

ACCREDITATION CRITERIA

Initial applicants seeking to achieve Provisional Accreditation, a two year term, must comply with Criteria 1, 2, 3, and 7–12. Providers seeking full Accreditation or reaccreditation for a four-year term must comply with Criteria 1–13. Providers also have the option to aim to achieve Accreditation with Commendation, a six-year term. Providers seeking commendation must comply with Criteria 1–13 and choose one of the following two options. Providers that will receive accreditation decisions **between November 2017 and November 2019** will have the choice of using either Option A: Commendation Criteria (C16-C22) or Option B: Menu of New Commendation Criteria (C23-C38) to seek Accreditation with Commendation. Providers that will receive accreditation decisions **after November 2019** must use Option B to seek Accreditation with Commendation. [More information on Accreditation with Commendation options is available here.](#)

Criterion 1 The provider has a CME mission statement that includes expected results articulated in terms of changes in competence, performance, or patient outcomes that will be the result of the program.

Criterion 2 The provider incorporates into CME activities the educational needs (knowledge, competence, or performance) that underlie the professional practice gaps of their own learners.

Criterion 3 The provider generates activities/educational interventions that are designed to change competence, performance, or patient outcomes as described in its mission statement.

Criterion 4 This criterion has been eliminated effective February 2014.

Criterion 5 The provider chooses educational formats for activities/interventions that are appropriate for the setting, objectives, and desired results of the activity.

Criterion 6 The provider develops activities/educational interventions in the context of desirable physician attributes [eg, Institute of Medicine (IOM) competencies, Accreditation Council for Graduate Medical Education (ACGME) Competencies].

Criterion 7 The provider develops activities/educational interventions independent of commercial interests. (SCS 1, 2, and 6).

Criterion 8 The provider appropriately manages commercial support (if applicable, SCS 3 of the ACCME Standards for Commercial SupportSM).

Criterion 9 The provider maintains a separation of promotion from education (SCS 4).

Criterion 10 The provider actively promotes improvements in health care and NOT proprietary interests of a commercial interest (SCS 5).

Criterion 11 The provider analyzes changes in learners (competence, performance, or patient outcomes) achieved as a result of the overall program's activities/educational interventions.

[Criterion 12](#) The provider gathers data or information and conducts a program-based analysis on the degree to which the CME mission of the provider has been met through the conduct of CME activities/educational interventions.

[Criterion 13](#) The provider identifies, plans and implements the needed or desired changes in the overall program (eg, planners, teachers, infrastructure, methods, resources, facilities, interventions) that are required to improve on ability to meet the CME mission.

CRITERION 14 This criterion has been eliminated effective February 2014.

CRITERION 15 This criterion has been eliminated effective February 2014.

OPTION A: ACCREDITATION WITH COMMENDATION

[Criterion 16](#) The provider operates in a manner that integrates CME into the process for improving professional practice.

[Criterion 17](#) The provider utilizes non-education strategies to enhance change as an adjunct to its activities/educational interventions (e.g., reminders, patient feedback).

[Criterion 18](#) The provider identifies factors outside the provider's control that impact on patient outcomes.

[Criterion 19](#) The provider implements educational strategies to remove, overcome or address barriers to physician change.

[Criterion 20](#) The provider builds bridges with other stakeholders through collaboration and cooperation.

[Criterion 21](#) The provider participates within an institutional or system framework for quality improvement.

[Criterion 22](#) The provider is positioned to influence the scope and content of activities/educational interventions.

OPTION B: MENU OF NEW CRITERIA FOR ACCREDITATION WITH COMMENDATION

[Criterion 23](#) Members of interprofessional teams are engaged in the planning and delivery of interprofessional continuing education (IPCE).

[Criterion 24](#) Patient/public representatives are engaged in the planning and delivery of CME.

[Criterion 25](#) Students of the health professions are engaged in the planning and delivery of CME.

[Criterion 26](#) The provider advances the use of health and practice data for healthcare improvement.

[Criterion 27](#) The provider addresses factors beyond clinical care that affect the health of populations.

[Criterion 28](#) The provider collaborates with other organizations to more effectively address population health issues.

[Criterion 29](#) The provider designs CME to optimize communication skills of learners.

[Criterion 30](#) The provider designs CME to optimize technical and procedural skills of learners.

[Criterion 31](#) The provider creates individualized learning plans for learners.

[Criterion 32](#) The provider utilizes support strategies to enhance change as an adjunct to its CME.

[Criterion 33](#) The provider engages in CME research and scholarship.

[Criterion 34](#) The provider supports the continuous professional development of its CME team.

[Criterion 35](#) The provider demonstrates creativity and innovation in the evolution of its CME program.

[Criterion 36](#) The provider demonstrates improvement in the performance of learners.

[Criterion 37](#) The provider demonstrates healthcare quality improvement.

[Criterion 38](#) The provider demonstrates the impact of the CME program on patients or their communities.

POLICIES SUPPLEMENTING THE STANDARDS FOR COMMERCIAL SUPPORT

DEFINITION OF A COMMERCIAL INTEREST

A *commercial interest* is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests.

A commercial interest is not eligible for ACCME accreditation. Commercial interests cannot be accredited providers and cannot be joint providers. Within the context of this definition and limitation, the ACCME considers the following types of organizations to be eligible for accreditation and free to control the content of CME:

- 501-C Non-profit organizations (Note, ACCME screens 501c organizations for eligibility. Those that advocate for commercial interests as a 501c organization are not eligible for accreditation in the ACCME system. They cannot serve in the role of joint provider, but they can be a commercial supporter.)
- Government organizations
- Non-health care related companies
- Liability insurance providers
- Health insurance providers
- Group medical practices
- For-profit hospitals
- For profit rehabilitation centers
- For-profit nursing homes
- Blood banks
- Diagnostic laboratories

ACCME reserves the right to modify this definition and this list of eligible organizations from time to time without notice.

FINANCIAL RELATIONSHIPS AND CONFLICTS OF INTEREST

Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria for promotional speakers' bureau, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. ACCME considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.

The ACCME has not set a minimum dollar amount for relationships to be significant. Inherent in any amount is the incentive to maintain or increase the value of the relationship.

With respect to personal **financial relationships**, *contracted research* includes research funding where the institution gets the grant and manages the funds and the person is the principal or named investigator on the grant.

Conflict of Interest: Circumstances create a conflict of interest when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship.

The ACCME considers **financial relationships** to create actual conflicts of interest in CME when individuals have both a financial relationship with a commercial interest and the opportunity to affect the content of CME about the products or services of that commercial interest. The ACCME considers "content of CME about the products or services of that commercial interest" to include content about specific agents/devices, but not necessarily about the class of agents/devices, and not necessarily content about the whole disease class in which those agents/devices are used.

With respect to **financial relationships** with commercial interests, when a person divests themselves of a relationship it is immediately not relevant to conflicts of interest but it must be disclosed to the learners for 12 months.

DISCLOSURE OF FINANCIAL RELATIONSHIPS TO THE ACCREDITED PROVIDER

Individuals need to disclose relationships with a commercial interest if both (a) the relationship is financial and occurred within the past 12 months and (b) the individual has the opportunity to affect the content of CME about the products or services of that commercial interest.

COMMERCIAL SUPPORT: DEFINITION AND GUIDANCE REGARDING WRITTEN AGREEMENTS

Commercial Support is financial, or in-kind, contributions given by a commercial interest which is used to pay all or part of the costs of a CME activity.

When there is commercial support there must be a written agreement that is signed by the commercial interest and the accredited provider prior to the activity taking place.

An accredited provider can fulfill the expectations of SCS 3.4 - 3.6 by adopting a previously executed agreement between an accredited provider and a commercial supporter and indicating in writing their acceptance of the terms and conditions specified and the amount of commercial support they will receive.

A provider will be found in Noncompliance with SCS 1.1 and SCS 3.2 if the provider enters into a commercial support agreement where the commercial supporter specifies the manner in which the provider will fulfill the accreditation requirements.

VERBAL DISCLOSURE TO LEARNERS

Disclosure of information about relevant financial relationships may be disclosed verbally to participants at a CME activity. When such information is disclosed verbally at a CME activity, providers must be able to supply the ACCME with written verification that appropriate verbal disclosure occurred at the activity. With respect to this written verification:

1. A representative of the provider who was in attendance at the time of the verbal disclosure must attest, in writing:
 - a. that verbal disclosure did occur; and
 - b. itemize the content of the disclosed information (SCS 6.1); or that there was nothing to disclose (SCS 6.2).
2. The documentation that verifies that adequate verbal disclosure did occur must be completed within one month of the activity.

COMMERCIAL SUPPORT: ACKNOWLEDGMENTS

The provider's acknowledgment of commercial support as required by SCS 6.3 and 6.4 may state the name, mission, and areas of clinical involvement of an ACCME-defined commercial interest but may **not** include corporate logos and slogans.

COMMERCIAL EXHIBITS AND ADVERTISEMENTS

Commercial exhibits and advertisements are promotional activities and not continuing medical education. Therefore, monies paid by commercial interests to providers for these promotional activities are not considered to be *commercial support*. However, accredited providers are expected to fulfill the requirements of SCS 4 and to use sound fiscal and business practices with respect to promotional activities.