Continuing Education
Activity Development Guidance

THE 2020 NABIS Annual Conference on Brain Injury

February 26–29, 2020

For further information, please contact:
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Overview
AffinityCE is an accredited continuing education (CE) provider for health care professionals and has been providing continuing education activities for more than 25 years. AffinityCE is committed to providing evidence-based, compliant continuing education accreditation requirements, policies, and guidelines to be considered for continuing education credit. This document will assist you in preparing continuing education content that meets all accreditation requirements and policies.

CE Accreditation: Interdisciplinary Audience
This activity will provide accredited continuing education for multiple health professions. When developing content for an interprofessional audience, please consider content that is relevant to the educational needs of the widest possible audience.

Continuing Education Target Audience
AffinityCE will provide CME/CE accreditation for the following professions:

- **Physicians**: Accreditation Council for Continuing Medical Education (ACCME) AMA PRA Category 1 Credit™
- **Nurses**: American Nurses Credentialing Center (ANCC)
- **Psychologists**: American Psychological Association (APA)
- **Social Workers**: National Association of Social Workers (NASW)
- **Occupational Therapists**: ACCME Non-Physician CE Credit
- **Physical Therapists**: ACCME Non-Physician CE Credit
- **Rehabilitation Counselors**: Commission on Rehabilitation Counselor Certification (CRCC)
- **Case Managers**: Commission for Case Manager Certification (CCMC)
- **Speech-Language Professionals**: American Speech-Language-Hearing Association (ASHA)

AffinityCE will also issue a Statement of Participation to other attendees.

In developing content for continuing education activities, faculty should keep in mind these health professionals. Additionally, it is important to be aware of the diversity in patient populations served by these health professionals, including underserved and minority populations. Not all activities will meet the CE requirements for all health professionals. Faculty members are encouraged to develop content to meet the educational needs of the widest possible audience.

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

A broad definition of CME/CE, such as the one found above, recognizes that all continuing educational activities that assist health care professionals in carrying out their professional responsibilities more effectively and efficiently are CME/CE.
Each continuing education activity should address certain key principles as delineated below. These principles are designed to enhance the awareness, knowledge, skills, and attitudes that a clinician needs to provide quality services to patients.

**Course Content Rationale**

**Meet Educational Needs**
What educational need is this activity designed to meet?

*A program must meet the needs in the areas of the clinician’s knowledge or competence or performance. The activity will increase the clinician’s knowledge:*

- Due to the lack of awareness in...
- By addressing the role of the clinician in disease prevention or treatment...
- Will impart new or improved methods for assessment, planning, and implementation...

**Bridge Professional Practice Gaps**
Which professional practice gap is this activity designed to address?

The continuing education activity will address gaps related to either the clinician’s knowledge or competence or performance:

- Lack of awareness in...
- Inconsistencies with...
- Lack of contemporary knowledge in...

**Achieve Improved Results/Outcomes**
What is this activity designed to change?

*The intended results of this continuing education activity is improvement in knowledge, providing or enhancing competencies which ultimately will lead to improved performance and patient care practices and overall health outcomes.*

- Increase knowledge of...
- Impact the process of...
- Implementation of...
- Improves delivery of care for

**Fair Balance**
The content or format of a CME/CE activity and its related materials must promote improvements or quality in healthcare and not a specific proprietary business interest of a commercial entity. A product or service must be presented in a fair and balanced manner with other similar products or services.

Presentations must give a balanced view of therapeutic options. Presenters should use scientific or generic names in referring to products in their lectures or enduring materials. Should it be necessary to use a trade name, then the trade names of all similar products within a class should be used.

**Promotion**
Presentations that promote a particular brand, device, treatment, or trade name over others in a category or contain logos of a specific brand cannot be accredited for continuing education.
CME/CE Content Validation

1. CME/CE is accountable to the public for presenting clinical content that supports safe, effective patient care.

2. The overall content of the activity must promote recommendations, treatment, or manners of practicing medicine that are reflective of generally accepted standard of care within the profession of medicine.

3. All recommendations involving clinical medicine in a CME/CE activity must be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients.

4. All scientific research referred to, reported, or used in CME/CE in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, and analysis.

5. All clinical recommendations must be based on “standard of care” for patients.

6. Recommendations must be based on evidence that is accepted within the profession of medicine as adequate justification for any indications and contraindications in the care of patients.

7. Data presented about the effects of any of recommended treatments or interventions must show results that are either a) clinically indistinguishable from a placebo or b) clinically indistinguishable from no intervention.

Information about off-label uses of approved products, unapproved product uses, nutrients, vitamins, and supplements

1. Disclosure must be made any time a product is mentioned, or information is provided about an unapproved use or unapproved use.

2. Information can be provided on studies and/or reports about unapproved product use or off label use of an approved product or products still in clinical trials, or evolving issues, but it must be presented as informational only. This information must be documented by generally accepted references. No conclusions, recommendations, or suggestions regarding therapy are to be presented or advocated. In these instances, any discussion must be noted as unapproved product information. An example: Nutrients, vitamins and supplements, unless FDA approved for a therapeutic use, should not be recommended for therapeutic uses or purposes.

Profession-specific CE Activity Development Criteria

Not all continuing educational activities that health care professionals may engage in are CME/CE. Health care professionals may participate in worthwhile continuing educational activities that are not related directly to their professional work, and these activities are not CME/CE. Continuing educational activities that respond to a non-professional educational need or interest, such as personal financial planning or appreciation of literature or music, are not CME/CE.

Certain disciplines require additional or special criteria when providing CME/CE. Please refer to the following sections for discipline-specific content development information.
Physicians
Continuing medical education activities can be developed to align with any one of the following Core competencies.

- Institute of Medicine Competencies
- ABMS/ACGME Competencies
- Interprofessional Education Collaborative Competencies

Psychologists
Continuing education activities to be accredited for psychologists must build upon a completed doctoral program in psychology. With this in mind, formal learning activities should: (1) be relevant to psychological practice, education, and science; (2) enable psychologists to keep pace with the most current scientific evidence regarding assessment, intervention, and education as well as important legal, statutory, or regulatory issues; and/or (3) allow psychologists to maintain, develop, and increase competencies in order to improve services to the public and enhance contributions to the profession.

Continuing education activities are not a substitute for the basic academic education and training needed for entry to the field of psychology, nor should it be the primary vehicle for career changes from one APA-recognized specialty area (e.g., clinical, counseling, school psychology) to another.

Content must meet one of the following: focuses on application of psychological assessment and/or intervention methods that have overall consistent and credible empirical support in the contemporary peer reviewed scientific literature beyond those publications and other types of communications devoted primarily to the promotion of the approach; focuses on ethical, legal, statutory, or regulatory policies, guidelines, and standards that impact psychological practice, education, or research; or focuses on topics related to psychological practice, education, or research other than application of psychological assessment and/or intervention methods that are supported by contemporary scholarship grounded in established research procedures.

Nurses
Continuing nursing education involves systematic professional learning experiences designed to augment the knowledge, skills, and attitudes of nurses, and therefore enrich nurses’ contribution to quality health care.

Continuing education for nurses must be applicable to nursing practice. A presentation that is accredited for physicians or another discipline may not be appropriate for continuing nursing education. Please ask yourself the following key items when preparing a presentation for nurses:

- Does the content organization reflect nursing process: Assessment, Planning, and Implementation?
- Does the content discuss the role of the nurse in health promotion and/or disease prevention?
- Does the content address the role of the nurse in the assessment and/or management of disease process?
- Does the content address cultural competencies and/or issues?

Content should be developed based on the most current available evidence. Documentation should support quality of evidence chosen for content. Examples should include evidence-based practice, literature or peer-reviewed journals, clinical guidelines, best practices, and content experts or expert opinions. Educational activities must meet the guidelines listed below to be eligible for awarding continuing education credit.
Continuing nursing education content must be:

- Beyond basic knowledge
- Generalized regardless of work setting
- Enhance professional development or performance of the nurse
- Evidenced based or based in the best available evidence
- Presented without promotion or bias
- At least 30 minutes in duration

**Required Faculty Documentation**

All faculty preparing a continuing education activity must provide certain information and be vetted for potential conflicts of interest. The following items are required and may be collected electronically via AffinityCE’s Faculty Resource Center:

- Contact information
- Title, credentials and current affiliation
- Curriculum Vitae or professional résumé
- Continuing Education Agreement (electronically signed)
- Disclosure of potential conflicts of interest (electronically signed)
- Activity learning outcomes
- Presentation
- Post-test questions (if applicable)

In addition, all Planning Committee Members must complete disclosure documentation providing current contact information and disclosure of potential conflicts of interest.

**Conflicts of Interest as defined by ACCME**

Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria for promotional speakers’ bureau, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit.

Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. Contracted research includes research funding where the institution gets the grant and manages the funds and the person is the principal or named investigator on the grant.

ACCME considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.
Learning Outcomes

Learning outcomes should be written in terms of measurement; e.g., “the learner will be able to define, recite, identify, describe,” etc. Verbs that are open to many interpretations should be avoided.

Keep the following important points in mind when writing learning outcomes:

- Learning outcomes should indicate what the participant will be able to do at the conclusion of the activity.
- Outcomes should be derived from the overall purpose of the activity and should reflect the goals of changing the learner’s knowledge, competence or patient care related outcomes.
- An average of two to three outcomes per presentation hour is realistic.
- Outcomes must be written with measurable verbs (see below).
- Vague or easily misinterpreted verbs that should be avoided include know, understand, learn, appreciate, believe, etc.

Suggested Verb List for Writing Measurable Learning Outcomes (Objectives)

<table>
<thead>
<tr>
<th>KNOWLEDGE</th>
<th>COMPREHENSION</th>
<th>APPLICATION</th>
<th>ANALYSIS</th>
<th>SYNTHESIS</th>
<th>EVALUATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>cite</td>
<td>associate</td>
<td>apply</td>
<td>analyze</td>
<td>arrange</td>
<td>appraise</td>
</tr>
<tr>
<td>count</td>
<td>classify</td>
<td>calculate</td>
<td>appraise</td>
<td>assemble</td>
<td>assess</td>
</tr>
<tr>
<td>define</td>
<td>compare</td>
<td>complete</td>
<td>contrast</td>
<td>collect</td>
<td>choose</td>
</tr>
<tr>
<td>describe</td>
<td>report</td>
<td>restate</td>
<td>criticize</td>
<td>specify</td>
<td>critique</td>
</tr>
<tr>
<td>draw</td>
<td>compute</td>
<td>demonstrate</td>
<td>debate</td>
<td>compose</td>
<td>determine</td>
</tr>
<tr>
<td>identify</td>
<td>contrast</td>
<td>dramatize</td>
<td>detect</td>
<td>construct</td>
<td>estimate</td>
</tr>
<tr>
<td>indicate</td>
<td>describe</td>
<td>employ</td>
<td>diagram</td>
<td>create</td>
<td>evaluate</td>
</tr>
<tr>
<td>list</td>
<td>differentiate</td>
<td>examine</td>
<td>differentiate</td>
<td>design</td>
<td>grade</td>
</tr>
<tr>
<td>name</td>
<td>discuss</td>
<td>illustrate</td>
<td>distinguish</td>
<td>detect</td>
<td>judge</td>
</tr>
<tr>
<td>point</td>
<td>distinguish</td>
<td>interpret</td>
<td>experiment</td>
<td>formulate</td>
<td>measure</td>
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<tr>
<td>read</td>
<td>explain</td>
<td>interpolate</td>
<td>infer</td>
<td>generalize</td>
<td>rank</td>
</tr>
<tr>
<td>recite</td>
<td>estimate</td>
<td>locate</td>
<td>inspect</td>
<td>integrate</td>
<td>rate</td>
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<tr>
<td>recognize</td>
<td>express</td>
<td>operate</td>
<td>inventory</td>
<td>manage</td>
<td>recommend</td>
</tr>
<tr>
<td>record</td>
<td>extrapolate</td>
<td>order</td>
<td>question</td>
<td>organize</td>
<td>revise</td>
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<tr>
<td>relate</td>
<td>restate</td>
<td>review</td>
<td>separate</td>
<td>plan</td>
<td>score</td>
</tr>
<tr>
<td>select</td>
<td>interpret</td>
<td>predict</td>
<td>summarize</td>
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<tr>
<td>state</td>
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<td>summarize</td>
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<td>schedule</td>
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<td>tabulate</td>
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<td>write</td>
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<td>report</td>
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<tr>
<td>translate</td>
<td>sketch</td>
<td>solve</td>
<td>translate</td>
<td>use</td>
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<td></td>
<td></td>
<td>utilize</td>
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</tbody>
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Slide Presentation Requirements: Compliance Slides
If your presentation will use PowerPoint slides, please insert the slides shown below. If you will not use slides for your presentation, the verbal equivalents of the following information should be conveyed to participants before you begin.

- Title slide with name, credentials and affiliation of all authors and/or presenters
- Disclosures (sequence: after title slide)
- Learning outcomes (objectives) (sequence: following the disclosure slide)
- How to earn credit (should be placed at the end of the slide deck)

Title and Faculty: Slide 1

<table>
<thead>
<tr>
<th>Presentation Title</th>
<th>Mary Smith MD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name, Credentials, Position or Affiliation</td>
<td></td>
</tr>
</tbody>
</table>

Disclosures: Slide 2

<table>
<thead>
<tr>
<th>Disclosures</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Presenter’s name) has no relevant financial or non-financial interests to disclose.</td>
</tr>
<tr>
<td>Or</td>
</tr>
<tr>
<td>(Presenter’s name)</td>
</tr>
<tr>
<td>• Receives grant or research support from: (company name)</td>
</tr>
<tr>
<td>• Is a member of the Speaker’s Bureau for: (company name)</td>
</tr>
<tr>
<td>• Is a member of the Advisory Board for: (company name)</td>
</tr>
</tbody>
</table>

Disclosure will be made when a product is discussed for an unapproved use.

This continuing education activity is managed and accredited by AffinityCE in cooperation with NABIS. AffinityCE staff and NABIS Staff, as well as Planners and Reviewers, have no relevant financial or non-financial interests to disclose. Conflict of Interest when present have been resolved through peer review.

Commercial Support was not received for this activity.

Learning Outcomes or Objectives: Slide 3

<table>
<thead>
<tr>
<th>Learning Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>At the conclusion of this activity, the participant will be able to:</td>
</tr>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
<tr>
<td>3.</td>
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</tbody>
</table>

Last Slide in the Presentation

<table>
<thead>
<tr>
<th>How to Claim CE Credit</th>
</tr>
</thead>
<tbody>
<tr>
<td>If you would like to receive continuing education credit for this activity, please visit:</td>
</tr>
<tr>
<td>nabis cds pesgce.com</td>
</tr>
</tbody>
</table>
Some Final Thoughts to Consider

The Dos and Don’ts of Preparing a CME/CE Presentation

Your CE presentation must be evidence-based, fair-balanced, and nonpromotional. Please consider the following when preparing your slides.

DO
1. Provide information based on accepted, well-documented and referenced science
2. Cite current references
3. Remember that the audience is multidisciplinary
4. Let your audience know when you are discussing unapproved products or uses
5. Use case studies when possible
6. Encourage participation
7. Include the required CE slides or verbal equivalents if not using slides

DON’T
1. Use brand names
2. Include logos of commercial interests on your slides
3. Promote or favor a product or service
4. Recommend unapproved therapy