

Dear Prospective Planner:

As an important contributor to our accredited education, we would like to enlist your help to ensure that educational content is fair and balanced, and that any clinical content presented supports safe, effective patient care. This includes the expectations that:

- ✓ All recommendations for patient care in accredited continuing education must be based on current science, evidence, and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options.
- ✓ All scientific research referred to, reported, or used in accredited education in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation.
- ✓ Although accredited continuing education is an appropriate place to discuss, debate, and explore new and evolving topics, these areas need to be clearly identified as such within the program and individual presentations. It is the responsibility of accredited providers to facilitate engagement with these topics without advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning.
- ✓ Content cannot be included in accredited education if it advocates for unscientific approaches to diagnosis or therapy, or if the education promotes recommendations, treatment, or manners of practicing healthcare that are determined to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients.

These expectations are drawn from **Standard 1** of the ACCME Standards for Integrity and Independence in Accredited Continuing Education. For more information, see accme.org/standards. If we can help you to understand and/or apply these strategies to your education, please contact us at NurseCE@psu.edu.




Please consider using these strategies to help us support the development of valid, high quality education.

Consider using the following best practices when presenting clinical content in accredited CE:

- ✓ Clearly describe the level of evidence on which the presentation is based and provide enough information about data (study dates, design, etc.) to enable learners to assess research validity.
- ✓ Ensure that, if there is a range of evidence, that the credible sources cited present a balanced view of the evidence.
- ✓ If clinical recommendations will be made, include balanced information on all available therapeutic options.
- ✓ Address any potential risks or adverse effects that could be caused with any clinical recommendations.

Although accredited CE is an appropriate place to discuss, debate, and explore new and evolving topics, presenting topics or treatments with a lower (or absent) evidence base should include the following strategies:

- ❖ Facilitate engagement with these topics without advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning
- ❖ Construct the activity as a debate or dialogue. Identify other faculty who represent a range of opinions and perspectives; presentations should include a balanced, objective view of research and treatment options.
- ❖ Teach about the merits and limitations of a therapeutic or diagnostic approach rather than how to use it.
- ❖ Identify content that has not been accepted as scientifically meritorious by regulatory and other authorities, or when the material has not been included in scientifically accepted guidelines or published in journals with national or international stature.
- ❖ Clearly communicate the learning goals for the activity to learners (e.g., “This activity will teach you about how your patients may be using XX therapy and how to answer their questions. It will not teach you how to administer XX therapy”).

Please answer the following questions regarding the clinical content of the education. 

Are recommendations for patient care based on current science, evidence, and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options? *[Standards for Integrity and Independence 1.1]*

- Yes
- No

Does all scientific research referred to, reported, or used in this educational activity in support or justification of a patient care recommendation conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation? *[Standards for Integrity and Independence 1.2]*

- Yes
- No

Are new and evolving topics for which there is a lower (or absent) evidence base, clearly identified as such within the education and individual presentations? *[Standards for Integrity and Independence 1.3]*

- Yes
- No

Does the educational activity avoid advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning? *[Standards for Integrity and Independence 1.3]*

- Yes
- No

Does the activity exclude any advocacy for, or promotion of, unscientific approaches to diagnosis or therapy, or recommendations, treatment, or manners of practicing healthcare that are determined to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients? *[Standards for Integrity and Independence 1.4]*

- Yes
- No

What is your name and email?	Name: Email:
When will the education take place?	Date:
Do you have a title or brief description for the education? If yes, please note it to the right; if no, leave blank. Examples: Emergency Department team huddle; Leadership in a time of crisis; Well-being check-in	Title/Brief Description:
What practice-based problem (gap) will this education address? Examples: Improve care coordination; Better communication with patients and families; Want to give better feedback to students	Practice-based problem (gap):
What is/are the reason(s) for the gap? How are your learners involved? Examples: We need strategies to discuss difficult topics with family members; Don't know best ways to improve team collaboration	Reason(s) for the gap:
Review the three statements to the right. If you can check <u>any</u> of these boxes, you do not need to identify, mitigate, and disclose relevant financial relationships. If you are unable to check any boxes, please contact your CE program administrator to implement processes for ensuring the integrity and independence of this education.	The education will... (check all that apply) <input type="checkbox"/> only address a non-clinical topic (e.g., leadership or communication skills training). <input type="checkbox"/> be for a learner group that is in control of the content (e.g., spontaneous case conversation among peers). <input type="checkbox"/> be a self-directed educational activity where the learner will control their educational goals and report on changes that resulted (e.g., learning from teaching, remediation, or a personal development plan).
What change(s) in strategy, performance, or patient care would you like this education to help learners accomplish? Examples: Eliminate stigmatizing language from communications with patients; Improve my management skills	Desired change(s) in strategy, performance, or patient care:
In order to award CME/CE credit, please indicate the duration of the education.	Education duration: _____ hours and _____ minutes <i>Please report time in 15-minute increments.</i>
Discuss with learners the changes they intend to make to their strategies, performance, or patient care that will result from this activity and list that information to the right. Example: I will use the evidence-based checklist we discussed to improve screening my patients for past military service.	Changes learners intend to make to strategies, performance, or patient care:
After the activity, please collect attendance and learner change information for the activity and send it to the continuing education department in order for credit to be awarded. You can also list the attendees on the back of this form.	