

**HACKETTSTOWN REGIONAL MEDICAL CENTER
ADMINISTRATIVE POLICY MANUAL**

DEPARTMENTAL CONTINUING MEDICAL EDUCATION (CME) ACTIVITY

Effective Date:	April 2004	Policy No:	AD23
Cross Referenced:		Origin:	CME Committee
Reviewed Date:	March 2009	Authority:	President/CEO
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SCOPE

PURPOSE

To provide department/specialty Category 1 Credits for Continuing Medical Education (CME) activities of various hospital departments (Departmental “CME activities), in accordance with guidelines established by the Medical Society of New Jersey (MSNJ).

DEFINITIONS

POLICY

The CME Committee is responsible for the coordination of the CME program at Hackettstown Regional Medical Center (HRMC).

PROCEDURE

1. For all CME activities of various hospital departments (departmental CMEs, etc.), the hospital, the department’s chairperson or Manager (referred to as “Department” hereafter) is responsible for following the laid down procedure, proper & complete documentation, and submission of completed activity file to the CME Committee.
2. The Department completes a needs assessment procedure, as per MSNJ guidelines (Attachment 1).
3. After the topic is identified, and the objectives written, a speaker is proposed and his/her CV obtained by the Department.
4. The Department’s Chair/Manager forwards a request letter addressed to the CME Committee Chairperson, along with the above documents, to the CME Program Director for approval of the CME Committee, at least four weeks before the proposed activity.
5. Once the activity is approved by the CME Committee, an announcement, in proper format (Attachment 2), along with a sign-up sheet is circulated to the Department’s medical staff; a copy of the Announcement & Sign-up sheet is sent to the CME Program Director, at least two weeks before the proposed activity.
6. If the program is funded by a commercial organization, a letter of request for an “unrestricted educational grant” is sent to the funding agency and the approved letter of agreement (Attachment 3) is got completed by the Department.

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7. The Department sends a Faculty Disclosure Declaration (Attachment 4) to the speaker, gets completed and signed. Once signed by the Speaker, a copy of this document is forwarded to the CME Program Director for identifying any possible Conflict of Interest (COI). Any identified COI must be resolved before the activity.
8. On the day of the activity, prior to the presentation, the Department distributes a Participant Evaluation Sheet with Speaker's Disclosure printed on its back, to the participants (Attachment 4-A).
9. At the time of activity, the Department provides a sign-in sheet.
10. After the presentation, the participants complete the Participants' Evaluation Sheet.
11. Based on the analysis of the Participants' evaluation sheet, the Chairperson prepares his evaluation document.
12. An activity report is prepared with the following information:
 - a. Summary of need assessment
 - b. Budget summary
 - c. List of participants
13. The Department conducting the activity is responsible for proper documentation.
14. The complete file is forwarded to the Medical Education Committee for posting credits to the participants.
15. Proper procedure, as laid down by the Medical Society of New Jersey (MSNJ) (Attachment 5) must be followed for the conduct of Tumor Boards/ Cancer Conferences.

Notes:

1. The MSNJ Procedure for conducting Tumor Boards is appended as Attachment 5.
2. Wherever possible, a pre- and post-test (with five questions) should be completed to assess the effectiveness of the educational activity. The pre- and post-test are mandatory for the Tumor Board.
3. The presentation, including discussion, should be for a period of one hour to qualify for one Category 1 credit; the time is calculated to the nearest quarter hour.

REFERENCES

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ATTACHMENT 1 – PLANNING PROCESS

1. Needs Assessment

A. The following are the identified information resources for selecting topics:

- Information given by the participants in their Evaluation Forms.
- Responses from Medical-Dental Staff in Survey Forms.
- Inputs from Hospital Administration, Ethics Committee, Patient Safety Committee, Medical Records, Pharmacy & Therapeutics Committee, Nursing Services etc.
- Reviews of the current medical & dental literature.
- Recommendations of the Medical-Dental staff after returning from conferences, seminars etc.
- Face-to-face interviews with Medical-Dental Staff.
- Newspaper articles pertaining to the medical sciences.
- Any other informative resource on medical sciences & education.

B. Based on information collected from the various resources, a list of topics will be prepared for being presented to the CME Committee in its meetings. Wherever possible, appropriate learning objectives will be prepared before the topic is brought before the CME Committee. Topics approved by the CME Committee will be added to the list of existing approved topics.

2. Speaker Search

Based on the topic, potential speakers will be identified. The resources used in search for a speaker will include:

- Medical & Dental Staff.
- Faculty from University Departments in the area.
- Previously identified good speakers.
- Lists of National Speakers.
- Recommendations of previously identified academic speakers.
- Any other available resource.

3. Activity File

Once a topic has been identified, learning objectives laid down and a speaker selected, an activity file will be created for each academic activity. The Activity File will have the following documents:

- Grant Application (if applicable): For online application systems, a copy of the application will be printed out. For other grant requests, a standard Letter of Request ([Attachment 1](#)) will be used.
- For all grants from Pharmaceutical & Device Companies, a standard Letter of Agreement for an unrestricted grant will be used ([Attachment 2](#)). Alternatively, a Letter of Agreement from the Company may be used if it is in consonance with the principles laid down in [Attachment 2](#), and is acceptable to the CME Committee.
- Information on the Speaker, his titles and affiliations, as well as a copy of his/her current CV.

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- Upon confirmation of the Speaker and the Activity, a formal letter will be sent to the Speaker ([Attachment 3](#)). This letter will convey the learning objectives to the speaker. Also this will provide information on relevant Regulations on Commercial Support. Along with this a blank Faculty Declaration ([Attachment 4](#)) will be sent to the Speaker for completion and return.
- An Announcement of the academic activity will be prepared in the standard format ([Attachment 5](#)); this will be mailed & e-mailed to the physicians and a copy displayed on the CME Bulletin Board in the Dr Eddy Palmer Medical Library, at least two weeks before the activity (in case of an activity deemed necessary urgently, this notice period may be shortened at the discretion of the CME Committee). Copies of the Announcement will also be placed in the physicians' Mailboxes in the Medical Library. A sign-up sheet will be put up, along with announcement in the Medical Library. The Announcement will also be posted at the Hospital web site, and copies mailed to physicians in the area. Copies of the Announcement will also be circulated to the various hospital departments.
- Reservation for the activity venue shall be made before posting of the Announcement.
- Equipment needed for the academic activity (Audiovisual equipment etc.) will be arranged.
- One day prior to the activity, a Sign-In Sheet will be prepared.
- A Participant Evaluation & Claim Form (PEF) will be prepared. Speaker's Faculty Declaration will be printed on the back of this Evaluation Form. If, under unavoidable circumstances, the Faculty Declaration is not thus printed, the Meeting Chairperson shall verbally announce the Disclosure to the Participants before the start of the academic activity. This Disclosure will be documented in the Disclosure Verification Form, as laid down in the policy on Faculty Disclosure.
- At the time of the activity, a sign-in sheet will be put up for the participants. They will be provided with the Evaluation & Claim Form having the Faculty Declaration (except as provided above). The audiovisual equipment will be set up.
- After the academic activity, the Participants Evaluations will be collected, and will be subsequently analyzed and a Chairperson's Summary prepared for records.
- Face-to-face interviews will be held with a few of the participants, following some of the Grand Rounds. This would provide an opportunity, not only to have first hand information with regard to the academic activity, but also give an opportunity to discuss future topics.
- Based on the sign-in sheet/PEF, credits/attendance will be posted to the computer. A printout of the Attendance Sheet will be taken out and added to the activity file.
- All payments received will be deposited in the special CME Account. Copied of checks received will be kept in the activity file.
- All payments pertaining to the activity will be made at the earliest possible and copies of all check requests to the Accounting shall be retained in the activity file.
- An Activity Summary shall be prepared for each activity and placed in the Activity File.

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ATTACHMENT 2 – PRESENTATION ANNOUNCEMENT

HACKETTSTOWN REGIONAL MEDICAL CENTER
* * * DEPARTMENT OF MEDICINE * * *
* * * * PRESENTS * * * *

TOPIC: **Multiple Sclerosis: Targeted Immunodepletion: B-Cell Processes in MS.**

TARGET AUDIENCE & LEARNING OBJECTIVES: **Neurologists, Internists, PCPs & other interested Healthcare Personnel.**

At the conclusion of this activity, the participants should be better able to:

- Describe the roles of B cells & T cells in MS pathogenesis.
- Explain the effects of therapeutic Immunodepletion in reducing inflammation in MS lesions.
- Identify patients who would be candidates for immunodepleting therapies based on their disease stage and/or response to other treatments.

PRESENTATION BY: Anne H Cross, MD, Professor of Neurology,
Washington University School of Medicine

LOCATION: West Wing Conference Room, Hackettstown Regional Medical Ctr.

DATE: March 11, 2009 **TIME:** 6:30 - 8:30 PM (1830-2030hrs)

FEE: None

FUNDED BY: Supported by Educational Grant from Discovery Institute of
Medical Education (recipient of grant from Genetech/Biogen Idec.)

PLEASE RSVP: 908/850-7743, no later than March 9, 2009; 'In-House' Participants,
please Sign-Up in the Medical Library.

Accreditation Statement: "THE HACKETTSTOWN REGIONAL MEDICAL CENTER IS ACCREDITED BY THE MEDICAL SOCIETY OF NEW JERSEY TO PROVIDE CONTINUING MEDICAL EDUCATION FOR PHYSICIANS".

Designation Statement: "The Hackettstown Regional Medical Center designates this educational activity for a maximum of one **AMA-PRA Category 1 Credit(s)**TM. Physicians should only claim credit commensurate with the extent of their participation in the activity."



Note: Planners of this educational activity have nothing to disclose.

Please note: In the event of inclement weather or any emergent situation, please call the meeting venue to determine if the meeting is delayed/postponed/cancelled; information may also be available at the HRMC Web Site <http://www.hrmcnj.org>. Click on Events & Classes, and then on Physicians' Calendar to view the announcement.

In accordance with the PhRMA Code, attendance at this educational program is limited to healthcare professionals. Accordingly, attendance by guests or spouses is not appropriate.

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ATTACHMENT 3 – LETTER OF AGREEMENT

For ACCME and State Medical Society Accredited CME Sponsors

Regarding Terms, Conditions and Purposes of an Educational Grant

Between **Hackettstown Regional Medical Center** and

Title of CME Activity:

Location: _____ Date: _____

Commercial Supporter (Company name/Branch): _____ Address: _____

City: _____ State: FL Zip: _____ Telephone: _____ Contact Person: _____

The above company wished to provide support for the named continuing medical education activity by means of (indicate which option):

1. Unrestricted educational grant for support of the CME activity in the amount of \$_____
2. Restricted grant to reimburse expenses for:
 - a. Speaker(s) 1) _____ 2) _____ To include: All Expenses
_____ Travel Only _____ Honorarium Only ___ Honorarium Amount (to be determined by Course Director) \$_____
 - b. Support for catering functions (specify) _____
in the amount of \$_____
 - c. Other (e.g., equipment loan, brochure distribution, etc.) _____

CONDITIONS

1. **Statement of Purpose:** Program is for scientific and educational purposes only and will not promote the company's products, directly or indirectly.
2. **Control of Content & Selection of presenters & Moderators:** Sponsor is responsible for control of content and selection of presenters and moderators. The Company agrees not to direct the content of the program.
3. **Disclosure of Financial Relationships:** Sponsor will ensure meaningful disclosure to the audience, at the time of the program, of (a) Company funding and (b) any significant relationship between the Sponsor and the Company (e.g., grant recipient) or between individual speakers or moderators and the Company.
4. **Involvement in Content:** There will be no "scripting", emphasis, or direction of content by the company or its agents.
5. **Ancillary Promotional Activities:** No promotional activities will be permitted in the same room or obligate path as the educational activity. No product advertisements will be permitted in the program room.
6. **Objectivity & Balance:** Sponsor will make every effort to ensure that data regarding the company's products (or competing products) are objectively selected and presented, with favorable and unfavorable information and balance discussion of prevailing information on the product(s) and/or alternative treatments.
7. **Limitations on Date:** Sponsor will ensure, to the extent possible, meaningful disclosure of limitations on data, e.g., ongoing research, interim analyses, preliminary data, or unsupported opinion.

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- 8. *Discussion of Unapproved Uses:* Sponsor will require that presenters disclose when a product is not approved in the United States for the use under discussion.
- 9. *Opportunities for Debate:* Sponsor will ensure meaningful opportunities for questioning or scientific debate.
- 10. **Independence of Sponsor in the use of Contributed Funds:**
 - a. Funds should be in the form of an educational grant made payable to **Hackettstown Regional Medical Center** (accredited sponsor).
 - b. All other support associated with this CME activity (e.g., distributing brochures, preparing slides, etc.) must be given with the full knowledge and approval of **Hackettstown Regional Medical Center** (accredited sponsor).
 - c. No other funds from the commercial company will be paid to the program director, faculty, or others involved with the CME activity (additional honoraria, extra social events, etc).

The Commercial Supported agrees to abide by all requirements of the ACCME Standards, as well as Medical Society of New Jersey Regulations, for commercial Support of Continuing Medical Education.

The accredited Sponsor agrees to: 1) abide by the ACCME Standards for Commercial Support of Continuing Medical Education; 2) acknowledge educational support from the commercial company in program brochures, syllabi, and other program materials, and 3) upon request, furnish the commercial supporter a report concerning the expenditure of the funds provided.

AGREED

Commercial Company Representative (name): _____

Signature: _____ **Date:** _____

CME Committee Chairperson (Name): Leong-Hean Tan, MD **Department:** Medicine

Signature: _____ **Date:** _____

OR

Department Director or Designee (name): Harjit Singh, MD, FAAP, CME Program Director

Signature: _____ **Date:** _____

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ATTACHMENT 4 – FACILITY DISCLOSURE

**CME SPONSOR/PROVIDER
OFFICE OF CONTINUING EDUCATION
FACULTY DISCLOSURE DECLARATION**

It is the policy of Hackettstown Regional Medical Center to insure balance, independence, objectivity, and scientific rigor in all its individually sponsored or jointly sponsored educational programs. All faculty participating in any Hackettstown Regional Medical Center sponsored programs are expected to disclose to the program audience any real or apparent conflict(s) of interest that may have a direct bearing on the subject matter of the continuing education program. This pertains to relationships with pharmaceutical companies, biomedical device manufacturers, or other corporations whose products or services are related to the subject matter of the presentation topic. The intent of this policy is not to prevent a speaker with a potential conflict of interest from making a presentation. It is merely intended that any potential conflict should be identified openly so that the listeners may form their own judgments about the presentation with the full disclosure of the facts. It remains for the audience to determine whether the speaker's outside interests may reflect a possible bias in either the exposition or the conclusions presented.

TITLE OF PRESENTATION:

PRESENTER'S NAME(S):

DATE:

Please complete:

- I. I have no actual or potential conflict of interest in relation to this program or presentation.
- II. In the presentation, will there be discussion on **Off Label** use of any drug: **YES** **NO**

Signature

Date

- III. Will your presentation include discussion of any commercial product or services? **YES** **NO**

If **YES**, do you have a financial interest/arrangement or affiliation with the manufacturer(s) of any of the products or provider(s) of any services you intend to discuss: **YES** **NO**

If **YES**, please list the manufacturer(s)/provider(s) & describe nature of relationship(s):

- IV. I have a financial interest/arrangement or affiliation with one or more organizations that could be perceived as a real or apparent conflict of interest in the context of the subject of this presentation.

Affiliation/Financial Interest

Name of Organization(s)

Grant/Research Support

Consultant

Speakers' Bureau

Major Stock Shareholder

Other financial or Material Support

Signature

Date

Your cooperation in complying with this standard is appreciated.

Please return this form as soon as possible to CME Program Director (FAX 908-850-6815).

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ATTACHMENT 5 – MEDICAL SOCIETY OF NEW JERSEY (MSNJ)

GUIDELINES FOR RECURRING CONFERENCES – COMPLYING WITH THE ESSENTIALS
(A Process for CME activities such as Tumor Board, Morbidity/Mortality and other types of case review)

Needs Assessment

Sources: Current or recent patient activity with interesting, unexpected, adverse or otherwise instructive outcomes or aspects

QA/QI data (local, regional or national)

Autopsy data

Drug Utilization data

Current literature, professional or lay (e.g., recent publicity given to increased morbidity and mortality from asthma would justify presentation of patient summaries with specific teaching points about asthma)

Planning process (in addition to the “usual” stuff):

1. Patient selection
2. Identification of knowledgeable discussants
3. Preparation of written case summaries
4. Literature search, if desired, for articles that drive home the points to be made
5. Composition of pre-test/post-test

Objectives

Generic objectives can be written without necessarily “giving away” the diagnosis. For example, After attending this CMS activity, physicians (or surgeons, or pathologist, or...) should be able to:

- List key elements of the patients’ histories that led to the specific diagnoses discussed
- Describe the most appropriate (or efficient, or cost-effective, or...) approaches to the differential diagnosis resulting from consideration of the clinical information presented
- Discuss therapeutic options for the clinical entity under consideration
- Enumerate at least three adverse effects of the drugs used to treat the patient

Activity evaluation can, in addition to the “usual” questions, include a pre-test and a post-test that can be written without revealing the diagnosis in advance. For this purpose, a true-false type of test is very useful, because multiple-choice tests might give too many clues to the diagnosis if used as a pre-test.

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For example, if the program is a CPC in which the final anatomic diagnosis is intractable bleeding from a gastric ulcer, questions that could be part of such test include (assuming the answer to the question is covered in the discussion).

- True False Gastric ulcers on the lesser curvature are more likely to be malignant than those on the greater curvature.
- True False Surgery is no longer necessary to control bleeding from a gastric ulcer.

As another example, if there were a clinical presentation of a patient with Hodgkin's disease, the diagnosis was included in the printed publicity materials, questions might include:

- True False Night sweats are one of the "B" symptoms of Hodgkin's disease.
- True False The most frequent cause of death in Hodgkin's disease is hepatic failure.

By comparing scores on the pre-test with scores on the post-test, one has an objective measure of the effectiveness of the program. To ensure compliance with the pre-test and post-test, one might omit identification of the test-taker and compile aggregate effectiveness data based on the performance of the entire audience.