Pacific Northwest University of Health Sciences

Policy: CME Program – Evaluation

Purpose: This policy provides guidelines for assessing, documenting, and continuously improving the effectiveness of PNWU’s CME Program.

Policy: The CME Committee is responsible for the primary evaluation and assessment of the overall CME Program and the component activities. Feedback gathered from the evaluation process is disseminated and incorporated into planning for future CME activities and continuous improvement of the overall CME Program.

Definitions: N/A

Procedure:

Activity Evaluation

1. A post-course evaluation must be conducted for all activities that are certified for continuing education credit. Feedback will be solicited from participants and the designated Course Director on the quality and effectiveness of each CME activity.

2. Data will be summarized by CME Program staff and shared with the CME Committee, presenters, commercial supporters (if applicable), joint/co-sponsors, and other stakeholders, as appropriate.

3. Participants will be incited to evaluate and rate various topics, such as:
   a. content validity, independence, relevance, and overall quality and effectiveness
   b. whether the educational objectives were met
   c. presenter’s overall performance and knowledge of subject area
   d. effectiveness of the educational format, learning aids, and venue
   e. effects on knowledge, competence, performance, attributes, and patient outcomes

4. The distribution of evaluation tools will vary according to the educational format and type of assessment.
   a. For live CME activities, the post-course evaluation will be distributed on paper to participants at the start of the activity, along with handout materials and any other pre-activity tools.
   b. For enduring materials and Internet-based CME, the participant will be directed to the post-course evaluation document at the completion of the activity.

5. Outcomes in learner behavior that influence the health of the population are measured when applicable by repeated surveys or statistical review of health quality and morbidity data.
   a. CME outcome assessments will be conducted post-activity, within 30 to 90 days after the activity ends, by paper and/or electronic means.
   b. CME impact assessments will be conducted post activity, within 180 days or more from the activity end date, by paper and/or electronic means.

This policy and procedure are not to be construed as an employment agreement or contract.

Pacific Northwest University of Health Sciences retains the right to amend or change any policy or procedure at any time without prior notice.
6. Additional evaluation tools may be applied to each activity, to include audience response systems and pre/post activity tests, depending on the educational format and learning objectives of the CME activity.

**Organizational Self-Assessment and Improvement**

1. The CME Committee shall conduct an annual self-assessment of the prior fiscal year, to identify professional practice gaps in terms of performance as an accredited CME provider.

2. The self-assessment process shall include strategies for implementing organizational improvement. In addition, the process shall demonstrate that identified improvements are underway or completed and that the impact of each improvement is measured.

3. The primary goals of the organizational self-assessment and improvement process are to:
   a. Analyze the overall changes in knowledge, competence, performance, or patient outcomes facilitated by the CME Program using data and information from each CME activity.
   b. Gather data and conduct a CME Program-based analysis on the degree to which the PNWU CME mission has been met through the conduct of CME activities.
   c. Identify, plan, and implement the needed or desired changes in the overall CME Program that are required to improve on the ability to meet the PNWU CME mission.

**Needs Assessment**

1. PNWU’s CME Committee shall utilize needs assessment surveys to systematically identify the educational needs of prospective participants and incorporate the information into planning future CME activities and interventions.

2. The following criteria relating to needs assessment surveys is required on submissions to the CME Division upon request for AOA Category 1-A or Category 1-B credit for pre-approval. The needs assessment survey must be:
   a. conducted on an annual basis, at minimum
   b. included for each presentation
   c. timely and current for the field
   d. documented, with at least one evidence-based source

3. The needs assessment surveys will solicit program improvement suggestions and other statistical data.

4. The distribution of the needs assessment surveys will vary according to the target audience, educational format, and learning aids available.

**Related Documents:**

- Post-Activity Course Evaluation Template
- Organizational Self-Assessment and Improvement Template (in development)