

Islamic Medical Association of North America
CME Activity Planning Application



Date Submitted:

Phone:

Alternate phone:

E-mail:

Chair CME:

Will this Activity seek to receive commercial support? Yes No

Activity Title:

Activity Date(s):

Activity Duration: Single Day Multiple Days

Location(s):

Number of AMA PRA Category 1 Credit(s)[™] Requested:

Target Audience:

For whom is the Activity intended? Check All that Apply.

Primary Care Physicians

Allied Health Professionals

Nurse Directors

Other (Please specify)



Professional Practice Gaps and Educational Needs

A professional practice gap is the difference between current practices and/or outcomes and optimal, achievable (desired) practices and/or outcomes.

Consider data from one or more sources to identify the professional practice gap that indicated the need for an educational intervention, and complete the following chart.

In Column A: Briefly describe the current practices and/or outcomes related to this topic

Example: Physicians do not always recognize the range of atypical signs and symptoms that could indicate the presence of coronary artery disease in women.

In Column B: Briefly describe the desired practices and/or outcomes to this topic

Example: Physicians recognize the range of atypical presentations that indicate the possibility of coronary artery disease in women.

In Column C: Identify the gap (Where learners are vs Where learners should be) by comparing the descriptions in Columns A and B.

Example: Physicians either do not know about or are not acting upon the atypical signs and symptoms that indicate the possibility of coronary artery disease in women.

In Column D: Identify the underlying educational need(s) and type(s) of change needed to close the gap. Options include:

Example: Knowledge – Physicians need to be informed about what are the atypical signs and symptoms of coronary artery disease in women. Competence – Physicians need to be able to recognize the atypical signs and symptoms of coronary artery disease in women.

Knowledge - having information

Competence - knowing how to do something (e.g., skills, abilities, strategies), which has not yet been put into practice.

Performance - the skills, abilities, and strategies one implements in practice.

Patient Outcomes - the consequences of actual performance in practice

Note: At minimum, every CME must be designed to change learners' competence, performance, or patient outcomes. **What is the professional practice gap of your target audience that will be addressed by this activity?**

Column A:
Current Practices/
Outcomes

Column B:
Desired Practices/
Outcomes

Column C:
Existing Gaps

Column D:
Underlying Educational
Need(s) & Type(s) of
Change Required



What data source(s) did you use to identify the professional gap(s) and educational need(s) in your audience?

Literature Review

IM/ACGME/ABMS

Expert Opinion

Previous Activity Evaluation

Other (Please specify):

Review the changes listed in Column D. What, if any, barriers might stand in the way of these changes being made?

Examples: formulary restrictions, time not allotted for implementation of new skills, insurance doesn't reimburse for treatments, lack of resources - time, money, staff, organizational policy, or lack of support

Desired Results (Learning Objectives)

List the learning objectives for this activity, as well as how each objective addresses the educational need(s) identified.

Use action verbs and specific criteria (see below) in order to measure whether or not the objectives were achieved and the professional practice gap was closed. Also indicate the type of change (competence, performance, or patient outcomes) that is associated with each learning objective.

To describe changes in **Knowledge/Competence**, consider using:

Analyze, Assess, Classify, Compare, Define, Describe, Differentiate, Discuss, Distinguish, Estimate, Explain, Examine, Evaluate, Identify, Indicate, Label, List, Name, Outline, Predict, Recall, Recognize, Record, Relate, Review, State, Summarize

To describe changes in **Performance** consider using:

Apply, Arrange, Assemble, Calculate, Categorize, Choose, Collect, Combine, Complete, Construct, Create, Demonstrate, Design, Develop, Devise, Employ, Formulate, Illustrate, Interpret, Model, Modify, Operate, Organize, Plan, Prepare, Produce, Select, Use, Utilize

To describe changes in **Patient Outcomes** consider using:

Change, Detect, Discover, Enhance, Generate, Impact, Improve, Realize

Avoid the following vague or ambiguous verbs:

Appreciate, Believe, Comprehend, Conceptualize, Experience, Feel, Hear, Know, Listen, Memorize, Perceive, See, Think, Understand

Upon completion of this Activity, the learner will be able to:

1.

Educational need(s) addressed by this objective:

Knowledge

Competence

Performance

Patient Outcomes

2.

Educational need(s) addressed by this objective:

Knowledge

Competence

Performance

Patient Outcomes

3.

Educational need(s) addressed by this objective:

Knowledge

Competence

Performance

Patient Outcomes



Content

What content will this educational activity include? List the major content areas, in sequence, and briefly describe the rationale for each.

Content area	Rationale for inclusion
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	



Educational Format:

(Check all that Apply)

Lecture/Didactic Case Study

Panel Discussion

Hands-on Workshops

Break-out Sessions

Question/Answer Sessions

Performance Improvement CME

Manuscript Review

Other (Please specify):

Explain how the format(s) you selected supports your objectives and desired result(s) (i.e. in changing competence, performance, and/or patient outcomes.)

What ACGME/ABMS competency is addressed by this activity?

Check all that Apply

CME committee considers IOM and ABMS competencies during the planning process. The planned activities are focused on clinical competencies (medical knowledge). Planned CME program is designed to increase physician competency in the area of patient care that is compassionate, appropriate and effective. We educate on the competency of professionalism for improved patient care.

Patient Care

Medical Knowledge

Practice-based Learning and Improvement

Interpersonal and Communication Skills

Professionalism

System-based Practice

How are presenters (lecturers, etc.) being informed of the educational objectives? *Please document this interaction.*



Evaluation

How will the participant’s achievement of the educational objectives be measured in terms of changes in competence, performance, or patient outcomes? Describe the evaluation process to be used and attach a copy of the evaluation instruments (See sample evaluation questionnaire attached).

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, 2. The mode of education, 3. Applicability of the tool, and 4. Available resources.

Please indicate the evaluation tool(s) selected for this activity and the rationale for their selection. (Attach additional pages as needed).

Note: A summary of the evaluation results and a list of participants must be received in the CME Office within 30 days following the program date(s).

Methods used to determine the activity's effectiveness in meeting identified educational needs and objectives for which it was designed: (check as many as apply)

Methods of Evaluation	Knowledge	Competence	Performance	Patient Outcomes
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Pre-/Post- Testing
without clinical vignettes
 Show of hands

Pre-/Post- Testing
with questions containing clinical vignettes
 Show of hands
 or Other

Post-activity Evaluation (Required)

Expert observation of procedural skills

6-8 week Follow-up Survey Online

Other (specify)



Mandatory Disclosure Statement

IMANA has implemented a process where everyone who is in a position to control the content of an education activity has disclosed to us all relevant financial relationships with any commercial interest. In addition, should it be determined that a conflict of interest exists as a result of a financial relationship a speaker, author, and/or planner may have, this will need to be resolved prior to the activity. In order to do this, disclosure statements must be completed and returned to IMANA with this application. This information is necessary in order for IMANA to be able to move to the next steps in planning this CME activity. If a speaker refuses to disclose relevant financial relationships, he/she will be disqualified from being a part of the planning and implementation of this CME activity.

ACCME Accreditation Statement

“This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of (Islamic Medical Association of North America) and (). The (Islamic Medical Association of North America) is accredited by the ACCME to provide continuing medical education for physicians.”

How will the speaker, author, and planner disclosures be communicated to the audience?

The **Slide presentation** at the beginning of the program contains the following **Disclosure statement**:

“IMANA is committed to providing CME activities that are fair, balanced, and free of bias. Full and specific disclosure information is provided in your handouts.”

The **Handout materials** contain the following **Disclosure statement**:

“IMANA is committed to providing continuing medical education activities that are fair, balanced, and free of commercial bias. In order to assure appropriate content, we require that those who participate in the development of our CME activities provide us with information about their relationships with commercial interests. Any relationships with commercial interests that are identified are resolved before planners, presenters, or others in a position to influence content of our educational activities are allowed to become involved. If there is a conflict of interest that cannot be resolved, that individual will not play a role in our CME activities.”