

The Morehouse School of Medicine and CME missions serve to guide the CME program along its intended path, protect against manipulation of the program into education situations, or otherwise adverse situations, not endorsed by the policies.

The most important reason for any health care organization to establish a CME program is the desire to enhance high quality medical care. The physician must be involved as a participant and student in the active process of learning.

In order to apply the guidelines of the MSM and CME missions, the planning and CME committees consider the following criteria:

What does this program expect to accomplish? (Purpose)

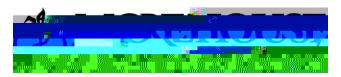
What will be the focus of our topics? (Content Areas)

For whom will the educational activity be intended? (Target Audience)

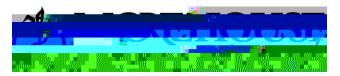
What type of activities will be provided? (Activities)

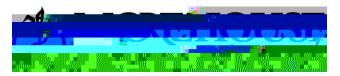
What are the expected outcomes of the program? (Results)

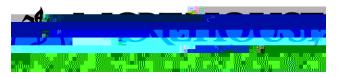
The Mission Statement is reviewed and revised regularly by the CME Committee and approved by the Academic Policy Council.



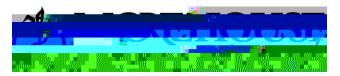
- 1. Needs Assessment documentation is the first step in the planning process.
- 2. A learning needs survey is conducted periodically to identify educational needs perceived by the faculty and the area physicians as well as to evaluate performance of the continuing medical education component of the medical school. The data is then summarized and used in the planning of the educational activities.
- 3. Identified needs from multiple sources are used to initiate and support the planning process.
- 4. Community physicians are surveyed to determine learning needs and to determine the best vehicle for meeting those needs.
- 5. Each source of need requires a supporting document to use in setting methodology, design, objectives, and evaluation of the CME activity.

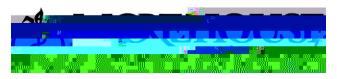




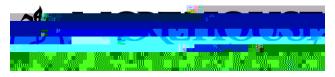


- 1. All educational activities are evaluated for effectiveness in meeting identified educational needs, as measured by satisfaction, knowledge, or skills. When applicable, educational activities are evaluated for effectiveness in meeting identified educational needs, as measured by practice application and/or health status improvement.
- 2. The overall CME program is evaluated regularly by the CME committee with review of MSM's mission and activities of the previous fiscal year. Annual review of the CME program is included in the annual needs survey by feedback from the community physicians. Improvements are made in the CME program by incorporating suggestions of the CME committee into the operating policies of the Office of CME.
- 3. Outcomes in physician behavior which influence the health of the population are measured when applicable by repeated surveys or statistical review of morbidity data.

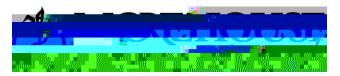


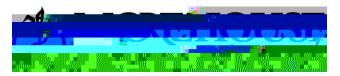


- 8. All potential joint/co-sponsorship relationships will be examined on their individual merits. Although all CME activities joint/co-sponsored with MSM CME must comply with this policy, MSM CME reserves the right to refuse to enter into a joint/co-sponsorship agreement for any reason whatsoever, regardless of that organization's willingness to comply with this policy.
- 9. MSM CME will charge fees for its services. These fees and the terms for its payment will be mutually agreed upon and delineated in an exhibit to the aforementioned letter of approval between MSM CME and the joint/co-sponsor:
 - a) Administrative Fee reflects: (a) oversight and involvement in the planning process by members of MSM CME's staff and/or consultants that represent MSM CME; (b) expertise in the rules and responsibilities of providers, joint/co-sponsors, and commercial supporters of continuing medical education activities as derived from the ACCME and AMA; and (c) fees required to maintain full accreditation
 - b) Content reviewer fee represents fees to be paid by MSM CME to selected content reviewers. These fees will be negotiated between MSM CME and the content reviewer(s) and will be submitted as a line item to the joint/co-sponsor for inclusion in the projected budget for the CME activity.
 - c) Certificate fee represents the costs to MSM CME associated with the awarding of credit and the maintenance of six years of detailed records of participation in CME activities certified by MSM. Certificate fees will be established with each joint sponsor applicant.
 - d) Honoraria for a MSM clinician serving as Activity Medical Director, Activity Co-Director, author, speaker, moderator, steering committee chair, etc. will be separately negotiated between the joint/co-sponsor and the individual faculty member (e.g., MSM CME does not enter into these negotiations).



1. Regularly Scheduled Series (RSS) such as grand rounds, MMA boards and cancer conferences are approved on the basis of





- * Completed application for CME sponsorship
 * Documentation of Need
- 3. *Objectives