



Massachusetts Psychiatric Society (MPS) Continuing Medical Education (CME) Submission Policy

If an MPS Committee or individual member is interested in developing an educational activity for MPS that will grant CME Credit, the CME Coordinator will guide the Committee or member through the following process:

- A proposal for the activity and supporting documentation must be submitted to the CME Committee for review and approval. Supporting documentation includes the planning document, a draft agenda and a draft budget for the activity. The CME Coordinator will provide sample documents to the applicant.
- Requests for CME activities should be submitted no less than 6 months prior to the proposed activity date. *Note: conference/meeting space reservations require significant lead time, sometimes a year or more in advance of the activity.*
- The CME Committee will review the proposal and supporting documentation within one month and determine if additional information on the practice gap(s) and educational need for the activity is needed from the Committee Chair or Member from which the proposal originated.
- During the review process, the CME Committee may recommend altering the content and/or format of the activity to best suit the needs of the MPS membership.
- Challenges arising out of the review process between the program organizers and the CME committee can be reviewed by the Executive Committee at the request of either party,
- When an activity is approved for CME credit (*AMA PRA Category 1 Credit™*), the CME Coordinator will work directly with the program planning chair(s) of the activity to develop a marketing plan and materials, and confirm speakers, including collecting biographies, disclosure and presentations.
- The MPS does not enter into jointly provided agreements for CME activities.

Attachments – MPS Continuing Medical Education (CME) Mission Statement, Definition of CME and Risk Management

Approved by Executive Committee 5/13/20



Massachusetts Psychiatric Society Continuing Medical Education (CME) Mission Statement

Target Audience

MPS members are physicians who are committed to providing outstanding medical/psychiatric care through accurate diagnosis and comprehensive treatment of mental health and emotional illnesses. We seek to achieve this goal by promoting public and professional education, legislation that addresses the needs and rights of the mentally and emotionally ill, and by advocating for the allocation of public and private resources for treatment, research, and education. We provide a supportive and informative professional community for our members.

Purpose and Content Area

The MPS believes that life-long learning is a critical element of continuous improvement in psychiatric practice. The MPS is therefore committed to providing outstanding continuing medical education activities, responsive to the needs of our members. To this end we offer learning opportunities that will:

- Maintain and expand the knowledge and skills of the membership
- Promote clinical excellence in psychiatry
- Promote the delivery of cost effective healthcare
- Challenge members to critically examine evidence based practice methodologies and research
- Promote change and personal development for physicians
- Address specific clinical, risk management and ethical problems encountered by psychiatrists in a range of specialty and practice settings

Type of Activities

Educational activities will be varied and consist of lectures, workshops, and interactive settings such as panel discussions, role-play, and case scenarios. Increasingly MPS will employ technology and other media to extend the mode of educational activities available to the membership. We also aim to keep our members abreast of developments affecting the overall organization and delivery of health care services to patients in MA, and provide a network for improving advocacy on key legislative matters affecting, for example, prescribing & formulary developments, managed care, and statewide service provision. Opportunities for sponsoring educational activities linking psychiatric practice to the wider field of medicine are also emerging, and we will embrace links with other medical specialties such as Primary Care and Neurology, according to our members' needs.

Expected Results

Our expected outcome is that the educational activities sponsored by the MPS will change physician competence, performance or patient outcomes and will assist members to maintain the highest standards of clinical psychiatry, by application of their personal development to their own patient caseload or field of practice. We expect our program to impact positively and directly upon:

- Health outcomes for patients
- Clinical standards of psychiatric practice
- Standards of care delivered in conjunction with other clinical specialties
- Risk management
- Members' personal abilities, skills and professional achievements as physicians

AMA's Definition

Continuing Medical Education (CME)

The educational activities which serve to maintain, develop, or increase the knowledge, skills, and professional performance and relationships that a physician uses to provide services for patients, the public, or the profession. The content of CME is the body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public.

ACCME CME Content: Definition and Examples

Continuing medical education consists of educational activities which serve to maintain, develop, or increase the knowledge, skills, and professional performance and relationships that a physician uses to provide services for patients, the public, or the profession. The content of CME is that body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public.

ACCME Note: The ACCME definition of CME is broad, to encompass continuing educational activities that assist physicians in carrying out their professional responsibilities more effectively and efficiently. Examples of topics that are included in the ACCME definition of CME content include:

- Management, for physicians responsible for managing a health care facility
- Educational methodology, for physicians teaching in a medical school
- Practice management, for physicians interested in providing better service to patients
- Coding and reimbursement in a medical practice

When physicians participate in continuing education activities that are not directly related to their professional work, these do not fall within the ACCME definition of CME content. Although they may be worthwhile for physicians, continuing education activities related to a physician's nonprofessional educational needs or interests, such as personal financial planning or appreciation of literature or music, are not considered CME content by the ACCME.

Definition of Risk Management

The Massachusetts Board of Registration in Medicine defines risk management study as follows – It must include instruction in medical malpractice prevention, such as risk identification, patient safety and loss prevention, and may include instruction in any of the following areas:

- medical ethics • quality assurance • medical-legal issues • patient relations
- participation on peer review committees • utilization review that directly relates to quality assurance • non-economic aspects of practice management • physician burn-out • end-of-life care studies • opioid and pain management