Key Concepts in Accredited Continuing Education

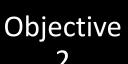Or, Your Worksheet Guide

Updated 7/1/2025

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Learning Objectives and Structure of the Course

Objective 1

Understand key concepts in accredited continuing education.

Objective 2

Have the strategies/skills to complete the activity application worksheets.

Objective 3

Be able to outline future steps to ensure the activity will be certified for CE credit.

Step 1: Look through the resources on the Overview page (this slide deck, worksheet examples, etc.)

Step 2: Complete Worksheet A—Activity Set-Up Form

Step 3: Complete Worksheet B—Accreditation Criteria

Step 4: Complete Worksheet C—Standards of Integrity and Independence

Updated 6/24/2025

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Some Contextual Notes

As you know, continuing education/professional development activities are meant to help adults improve the practice of their profession.

Thus, many items on our application worksheets are based on principles of adult learning and are included to help activity planners design their activities to more effectively bring about measurable change.

The concepts included are organized according to the order you will encounter them in the application worksheets.

To keep this slide deck as succinct as possible, the information here focuses only on concepts that many planners have had questions about in the past.

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The worksheets themselves include help text for many of the questions. They are designed to work in tandem with this slide deck.

Without Further Ado . . .

- **Section 1: Concepts to know for Worksheet A—Activity Set-Up Form.**

- Section 2: Concepts to know for Worksheet B—Accreditation Criteria

- Section 3: Concepts to know for Worksheet C—Standards of Integrity and Independence

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Section 1: Concepts to know for Worksheet A— Activity Set-Up Form.

This form asks for practical activity information to set up the skeleton of the activity in our learning management system, Ethos (date, location, that type of thing).

Concepts in this section

- Learning Objectives
- Outcome Measurements
- Funding for this Activity

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Learning Objectives

- Learning objectives should be a <u>clear and measurable</u> statement of the knowledge, skills, and abilities the learner is expected to develop in response to the completion of the learning activity.

- The learning objectives should be written in behavioral terms with action verbs targeting a learning domain.

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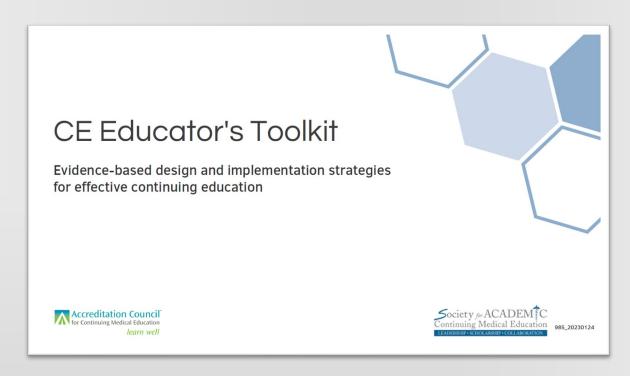
Learning Objectives

- ✓ There is one observable action verb and measurable action in each objective.
- ✓ The objective is learner-centered, not instructor-centered.
- ✓ The objective is supported by the activity content.
- ✓ The objective is related to the practice gap and learner needs.
- ✓ The objective reflects a timeframe for the change to take place.

Consider the TACT method:

TARGET [T]
Who is the learning objective directed toward? (i.e. physicians, nurses, healthcare team, etc.)
Example: Family practice providers

ACTION [A]
What is the behavior or attitude change required? (using an action verb from Bloom's taxonomy)
Example: To implement screening guidelines for early detection of breast cancer in women of the average-risk population.

CONTEXT [C]
Where is the behavior or attitude change taking place? (i.e. in clinical practice)
Example: In their clinical practice

TIME [T]
What is the timeframe to demonstrate the behavior or attitude change? (i.e. after the learning activity, in 2 months, etc.)
Example: Within 1 month after completing the learning activity.

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Learning Objectives

For more information on writing learning objectives, download the CE Educator's Toolkit found here and check out pp. 32-38.

CE Educator's Toolkit

Evidence-based design and implementation strategies for effective continuing education

Accreditation Council for Continuing Medical Education
learn well

Society for ACADEMIC Continuing Medical Education
LEADERSHIP • SCHOLARSHIP • COLLABORATION

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Outcome Measurements

In order to know if your activity was successful, its outcomes need to be measured.

Our office requires the use of certain questions in order for us to analyze if we are meeting our mission. Those questions can be seen here.

You are welcome to add additional questions if you'd like. Some ideas for additional questions can be found on the document linked to above.

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Outcome Measurements

Let's break it down.

18. We require that the outcomes of all educational activities that we certify be measured. Which of the following outcomes will you measure? *[multiple choice]*
    a. Learner/Team Competence: Learner/Team knows how to do
        i. Objective measurement (e.g., observed, tested)
        ii. Subjective measurement (e.g., self-reported)
    b. Learner/Team Performance: Learner/Team demonstrates in practice
        i. Objective measurement (e.g., observed, tested)
        ii. Subjective measurement (e.g., self-reported)
    c. Patient Health: Effects of what learner/team has done for a few
        i. Objective measurement (e.g., observed, tested)
        ii. Subjective measurement (e.g., self-reported)
    d. Community/Population Health: Effects of what learner/team has done for many
        i. Objective measurement (e.g., observed, tested)
        ii. Subjective measurement (e.g., self-reported)

    _____

    e. Learner Knowledge will also be measured for this activity.
        i. Objective measurement (e.g., observed, tested)
        ii. Subjective measurement (e.g., self-reported)

- Learner or Team: Is your activity focused on an individual profession, or the healthcare team?
- Objective measurement vs. subjective measurement: If you are having your learners fill out an evaluation, survey, or self-reflection, this would be a subjective measurement.

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Outcome Measurements

The outcome you choose to measure should be connected to the educational need you are trying to address with this activity.* If learner knowledge is one of the outcomes you wish to measure, you must measure at least one other outcome as well (per our accreditor's requirement).

Which of the following outcomes will you measure? *
We require that the outcomes of all educational activities that we certify be measured.

☐ Learner/Team Competence: Learner/Team knows how to do (Objective measurement (e.g., observed, tested))

☐ Learner/Team Competence: Learner/Team knows how to do (Subjective measurement (e.g., self-reported))

☐ Learner/Team Performance: Learner/Team demonstrates in practice (Objective measurement (e.g., observed, tested))

☐ Learner/Team Performance: Learner/Team demonstrates in practice (Subjective measurement (e.g., self-reported))

☐ Patient Health: Effects of what learner/team has done for a few (Objective measurement (e.g., observed, tested))

☐ Patient Health: Effects of what learner/team has done for a few (Subjective measurement (e.g., self-reported))

☐ Community/Population Health: Effects of what learner/team has done for many (Objective measurement (e.g., observed, tested))

☐ Community/Population Health: Effects of what learner/team has done for many (Subjective measurement (e.g., self-reported))

☐ Learner Knowledge will also be measured for this activity (Objective measurement (e.g., observed, tested))

☐ Learner Knowledge will also be measured for this activity (Subjective measurement (e.g., self-reported))

*Note: Educational needs are addressed in more detail later.
Also, "competence" is interchangeable with "skills/strategies."

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Funding

- The reason we ask this question is because certain types of funding require additional guardrails.

  - Registration fees
  - Seeking government grants
  - Seeking private donations
  - Seeking in-kind donations
  - **Offering exhibit and advertising**
  - **Support from commercial/ineligible companies***

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*"Ineligible companies" are those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products use by or on patients.

Advertising, marketing, or communication firms whose clients are ineligible companies	Growers, distributors, manufacturers or sellers of medical foods and dietary supplements
Bio-medical startups that have begun a governmental regulatory approval process	Manufacturers of health-related wearable products
Compounding pharmacies that manufacture proprietary compounds	Pharmaceutical companies or distributors
Device manufacturers or distributors	Pharmacy benefit managers
Diagnostic labs that sell proprietary products	Reagent manufacturers or sellers

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Funding

Since healthcare professionals serve as the trusted authorities when advising patients, they must protect their learning environment from industry influence to ensure they remain true to their ethical commitments.

If ineligible companies are helping to support this activity either through exhibitions, advertising, in-kind support, or grants, additional guidelines must be followed.

These guidelines will be explained in depth in Section 3.

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Now Onto . . .

- Section 1: Concepts to know for Worksheet A—Activity Set-Up Form

- **Section 2: Concepts to know for Worksheet B— Accreditation Criteria**

- Section 3: Concepts to know for Worksheet C—Standards of Integrity and Independence

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Section 2: Concepts to know for Worksheet B— Accreditation Criteria

- This worksheet helps guide you through the requirements prescribed by our accrediting body.

- Concepts in this section
  - Gap Analysis
  - Planning Process that is Reflective of the Target Audience
  - Active Learning
  - Competencies
  - Barriers

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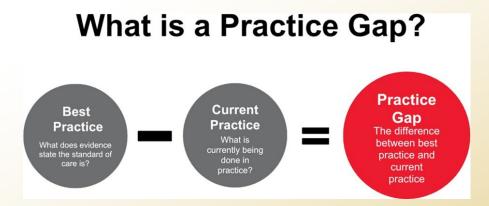Office of Continuing Education

Gap Analysis

- This subsection takes you from identifying a practice gap to understanding an educational need, thus clarifying what kind of educational intervention will most likely be helpful in closing the gap.

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Gap Analysis | What is current practice?

What is currently being done in practice that isn't best practice?

Example: Healthcare teams in this hospital system are not consistently implementing transmission-based precautions for infection control, leading to illness for the healthcare team and infections and longer hospital stays for patients (Holmes S. & Watson J. *2024 Hospital quality improvement report.* January 8 2025. p. 24).
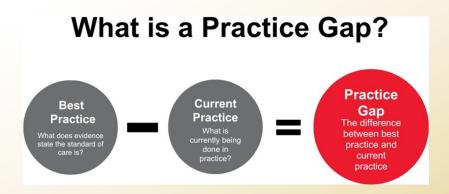
What is a Practice Gap?

Best Practice
What does evidence state the standard of care is?

—

Current Practice
What is currently being done in practice?

=

Practice Gap
The difference between best practice and current practice

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Gap Analysis | What is best practice?

What does evidence state is the standard of care?

Example: The standard of care is to follow transmission-based precautions for infection control, including:
- Cleaning hands before entering a room and when leaving the room.
- Donning/doffing gloves and gowns before room entry and before room exit.
- Using dedicated or disposable equipment; cleaning and disinfecting reusable equipment before use on another person. ("Transmission-based precautions," Infection Control. Centers for Disease Control. Accessed July 16, 2025. https://www.cdc.gov/infection-control/hcp/basics/transmission-based-precautions.html).

What is a Practice Gap?

Best Practice — What does evidence state the standard of care is?

–

Current Practice — What is currently being done in practice?

=

Practice Gap — The difference between best practice and current practice

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Gap Analysis | Why is this gap present?

- Analyzing the previous two questions should help you deduce the practice gap.

- Example: Members of the healthcare team can reach best practice by following the transmission-based precautions for infection control.

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Gap Analysis | Educational Need

- Then answer the question, "WHY is this gap present?"

- The why underlying the practice gap is known as the educational need and ultimately is what the activity should be designed to address.

- Educational needs fall into three categories:

KNOWLEDGE	SKILL/STRATEGY	PERFORMANCE
Target audience does not know Example: factual information, being aware of new guidelines	Target audience does not know how Example: strategeies for or knowing how to perform a specific task/skill	Target audience does not do in professional practice Example: making a change to current practice, doing something new

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Gap Analysis | Educational Need

- **Example educational need statements:**
  - Some healthcare team members do not know [i.e., lack the knowledge] transmission-based precautions for infection control.
  - Some healthcare team members know the precautions to follow, but either forget to or do not think it is necessary in certain situations [i.e., performance is not sufficient] (Holmes S. & Watson J. *2024 Hospital quality improvement report.* January 8 2025. p. 40-41).

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Planning Process that is Reflective of the Target Audience

- Please make sure that if you are including a certain role or profession in your target audience, that you keep their role in mind while planning.*

- This may look like including a member of that profession to help plan the activity or speak at it, utilizing literature that addresses that profession, or having someone from that profession be a reviewer.

- *If you are planning to offer psychology credit, a psychologist *does* need to be part of the planning of the activity.

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Active Learning

- "Active learning is the active engagement of the learner in the learning process. This can mean that the learner actively engages with others (as in group activities) or that they actively engage with material (as in reading, writing, formulating questions and responses to questions)" (University of Toronto, p. 5).

- For more information regarding how to integrate active learning into your activity, check out this guide from the University of Toronto.

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Support Strategies

- Support strategies can be used to help enhance and reinforce the learning that takes place during the CE activity. These can support the learner in the implementation of the knowledge, skills/strategy, and performance that was addressed in the learning activity.

- Examples of support strategies:
  - Handouts with key points
  - Making recordings and/or slide decks available
  - Lists of resources
  - Bibliography
  - Workflow charts

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Barriers

Barriers to learning include things that can limit the ability of the learner to learn from the activity or implement the knowledge into their practice.

Provider Barriers	Team Barriers	Patient Barriers	System/Organizational Barriers	Other Barriers
Motivation Clinical	Communication	Communication/Language Barriers	Cost/Funding	Lack of Consensus on Professional Guidelines
Knowledge/Skill/Expertise	Roles and Responsibilities	Patient Adherence	Culture of Safety	Lack of Opportunity
Cultural Competence	Shared Values and Trust	Patient Characteristics	Insurance Reimbursement	Not Enough Time
Peer Influence	Competence		Practice Process	Multiple Geographic Locations
Fear/Legal Concerns	Consensus		Referral Process	

Competencies | Question 7

- We are looking for an active recognition of desirable attributes of individual professions or healthcare teams in the planning process.

- Example: "We have planned to do a set of activities that touch on professionalism and communications to address our patients' concerns that they are not receiving complete discharge instructions – which is the identified professional practice gap."

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And Lastly . . .

- Section 1: Concepts to know for Worksheet A—Activity Set-Up Form

- Section 2: Concepts to know for Worksheet B—Accreditation Criteria

- **Section 3: Concepts to know for Worksheet C—Standards of Integrity and Independence**

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Section 3: Concepts to know for Worksheet C—Standards for Integrity and Independence

- This worksheet explains the expectation that your activity offers only valid content and that it is free from industry influence.

Concepts in this section

- Standard 1: Ensure Content is Valid
- Standard 2: Prevent Commercial Bias and Marketing
- Standard 3: Identify, Mitigate, and Disclose Relevant Financial Relationships
- Standard 4: Manage Commercial Support
- Standard 5: Manage Ancillary Activities

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Standard 1 | Ensure Content is Valid

- Standard 1 can be found <u>here</u>.

- Additional notes:

  - SHAMP Office of CE suggests two options for meeting this standard. Only one of these is needed.

    - Send into Office of CE bios/CVs of all individuals involved in planning and/or presenting. This allows us to certify that those in control of content can be reasonably expected to follow these guidelines by virtue of their professional training and reputation.

    - Send into Office of CE the educational materials for the activity. Office of CE staff will review to ensure content validity guidelines are followed.

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Standard 2 | Prevent Commercial Bias and Marketing

- Standard 2 can be found here.

  - The SHAMP Office of CE does not consider the sharing of a presenter's place of employment or their contact information as marketing or promotion for their own financial gain.

  - Furthermore, presenters who cite their own book are not necessarily non-compliant with this standard.

  - Inappropriate marketing or promotion occurs when presenters go beyond this and are actively seeking to "sell" their services or products.

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Standard 3 | Identify, Mitigate, and Disclose Relevant Financial Relationships

- Standard 3 can be found here.

  – The collection of relevant financial relationship information with an ineligible company is completed through our LMS. After planners/speakers create an account on EthosCE, CE staff will send an email requesting that faculty complete a disclosure form. This form has all the Standards for Integrity and Independence.

  – CE staff will review the forms. If a relevant financial relationship is identified, CE staff will work with the faculty member directly to mitigate. We will keep planners apprised of the situation.

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Standard 4 | Manage Commercial Support Appropriately

- Standard 4 can be found <u>here</u>.
  - These guidelines are applicable only if the activity receives financial or in-kind support form an ineligible company.
  - We ask that you utilize our commercial support form, which is an agreement between the ineligible company, the joint providership partner (if applicable), and our office.

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Standard 5 | Manage Ancillary Activities

- Standard 5 can be found <u>here</u>.
  - It is applicable only if there is marketing by an ineligible company or non-accredited education associated with the activity.
  - If this is the case, a buffer of time and/or space must be present between any marketing from an ineligible company.

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Questions?

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References

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