



CME Accreditation Surveyor Training Manual 2015

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I. Preparing to be a Surveyor

Introduction to ACCME and ArMA Accreditation Surveyor Competencies

Surveyors are a vital component of the Arizona Medical Association's (ArMA) accreditation process. ArMA surveyors represent ArMA during the interview encounter and inform the accreditation process for every provider. ArMA expects a surveyor's performance to contribute to a successful survey and ultimately help ArMA maintain a valid accreditation process. To this end, *competencies* have been adopted from the Accreditation Council for Continuing Medical Education's (ACCME) survey process to more explicitly articulate the areas of knowledge and skill the ACCME and ArMA expect their surveyors to possess.

The ACCME competencies were developed by considering surveyors' best practices. They represent knowledge areas, skills, and behaviors that have contributed to successful surveys.

ArMA also communicates to accredited CME providers the explicit knowledge and skill set providers can expect their survey team to possess. In these ways, surveyor competencies will be used as part of ArMA's measurement of equivalency with ACCME processes.

It is ArMA's goal that those participating in Surveyor Training will refer to these competencies for self-reflection and self-assessment. The competencies should serve as a benchmark for how you will perform as an ArMA surveyor. If you identify competency areas in which you would like to improve, it is ArMA's intent that this manual as well ACCME resources will assist you.

ArMA's CME Committee looks forward to working with all surveyors on the maintenance of the knowledge and skills necessary to meet the competencies.

ACCME and ArMA Surveyor Competency Areas

KNOWLEDGE: Accreditation knowledge is needed so that surveyors are in a position to lead a thoughtful and informed dialogue with the CME provider. Appropriate accreditation knowledge supports effective data collection and reporting in a valid decision-making process.

PROFICIENCY: Surveyors are expected to be able to successfully integrate the data collected from a survey into a report for the ArMA CME Committee. Surveyor proficiency requires applying knowledge of accreditation to the data presented by the provider to determine if additional data is required. When additional data is needed, surveyors must have the expertise to know what questions to ask or what data to collect. In addition, surveyors are expected to have basic computer skills that will enable them to complete surveyor reports and access relevant information via the Internet.

BEHAVIOR & PROFESSIONALISM: ArMA expects surveyors to engage in professional behaviors while involved in the accreditation process of a CME provider. This professionalism extends beyond the direct involvement with the provider to interactions with a co-surveyor and ArMA staff. Surveyors are expected to demonstrate appropriate interpersonal and communication skills during the survey process. ArMA also requires its surveyors to demonstrate honesty and maintain as confidential a provider's information and data that are collected during the accreditation process.

ArMA and ACCME Surveyor Competencies

Competency Area 1: Knowledge	
Competency 1.1	A surveyor must maintain knowledge of ArMA's Accreditation Criteria and Policies¹

Competency Area 2: Proficiency in Practice	
Competency 2.1	A surveyor must be able to apply knowledge of ArMA's Accreditation Criteria and Policies and their current interpretations when gathering data from a provider and reporting survey findings.
Competency 2.2	A surveyor must be able to gather data from the provider's self-study report, activity files, and the interview.
Competency 2.3	A surveyor must complete surveyor forms in an appropriate and timely manner.
Competency 2.4	A surveyor must use effective verbal and written communication before and during the survey interview.
Competency 2.5	A surveyor must have access to a computer to allow them to receive communication from ArMA and use ArMA and ACCME's online resources.
Competency 2.6	A surveyor must have computer skills sufficient enough to allow them to communicate electronically with ArMA. Each surveyor is expected to be able to complete reports using current technologies. Surveyors should also possess the skills that enable them to participate in online training activities through ArMA and the ACCME.
Competency 2.7	A surveyor must have computer skills sufficient enough to allow them to access and review providers' internet CME activities as a part of the accreditation process.

¹ As posted on www.accme.org

Competency Area 3: Behavior and Professionalism

Competency 3.1 A surveyor must actively engage in the identification and resolution of any conflicts of interest that could occur in the accreditation process.

ArMA expects a surveyor to:

1. disclose any financial relationships with an accredited provider that would create a conflict of interest in the accreditation process (e.g., employment).
2. disclose any fiduciary relationships with an accredited provider that would create a conflict of interest in the accreditation process (e.g., board membership).
3. recuse oneself from participation in a survey for a provider where financial, fiduciary, or other relationship (e.g., competitor) exists that could create a conflict of interest in the accreditation process.
4. not engage in communication with a provider after a survey.

Competency 3.2 A surveyor must demonstrate preparedness for the survey encounter.

ArMA expects a surveyor to:

1. review the provider's self study report to an extent that allows the surveyor to engage in discussions with a co-surveyor and the provider.
2. communicate with a co-surveyor prior to the survey to the extent that allows equitable and appropriate involvement in the survey encounter.
3. respond to communication when contacted by ArMA or a co-surveyor.

Competency 3.3 A surveyor must maintain the role as a data collector for ArMA during the survey encounter.

ArMA expects a surveyor to:

1. not offer consultative advice on how to do CME or how to comply with ArMA practices. If asked, surveyors should refer providers to ArMA staff.
2. not say, "*I'm taking off my surveyor hat*" to leave the surveyor role and assume the position of a CME colleague in order to engage in discussions about the provider's practice of CME.

Competency 3.4 A surveyor must demonstrate respect for individuals and organizations in their dealing with providers, co-surveyors and ArMA staff.

ArMA expects a surveyor to:

1. demonstrate respect for cultural, ethnic, and religious diversity. Sensitivity towards special needs should always be extended.
2. demonstrate respect for a provider's unique resources and circumstances.
3. demonstrate respect for all CME provider types.
4. not articulate or demonstrate bias against a provider in the accreditation process because of its organization type.

Competency 3.5 A surveyor must demonstrate honesty in the forms submitted to ArMA.

Competency 3.6 A surveyor must maintain as confidential any data and information from a provider reviewed and collected during the accreditation process.

Competency 3.7 A surveyor must appropriately manage the power relationship between the provider and surveyor.

ArMA expects a surveyor to:

1. describe to the provider a surveyor's role as a data collector for ArMA and not as the decision maker.
2. not make requests or comments that exacerbate the power relationship. A surveyor must not make special requests or comments based on personal preferences. For example, a surveyor must not critique the formats of the provider's self study report, brochures, or other organizational materials.

Competency 3.8 A surveyor must participate in surveyor professional development activities and training exercises designed for all surveyors. The goal of surveyor professional development is to help surveyors maintain or improve upon the knowledge and skills articulated within the surveyor competencies.

Competency 3.9 A surveyor must comply with ArMA policies and requirements.

ArMA expects a surveyor to:

1. abide by ArMA's travel policy and submit expense reimbursement forms within 14 days of a survey.
2. provide ArMA with Conflict of Interest Information on an annual basis and as it changes. A surveyor must attest on an annual basis that ArMA's Conflict of Interest Policy will be followed.
3. submit materials and forms to ArMA Accreditation staff within 14 days of completing a survey.
4. be available to conduct a minimum of one ArMA survey events per year.

ACCME Surveyor Curriculum for Professional Development

The following is a curriculum and website links developed specifically for training [ACCME surveyors](#). ArMA CME Committee feels this to be an excellent resource for ArMA surveyors but acknowledges that some of the material may be specific to internal ACCME processes. The ArMA CME Committee has attempted to identify any specific references to alert ArMA surveyors to any differences of [internal](#) process.

As a vital component of the ACCME's Accreditation process, the ACCME is committed to supporting surveyors in the important work that they do. To this end, the following curriculum has been developed as resource for ACCME surveyor professional development.

This orientation curriculum is designed around the [ACCME Surveyor Competencies](#) which serve as a benchmark for how you will perform as an ACCME surveyor. For each of the three competencies educational resources are listed to support you as you begin your role as an ACCME surveyor.

For your convenience, we have indicated the time required to engage in each step. You may choose to participate in each of the resources below...or only those that meet your current professional development needs. ACCME Staff is available to support you in your role as a surveyor at any time.

Competency 1: Knowledge (Approx. 30 minutes)

1. Review [ACCME's Accreditation Criteria](#) (including the [Standards for Commercial Support](#)) and the [ACCME Policies](#) (15 minutes)
2. Peruse [Ask ACCME Q & A](#) (or read the printed transcripts) Frequently Asked Questions for answers to commonly asked questions about ACCME accreditation.

Here are a few suggested videos to get you started: (15 minutes)

- [Language of Expected Results in Mission Statement](#)
- [Integrating Accredited CME into Individualized, Self-Directed Learning Project Types](#)
- [Documenting Professional Practice Gaps](#)
- [Explaining Knowledge, Competence, Performance, and Patient Outcomes](#)
- [Accreditation with Commendation - Criteria Overview](#)

Competency 2: Proficiency in Practice (Approx. 50 minutes)

1. Explore the [ACCME Examples of Compliance and Noncompliance](#) which offers descriptions of provider compliance and noncompliance for each Criterion. (20 minutes)
2. Watch the [Tips for the Accreditation Process](#) series of four 2-3 minute videos. This series offers tips for new surveyors and lets providers know what they can expect from the accreditation process. (10 minutes)
3. Refer to ArMA staff for information about collaborating with your co-surveyor, materials to support your review, information on completing and submitting forms, and more. (10 minutes)

Competency 3: Behavior and Professionalism

1. Read the materials for the current decision cohort [*refers to internal ACCME process*] so that you are familiar with the process and outline that the provider is following. These materials will be provided by ArMA staff in advance of the scheduled site survey.
2. Identify **Suggestions for a Successful ACCME Accreditation Interview** by reviewing this guide offering helpful tips to prepare, conduct, and report on an accreditation interview. (5 minutes)
3. Stay abreast of accreditation updates, ACCME news and tools and resources by reading [The ACCME Report](#). (5-10 minutes)
4. Reach out to ArMA staff with any questions you may have about your role, ArMA's expectations of surveyors or if you would like additional resources and training.

Interview Observation Guide - Surveyor Engagement with Provider

The purpose of this portion of the manual is to direct the interview observation portion of your ArMA Surveyor Training. During the course of your training, you will participate in an on-site interview. During this observation, focus on the survey team's engagement with the provider. Please keep in mind that you are observing the interview for the purpose assessing your own competencies related to performance in practice and not to critique the survey team conducting them.

The ArMA surveyor training manual discusses surveyor competencies related to Behavior and Professionalism. During your interview observation, consider the following questions:

- 1) How did the surveyors establish their role in the survey interview process? Would you employ a similar strategy or something different?

- 2) Did the surveyors create an atmosphere that encouraged dialogue? How?

- 3) What strategies did the surveyors use to elicit additional information from the provider? Did they change their strategy throughout the course of the interview?

- 4) Were all of the questions posed by the survey team directly related to ArMA's accreditation requirements or self study process? Were the questions during the interview phrased in a neutral manner?

- 5) Did the surveyors appear to be prepared for the interview? What are some strategies that could help you prepare for a survey interview?

- 6) Did the surveyors face a situation where the provider was seeking consultation or collegial opinions? If so, how did they manage the situation? Is it possible that the provider would feel compelled to make changes as a result of the interview discussion?

- 7) How did the surveyors demonstrate respect for their co-surveyor and the provider?

II. Assuming Interview Team Roles and Responsibilities

If you are identified as Chair, you...

- Head the team.
- Serve as ArMA's Accreditation Staff contact to establish the interview agenda.
- Communicate with co-surveyor prior to the interview to compare and discuss observations and to determine appropriate interview strategies and questions.
- Manage interview discussions. Complete surveyor report and documentation review and review forms and ensure that all required forms are submitted to ACCME within a week following the interview.

If you are identified as Co-surveyor, you...

- Conduct a review of the self study report. Complete documentation review and review forms for assigned activities.
- Compare and discuss with Chair prior to the interview your observations and questions based on your review of self study report and activity materials.

III. Making Logistical Arrangements

ArMA utilizes the on-site survey as its standard accreditation interview format; however, other interview formats are available, including a face-to-face meeting at ArMA offices, or conference call. On site interviews typically average four to five hours.

When planning on any interview format, surveyors should make travel and calendar arrangements as soon as possible. ArMA's Accreditation staff will assist you with these arrangements. Please review [ArMA's Reimbursable Expenses Policy](#). You must notify ArMA staff for prior approval of any special requirements or extenuating circumstances (such as an additional hotel night, car rental, etc). All surveyors must submit a reimbursement form within thirty days of the interview.

When doing teleconference or face-to-face interviews at ArMA headquarters in Phoenix, surveyors should advise ArMA staff of any special needs or dietary requirements so appropriate arrangements can be made.

IV. Materials to Support Your Review

You will receive an email with document links or a shipment of materials, which will include the provider's self study report and the documentation review files assigned to you approximately two-four weeks before the scheduled interview.

Increasingly, providers choose the option to submit documentation review files electronically as bookmarked PDF files. If documentation review files are submitted electronically, you will receive an email with documentation links, or a USB drive in your shipment that contains the PDF documentation review files.

The *Surveyor Report Form* and *Documentation Review Forms* will also be included in the materials package, provided by ArMA Accreditation Staff. General resource materials, such as policy documents, examples of compliance, suggested questions and language, and reimbursement information, are accessible in this manual and on ACCME's website.

V. Completing the Surveyor and Documentation Review Report Forms

When completing the Surveyor Report Form:

The Chair is responsible for working with ArMA staff to complete and submit the *Surveyor Report Form*.

Surveyors should consider the provider's narrative and examples in the description. If the provider does not describe (through either or both the narrative and examples), surveyors should explain in the comments field what was observed and why the description falls short. For example, a surveyor may write that "the provider's narrative explained a process for independence but the examples indicated that commercial interests were allowed to control content by approving all slide presentations prior to use in CME activities."

Surveyors should record responses for only the Criteria in which "Level" of Accreditation a Criterion corresponds.

Surveyors should record information gathered verbally at the interview in the box "In the Interview." General comments regarding each Criterion, or documentation review findings related to each Criterion, should be recorded in the "Surveyor Comments" box for each criterion.

In drafting language for the report, the Chair and Co-Surveyor should work together and try to achieve consensus. In cases where there are differences of opinion, both viewpoints should be included in the report. For example, this could help to clarify variance in documentation review findings.

Please do not write in the fields designated "FOR ArMA CME Committee USE ONLY."

When completing Documentation Review Forms:

Consider all components of a Criterion before determining a response. For example, when determining if the activity materials demonstrate that the provider *incorporated...needs (knowledge, competence or performance) that underlie the professional practice gap of its own learners*, a surveyor must still consider if (a) there is a professional practice gap, (b) the gap is of the provider's own learners, (c) the needs identified underlie those gaps, and (d) those needs were incorporated into the CME activity. If all components are not present in the provider's materials, the surveyor should respond "no" and link the explanation of what they did see to what component of C2 was not found.

Choose one of four answer options when answering questions for Criteria 1-11 and ArMA Policies on the documentation review form:

Y = Yes, there is evidence that the provider's practice meets the ArMA accreditation requirement.

N = No, the evidence does not demonstrate that the provider's practice meets the ArMA accreditation requirement.

ENP = Evidence Not Provided (i.e. the provider included NO evidence in the file to demonstrate compliance with the ArMA accreditation requirement.) ***do not use this response for C1-15 for initial applicants) ***

NA = Not Applicable and requires an explanation.

When reviewing activity materials for an initial applicant, a surveyor should keep in mind that the initial applicant may have chosen not to include or address Level 2 Criteria. If there *is* evidence, then a response of **Y** or **N** is appropriate. If the initial applicant did not provide any evidence, **NA**

is the appropriate response. The corresponding comment for the **NA** response is that the provider is an initial applicant. Likewise, for any provider that does not produce activity types for which there is an ArMA Policy question, **NA** is the appropriate response.

ArMA is reserving the **ENP** response for providers that (1) are seeking reaccreditation and/or (2) that produce an activity type for which there is an ArMA Policy question BUT included no evidence in the file to demonstrate compliance.

For questions pertaining to Accreditation with Commendation Criteria (C16-C22), the following answer options are available:

Y = Yes, there is evidence that the provider's practice meets ArMA's accreditation requirement.

N = No, the evidence does not demonstrate that the provider's practice meets ArMA's accreditation requirement.

ENP = Evidence Not Provided (i.e. the provider included NO evidence in the file to demonstrate compliance with ArMA's accreditation requirement.)

VI. Sharing Observations with your Co-Surveyor

Prior to the interview, it is very important to confer with your co-surveyor and share your observations.

One way to facilitate pre-interview communication is for both surveyors to share their completed forms with one another. The chair, after reviewing the completed forms, should identify overall trends and clusters, formulate questions for the interview, and develop an overall question-asking approach for the team to use during the interview.

In another example, if, after reviewing the forms, the co-surveyor recognizes that the chair's answers for C2 are always "no," although the co-surveyor's responses to the same questions were always "yes," then the co-surveyor asks the chair for a brief discussion on Criterion 2 interpretations to ensure that both surveyors have the same understanding and are applying ArMA's Criteria appropriately.

These points can be used when sharing information:

- 1) Observations of the provider's descriptions (from the self study report)
- 2) Observations of the provider's performance in practice (from the documentation review)
 - a. Trends (e.g., improvement during term)
 - b. Clusters (e.g., problems in a certain activity type)
 - c. Need to request additional materials
- 3) Potential interview questions for provider

VII. Conducting the Interview: General Information

Business attire is suggested for surveyors doing on-site, teleconferencing or face-to-face interviews.

Have the self study report and any files you may want to discuss with the provider readily available for reference.

Be the provider's advocate to ensure complete information goes forward, but do NOT advise, consult or educate the provider regarding CME development or accreditation issues.

Determine in the interview if additional evidence would help ArMA determine a compliance finding and if it is retrievable or not.

If you determine specific additional evidence is retrievable, indicate under the appropriate criterion that additional materials exist that would help ArMA determine a compliance finding and explain what materials should be requested and why the materials are essential for the review of the provider's CME program.

VIII. Conducting a Successful Interview

BEFORE

- *Contact* your co-surveyor as soon as possible for introductions, sharing of review styles and calendars, and setting dates for collaborative pre-survey work.
- *Review* materials for completeness as soon as received and *notify* ArMA staff of any missing materials.
- *Collaborate* with co-surveyor to share findings and observations and to *develop* the interview strategy together.
- *Prepare* for your interview.
- *Block* time on the day of the interview for a pre-interview discussion and post-interview discussion with co-surveyor.

Tip for conference calls ...You won't be "seeing" your co-surveyor if your interview is a conference call. Your pre-interview work will need to include extra time for discussions about interview styles.

DURING*

- *Organize* your questioning in structured segments.
 - Tell the provider what you will be inquiring about (e.g., First, we'll talk about your purpose and mission and transition to the 2006 Accreditation Criteria, and then, we will talk about your CME activity planning...)
 - Talk about it, linking the discussion to ArMA's Criteria (e.g., Keeping in mind that the ArMA's 2006 Criteria call for providers to identify improvements to help better meet the CME mission...can you talk about...)
 - Tell the provider what you have talked about (e.g., Thank you. I think that we've completed our discussions on your management of commercial support, now we'll be moving on to...)
- *Plan* pauses and clean transitions to the next segment (e.g., Before we leave our discussion on your CME purpose and mission, is there anything else you'd like us to know?)
- *Exaggerate* your "pauses" after questions and between sentences and segments so people can interject, or respond.
- *Seek* verbal feedback or reaction where normally non verbal communication would be present.
- *Listen reflectively* when you are leading the discussion and when you are not –
 - Be prepared for a question from the provider, or your co-surveyor, at all times.
 - Use phrases like "I am hearing you say..." or "If I understand correctly, you are saying that..."
 - If asked if you have a question, do not just say "no"...say "No, I have the information I need on <topic just discussed>."

Tip for conference calls...Without visual cues, you may need to be more expressive and verbal. Get the names of individuals who will be talking during the call and acknowledge them by name during the discussion. You may need to “take the pulse” of the provider periodically, asking them to explain their understanding of the discussion. Use the mute button, if a sudden noise begins to cause disruption. Turn off or forward other telephones in the room.

AFTER

- *Discuss* with your co-surveyor to de-brief, affirm findings and talk about new information.
- *Collaborate* on the completion of reports, including request for any additional materials.
- *Submit* reports and contact ArMA if there are any special issues that need to be discussed.

Tip for conference calls...To help maximize collaboration, complete reports during a separate phone call with your co-surveyor, referring to and addressing questions in real time.

**See the attached document “Tips for Language to Use During Accreditation Interviews”*

IX. Completing Forms and Returning Materials to ArMA

Submit forms to ArMA AFTER you have had the opportunity to incorporate any new information/clarification that may have emerged following discussion with the provider during the interview and AFTER all forms have been completed by both the chair and co-surveyor.

For teleconference or face-to-face interviews (at ArMA), please return materials the week prior to the interview date. Materials may be submitted electronically via email or by fax to ArMA Accreditation staff, or shipped. If shipping the materials less than a week prior to the interview date, please ship using an Overnight option. If you have any questions about shipping and which option to use, please contact ArMA staff for assistance.

For teleconference or face-to-face interviews, please complete the surveyor report and documentation review forms while at ArMA offices and leave all survey materials with ArMA Accreditation staff. If additional time is needed, please inform staff prior to your departure. Staff will work with you to determine a deadline for returning materials to ArMA. The materials are required in subsequent levels of the review process.

For conference call and on-site interviews, please retain all survey materials until given instructions to return the materials by ArMA staff. It is important to retain your materials, because ArMA staff may follow up with you to seek clarification regarding your reports.

X. Contacting ArMA Staff for Assistance

Always feel free to contact ArMA staff for assistance. The main point of contact for Accreditation surveyors is:

Sharla Hooper
Associate VP, Communications and Accreditation
Arizona Medical Association
Phone: (602) 347-6908
Email: sharla@azmed.org

ACCME Tips for Language to Use During Survey Interviews

Introduction

Introduce yourself and ask your co-surveyor to make a similar introduction.

“My name is Jane Doe and I am the Director of Continuing Education at General Hospital, an ACCME-accredited provider in Chicago, IL.”

Avoid sharing: Background, history, experience

Put the provider at ease; explain your role as a listener, observer—facilitating the provider “telling their story” to the ACCME.

“I have been on your side of the table and understand the survey interview can be anxiety producing. Our role as surveyors is not to “test” you, nor to make a determination of your program’s Compliance with ACCME Criteria and Policies. Rather, we are observers charged with helping you to provide the ACCME the clearest possible picture of your CME program. Today’s interview is only one part of a multi-step review process conducted by trained volunteers and ACCME staff. We appreciate the opportunity we have to help you put your best foot forward...”

Ask the provider to make their introductions.

(You may want to take notes on names and roles as these introductions are made.)

Prepare the provider for what the interview will cover.

“We will focus our time on areas where we have questions or need additional information. There may be areas where we ask more questions than others, which is just to make sure we have a clear understanding of your activities and CME program. To facilitate the conversation we will state our names when speaking and use page numbers when referring to documentation.”

“Our strategy for the interview is... (Explain to the provider the strategy that you and your co-surveyor have planned for the interview).”

Closing

Explain to the provider that they have addressed all of your questions.

“We have now covered all of the areas that we were looking to explore and clarify. Thank you for helping us learn more about your program and processes.”

Give the provider an opportunity to provide additional information.

“Before we complete the interview, is there anything other information you would like to share with us about your program?”

Mention any additional materials that were discovered as part of the interview.

“During our discussion about... {item}, you mentioned {materials} that may contribute to your evidence of {your process; eg, “changes that are currently underway”}. We will let the ACCME know that these materials were identified during the interview, and they will be in contact with you to request the documentation.”

Close the interview and tell the provider what comes next.

“Thank you, again, for providing us with additional information about your program today. Your program will be reviewed by the Accreditation Review Committee at its next meeting and then by the ACCME Board. You will receive a written decision following the board’s decision.”

Transitions

General transitions.

Use:

"Thank you, that helps me understand your process..."

"That answers my question, thank you..."

"Thank you, and can you tell me more about..."

Avoid words or phrases that could imply compliance:

Great, good, very good, wonderful...

"Thank you, that is exactly what I was looking for."

Transition to a new topic.

Use:

"I've asked all of the questions I had for Criterion 2, do you have anything to add before we move on?"

"Now, let's take a look at your process for disclosure, I would like to know how you..."

Avoid:

"Great, that addresses Criterion 3, let's move on."

"Wonderful, that is a very unique process."

"That sounds like an exciting project, tell me more about how you engaged your physicians in that activity."

Repeat what you heard to ensure you understood accurately.

"What I am hearing is (topic just discussed), did I understand that correctly?"

When the provider asks a question back or wants consultative advice.

"I am asking several questions so that I have a clear idea of how you carry out the evaluation of your program. You've described it clearly for me."

"I can understand why you would be interested in that information. I am here to gather information on your program today. You may want to check in with the ACCME to learn more about managing commercial support."

"I have the information I need, thank you."

Offering compliments without implying compliance.

"Accredited CME is a strategic asset for improving care and an important partner for change to your physicians. I would like to recognize the service you are providing to your physician learners by supporting an accredited CME program."

"I can appreciate the efforts that go into conducting the self study of a CME program. I hope that you have found the process a valuable exercise for your organization."

When the provider is not sure what you are asking.

"Please describe your process for collecting disclosure information from those in control of content."

"Can you describe for me how you identify disclosure information for planners and/or reviewers?"

"Thank you, now I would like to know more about..."