability of the tool (i.e. live activity, internet, print), and 3) available resources.

1. Please indicate the evaluation tools selected for this series:

| METHOD SELECTED |
|---|
| <input type="checkbox"/> Post-activity evaluation (measures learner satisfaction) [REQUIRED] |
| <input type="checkbox"/> Pre-Post test (measures immediate learning) |
| <input type="checkbox"/> Learning contract (commitment-to-change question) |
| <input type="checkbox"/> Audience response system (assesses if learners understand content and provides learning reinforcement) |
| <input type="checkbox"/> Focus group (qualitative measurement to seek more in-depth information) |
| <input type="checkbox"/> Post-test (measures transfer of knowledge) |
| <input type="checkbox"/> Case discussions or vignettes (measures application of knowledge to practice, or competence) |

2. How do you intend to measure learner changes in relation to competence, performance, or patient outcomes?

- Outcomes surveys
- Commitment to change questionnaire

Section VI: FACULTY DISCLOSURE, Using CRITERIA 7, 8, 9, 10

➔ Attachment: Disclosure Form

1. **Speaker Conflict of Interest/Full Disclosure Information:** In order to present at a RSS/Grand Rounds session, the presenters are required to submit a Conflict of Interest (COI) Disclosure Form. Please complete this form as the course director and forward it to your presenters along with the faculty letter so they know what they are required to do in order to comply with the ACCME Standards of Commercial Support.

2. **Validation of Content by Independent Reviewer:** In accordance with ACCME rules, content must be reviewed to ensure fair balance and objectivity exists within presentations. **Please attest on this application that all content will be reviewed to ensure it meets these requirements by signing below:**

 I attest that all content presented in this RSS (Grand Rounds) will be in compliance with the ACCME Policy on Content Validation.

| SIGNATURE OF COURSE DIRECTOR | DATE |
|------------------------------|------|
| | |

| SIGNATURE OF DEPARTMENTAL RSS COORDINATOR | DATE |
|---|------|
| | |

 Approved by UMMS CME Advisory Committee

| SIGNATURE OF ASSOCIATE DEAN, OR DESIGNEE, OFFICE OF CONTINUING MEDICAL EDUCATION | DATE |
|---|------|
| | |

- ➡ All items in this application must be completed in order to be considered for approval of RSS/Grand Rounds.

 Send completed application to:

Pati Jermyn
 Continuing Medical Education
 Jaquith 2, Memorial Campus
 Phone: 334-6168
 Fax: 334-9733
