



1. CME Mission Statement (ACCME Essential Area 1, Element 1.1)

The University of Colorado Denver (UCD) School of Medicine (formerly University of Colorado School of Medicine) is part of the only academic health science center in the state of Colorado and a large portion of the Rocky Mountain region. As a school of medicine, we have over 800 full-time faculty and over 2,500 clinical faculty in a state of four million people, we envision that continuing medical education (CME) is a strategic asset of the UCD School of Medicine and its core clinical facilities, its full-time and clinical (volunteer) faculty, and physicians and other health care professionals throughout the region and the United States.

Our fundamental purpose is to improve knowledge, competence, performance and health outcomes using lifelong learning through undergraduate, graduate and continuing medical education. We will accomplish this through continuing medical education that:

- Is linked to practice and focused on health care quality gaps
- Supports physicians' maintenance of certification and maintenance of licensure
- Fosters collaboration within and among health professionals to address quality improvement
- Addresses interdisciplinary team practice
- Is independent of commercial interests

How does this program fit within the Mission of the OCME? Check all that apply.

- Linked to practice and focuses on healthcare quality gaps
- Supports physicians' maintenance of certification and maintenance of licensure
- Fosters collaboration to address quality improvement
- Addresses interdisciplinary team practice
- Is independent of commercial interests

2. Educational Planning and Evaluation (Essential Area 2, Elements 2.1 and 2.2)

A. Target Audience (Element 2.1): Indicate the physicians and/or other medical professionals for whom this activity is designed. List any special background requirements of the prospective participants. (Must be articulated in the activity's promotional brochure and syllabus.) Check all that apply in each column.

Professional Audience

- Primary Care Physicians
- Specialty Care Physicians **List specialties:** _____
- Full time University of Colorado Denver School of Medicine Faculty
- UCSOM Clinical (Volunteer) Faculty
- Nurses
- Allied Health Professionals
- Pharmacists
- Public Health Professionals
- Dentists
- Other, **Please specify:** _____

Geographic Audience

- UCDSOM and affiliate hospitals
- State or Regional
- National
- International



B. Needs Assessment (Element 2.2): Describe the planning process used for this activity, how you know that there is an educational need for the target audience, and the gaps in knowledge or skills you have identified. Please describe the clinical problems or opportunities for improvement with this CME activity.

Check all of the data sources that were used in the needs assessment:

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Formal target audience/practitioner survey
<i>Include documentation of key results</i> <input type="checkbox"/> Focus group of physicians Date _____ Time _____
<i>Include a brief summary</i> <input type="checkbox"/> Attendance figures from previous conferences <input type="checkbox"/> Previous CME course evaluation summary
<i>Include a brief summary</i> <input type="checkbox"/> Implementation of new clinical practice guideline or clinical pathway <i>Please specify</i> <input type="checkbox"/> Clinical advances, such as those reported in journals (literature search) <i>Please specify</i> <input type="checkbox"/> New research findings <i>Please specify</i> <input type="checkbox"/> New techniques or equipment <i>Please specify</i> <input type="checkbox"/> Summary of 3-6 month post activity survey
<i>Include documentation of survey results</i> <input type="checkbox"/> Minutes from any committee meeting in which an educational need is identified
<i>Include documentation of key results</i> | <ul style="list-style-type: none"> <input type="checkbox"/> Legal or regulatory requirements (ex: OSHA, JCAHO, IRB, etc.) <i>Please specify</i> <input type="checkbox"/> Public health priorities (Ex: Healthy People 2010) <i>Please specify</i> <input type="checkbox"/> Morbidity and mortality reports or data <i>Please specify</i> <input type="checkbox"/> Quality Improvement data <i>Please specify</i> <input type="checkbox"/> Risk management data <i>Please specify</i> <input type="checkbox"/> DRG/coding data/compliance data <i>Please specify</i> <input type="checkbox"/> Utilization management data <i>Please specify</i> <input type="checkbox"/> Patient survey, clinical or patient care indicators <i>Please specify</i> <input type="checkbox"/> Other, <i>Please specify:</i> _____ |
|--|---|

Please use this space to expand upon your needs assessment practice: _____

“Best Practice”: Please identify your “best practice” sources, if appropriate.

- National Professional Organization (Ex: American Academy of Family Physicians; Practice American College of OBGYN) *Please specify*
- State or Local Professional Organization (Ex: Colorado Clinical Guidelines Collaborative) *Please specify*
- Departmental or Divisional Guidelines *Please specify*
- Federal Source Ex: Centers for Disease Control and Prevention *Please specify*
- Other, *Please specify:* _____

Please use this space to expand upon your best practice(s): _____

Current Practice: Please identify source of current practice of target audience.

- | | |
|---|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Survey of recent or likely learners <input type="checkbox"/> National surveys <input type="checkbox"/> Pretest <input type="checkbox"/> Hospital or national QI data <input type="checkbox"/> National regional or local health data | <ul style="list-style-type: none"> <input type="checkbox"/> Patient surveys <input type="checkbox"/> Physician practice data <input type="checkbox"/> Course evaluations <input type="checkbox"/> Other, <i>Please specify:</i> _____ |
|---|---|



C. **Course Content** Please list key content areas based upon the above, identifying specific clinical problems or areas where improvement in physician competence or performance or outcomes is needed.

Please check whether your activity will address these cross cutting areas:

- Medical ethics
- Medical economics
- Physician attributes and competencies
- Patient centered care
- Evidence based care
- Team based care
- System based care

D. **Learning Objectives**

Please indicate how the identified needs cited will be incorporated into the learning objectives of your activity. What are the objectives FOR THE LEARNER of the educational intervention? These should be related directly to the content of activity presentations. What will participants take away from the activity to improve competence, performance or outcomes? For each learning objective please state a clinical setting and an action. Ex: For my practice, I will know which patients should be given pneumococcal vaccine.

Upon completion of this program, the participant should be able to: (Please enter a minimum of 5 objectives as learner outcomes.) These must be listed in your promotional literature for your CME activity.

E. **Describe the method(s) of instruction you have chosen for this activity.**

- Lecture: Oral didactic presentation typically followed by Q & A
- Case Presentation: Detailed information covering a situation, event, or series of related events, followed by Q & A or group discussion.
- Symposium: A series of lectures on various components of a topic, followed by Q & A or group discussion.
- Panel discussion: Faculty members engaged in an interactive dialogue on a topic, followed by Q & A or group discussion.
- Demonstration: A carefully planned and prepared presentation showing how to perform or conduct a procedure.
- Workshop: A carefully planned and supervised practice-oriented activity providing hands-on experience that includes a demonstration, Q & A or group discussion.
- Focus breakout/session: An interactive educational activity led by an expert in a focused area of learning. Typically intended for small group learning. Ideal for problem-solving, exploring, brainstorming, investigating, consensus generation or critical thinking.
- Computer based instruction/Webinar
- Learning through teaching
- Performance improvement
- Team based learning
- Other, **Describe briefly:** (Such as patient simulation, interactive response system, mentoring/coaching,)



F. Evaluation and Improvement

How do you intend to make these objectives known to the prospective participants? (Element 2.3) Check all that apply.

- By letters to faculty of this activity provided by the OCME **(required)**
- By promotional literature such as a course brochure (required; pre-approval from OCME **(required)**)
- In the syllabus **(required)**
- By an announcement prior to the beginning of the activity
- Other, **Please specify:** _____

All CME Activities must be evaluated for their effectiveness in meeting identified educational needs. (Element 2.4) How do you propose to evaluate the course effectiveness? Check all that apply.

- Required course evaluation (see required questions)
- Trained observer, such as course director, CME conference manager, etc.
- Focus group (discussion group of attendees)
- Post activity survey required and mailed by OCME approximately 3 to 6 months after the activity
- Outcomes survey of cognitive, performance and health outcomes
- Performance improvement such as by chart audits of physician performance or health outcomes
- Other patient data review for changes in physician practice or behavior
- Recurring attendance (participants return to one or more future programs)
- Knowledge testing completed after the activity
- Physician self reporting of improvement in competency or performance
- Physicians' data on improvement in outcomes
- Other, **Please specify:** _____

G. Expected Results. We expect different results for different groups within our target audience. For our full-time and clinical (volunteer) faculty, we expect to improve health care professionals' knowledge, competence, performance or health outcomes.

How do you propose to monitor results? Check all that apply.

- Standardized post-activity evaluations
- Performance improvement activities
- Targeted health outcomes through collaboration (Ex. Patient Safety Office of University of Colorado Hospital and stakeholders)
- Other, **Please specify:** _____

As a result of this CME activity please check the areas of expected improvement. Check all that apply.

- Participant Knowledge
- Participant Skills
- Participant competency ("knows the right thing to do")
- Participant performance ("does the right thing")
- Participant's patient's health outcomes

H. Budget. Please include your budget estimates

INCOME

Registration fees: _____
Grants: _____
Commercial support: _____
Exhibitors: _____
Other: _____
Total projected income: _____

EXPENSES

Honoraria/speaker travel: _____
Hotel &/or facility charges: _____
Catering: _____
AV: _____
Syllabus: _____
Marketing/Advertising: _____
CME fees: _____
Other: _____
Total projected expenses: _____

Expenses – Income = Gross Profit or Loss: _____

GAR fees will be applied as the University determines