



the schwartz center
FOR COMPASSIONATE HEALTHCARE

Schwartz Center Rounds® Continuing Medical Education Toolkit Overall planning document for the Schwartz Center Rounds program as a “Regularly Scheduled Series”

The Accreditation Council for Continuing Medical Education (ACCME) provides national oversight of Continuing Medical Education (CME) standards. In order to award CME credits to physicians, CME providers must be accredited by the ACCME or a state organization recognized by the ACCME (such as a state Medical Society). The institution or organization that awards CME credits to physicians is responsible for overseeing the planning, implementation and evaluation of all CME activities. CME credit can be awarded to physicians who attend the Schwartz Center Rounds. In Massachusetts, the Schwartz Center Rounds program qualifies for the awarding of CME risk management credits. CME requirements for physician re-licensure, including risk management requirements, differ from state to state.

The individuals who oversee CME activities in your institution are required to meet specific requirements with regard to the planning, implementation and evaluation of CME activities. They must also report how they identify and resolve any conflicts of interest with commercial entities that might influence any of these processes. This toolkit is designed to assist individuals who are responsible for institutional CME to meet planning and reporting requirements with regard to the Schwartz Center Rounds program as a “Regularly Scheduled Series” (RSS).

Organizations that accredit institutions to provide CME credits to physicians may request CME planning documents when they come around for a regularly scheduled CME accreditation site visit. The site visitors generally tell the designated institutional official and CME overseers in advance which activity files they wish to review. Please be aware that they may select a file for one Schwartz Center Rounds session as an activity within a “Regularly Scheduled Series.” It will be helpful to those who oversee CME in your institution if you are able to supply a brief account of your planning meetings, including dates and meeting minutes. Each section in this document may be included in your institution’s planning documents for CME accreditation and site visits.

Please note that much of the information in this document apply to Continuing Education Units (CEUs) for nurses and social workers. For the latter, bibliographic references are required for each session. CEUs must be applied for and obtained from accredited organizations according to the guidelines specific to each profession.

This document will discuss the following topics:

1. Brief description of the Schwartz Center Rounds program
2. Conflicts of interest
3. Practice gaps the program might address and how these are identified
4. Description of educational learning needs
5. Risk management CME credits
6. General learning objectives for the Schwartz Center Rounds program as a “Regularly Scheduled Series”
7. Educational strategies and resources used during the sessions
8. Evaluation of program effectiveness (with regard to changing physician knowledge, competence, performance and/or patient outcomes)
9. Advertising and promoting the program in your institution
10. Finances and budget

1. Brief description of the Schwartz Center Rounds program

The Schwartz Center Rounds sessions are a multidisciplinary forum where care providers and staff gather to discuss some of the difficult emotional and social issues that arise in caring for patients and their families. A case is presented by a panel of ~ 3 healthcare providers or staff representing multiple disciplines and points of view. A facilitator then engages the audience in an interactive discussion about the case and participants' shared experiences. Thousands of clinicians across the country, in the United Kingdom, and in Canada participate in the Schwartz Center Rounds program.

2. Conflicts of interest

To comply with ACCME Standards for Commercial SupportSM, all CME planners, developers of content for an educational activity, and speakers must submit a Financial Disclosure and Attestation Form to the institutional director of CME activities in advance of the activity. Any financial conflicts of interest with a commercial entity must be resolved by your designated institutional officer before the activity. Please visit the ACCME website to access this form: <http://www.accme.org/news-publications/publications/tools/disclosure-relevant-financial-relationships-sample-form>

2A. Financial Disclosure and Attestation Forms for Planners and Speakers

We suggest that you create, and update as appropriate, a list of all members of your Schwartz Center Rounds Planning Committee. Each member must complete a CME **Planner** Financial Disclosure and Attestation Form annually.

An example of a Planner Disclosure form can be found at the end of this toolkit.

In addition, speakers and/or panelists who have been invited to speak in advance of a Schwartz Center Rounds session must also complete a **Speaker** Financial Disclosure and Attestation Form. Your institution's CME coordinator will have these forms available and should keep signed forms on file. Practice gaps and learning needs that the Schwartz Center Rounds program might address

An example of a Speaker Disclosure form can be found at the end of this toolkit.

3. Practice gaps and learning needs that the Schwartz Center Rounds program might address

3A. General description of practice gaps and learning needs

You may use the following language in your Schwartz Center Rounds program CME planning documents if you wish:

Fostering effective communication and compassionate relationships among healthcare providers and with patients and families is a significant challenge in our complex healthcare system. A large body of evidence supports the impact of effective communication and relationships on patients, families, and healthcare providers. Some progress has been made in teaching and assessing communication and caring and compassionate attitudes in undergraduate and graduate medical education. However, the healthcare community has not systematically addressed the need to foster compassion, teamwork, support and relationship-centered care across the continuum of health professional education. As a regularly scheduled series, the Schwartz Center program provides an opportunity to enhance relationships and communication between patients, family members and providers, and among providers across disciplines and professions.

3B. Data sources used to identify these professional practice gaps

Peer reviewed literature:

Please see the Schwartz Center website for a summary of published research that supports the statements included in the paragraph above:

<http://jpx.sagepub.com/content/1/2/6.full.pdf>

<http://content.healthaffairs.org/content/30/9/1772.full?ijkey=HfkGZlyKWkIkA&keytype=ref&siteid=healthaff%2520>

Institutional sources of information about practice gaps:

CME accrediting organizations may ask how your institution incorporates the educational needs that underlie professional practice gaps into CME activities. You can demonstrate compliance with this requirement by briefly documenting in your Schwartz Center Rounds Planning Committee meeting notes how the topics selected for the sessions emerged from discussions with your participants and attendees. Planning Committee members often hear about challenging situations and cases from colleagues, peers, and house staff (when present). Additional topics are available on the Schwartz Center Member Community website.

4. Description of educational learning needs

Sections 4A – 4E below uses language and questions included in the self-study materials required by the Massachusetts Medical Society for institutional CME accreditation. These requirements may vary from state to state. You may share the language below with those responsible for overseeing CME in your institution if you wish.

4A. Is the identified educational need of the target audience related to:

(Check all that apply)

- Knowledge (facts and information acquired by a person through experience or education)
- Competence (having the ability to apply knowledge, skills, or judgment in practice if called upon to do so)
- Performance (what a physician actually does in practice)

4B. This activity is primarily designed to change:

- Competence** **Performance in Practice** **Patient Outcomes**

Although it's difficult to prove a causal relationship between discussions at Schwartz Center Rounds sessions and patient outcomes, the program was designed to foster relationship-centered communication and care which in turn have been associated with positive health outcomes (see research summary referred to above).

We have been told by CME accreditation representatives that we can assert that the Schwartz Center Rounds sessions are designed to change “competence” if we use end-of-session evaluation forms (see section on evaluation below). We can assert that the sessions are designed to change “performance in practice” if your institution is able to support this by surveying physicians three or more months after an individual session to ask about actual changes in practice resulting from that session.

4C. Of the ACGME/ABMS competencies listed below, please indicate the primary and secondary attribute related to this activity topic.

Primary: 1, 3

Secondary: 4, 6

- 1) Compassionate, Appropriate & Effective Patient Care
- 2) Medical Knowledge
- 3) Interpersonal & Communication Skills
- 4) Professionalism
- 5) Practice-Based Learning & Improvement
- 6) Systems-Based Practice

4D. The identification of *educational needs* was made free of the control of a commercial interest.

Yes

No

5. Will the planned activities address risk management issues?

Yes

No

Not all states require that physicians participate in CME activities that qualify for “risk management” credits.

Your institutional CME overseers and coordinators will know this. In the state of Massachusetts, physicians are required to document participation in at least 10 hours of Continuing Medical Education in activities defined as risk management. Physicians who can document attendance at Schwartz Center Rounds sessions can list these as “risk management” credit hours. The Massachusetts Board of Registration in Medicine defines risk management study as follows:

“It must include instruction in medical malpractice prevention, such as risk identification, patient safety and loss prevention, and may include instruction in any of the following areas:

- Medical ethics • quality assurance • medical-legal issues • patient relations • participation on peer review committees • utilization review that directly relates to quality assurance, or • non-economic aspects of practice management.”

6. General learning objectives for the Schwartz Center Rounds program as a “Regularly Scheduled Series”

As a result of participating in this activity, learners will be able to:

- a. Describe the social, emotional, ethical, and personal issues that arise during the care of patients and their impact on caregivers.
- b. Demonstrate enhanced communication with patients, family members and colleagues.
- c. Value opportunities to explore and understand multiple perspectives across disciplines.
- d. Value opportunities to provide and receive support from other members of our healthcare community.
- e. Model for learners behaviors of nonjudgmental listening and respect.

7. How will the educational strategies used during Schwartz Center Rounds sessions address these educational needs?

The Schwartz Center Rounds sessions are interactive, case-based, group discussions. Sites generally use panels of people involved in the case. The cases and topics arise from and are embedded in local/institutional cultures and contexts. These educational strategies promote active learning. Cognitive psychology research shows that when learners grapple with problems to discern underlying principles and meaning, they are more likely to transfer this learning to new contexts¹.

8. Evaluation

8A. Given these objectives, what changes in patient care do you expect as an outcome of this activity?

Our Schwartz Center Rounds national evaluation study² demonstrated the following self-reported healthcare provider outcomes:

- Improved understanding of the patient “as a whole person” within his/her unique context, and the impact of illness on the patient and family
- Increased insight into the psychosocial and emotional aspects of care
- Enhanced empathy and compassion
- Enhanced understanding of the perspectives of colleagues within and across disciplines and professions
- Improved teamwork
- Improved sense of support and decreased sense of work stress and isolation

8B. Evaluation forms

Your CME overseers may require the use of their standardized institutional evaluation forms. The Schwartz Center requests that you also use our evaluation form so we can track trends in the quality and impact of the program. A copy of the current evaluation form is available on the Schwartz Center Member Community website under “Materials” in the top menu bar.

8C. Analysis of changes in learners’ competence, performance or patient outcomes achieved as a result of the Schwartz Center Rounds program

CME accrediting organizations may require demonstration that your institution analyzes the above mentioned changes. You can supply a summary of responses to the evaluation form questions that ask attendees to rate the extent to which they learned new strategies to enhance patient and colleague interactions. You can also provide summaries of responses to the open evaluation form question asking attendees to list ways in which they will apply lessons learned to changes in how they relate to or communicate with patients and/or colleagues.

8D. Evaluation summaries

Please be sure to send your evaluation summaries to the Schwartz Center at Rounds@theschwartzcenter.org after each session as required in your membership agreement.

¹ Norman G. Teaching basic science to optimize transfer. *Medical Teacher*. 2009 Sept; 31(9): 807-811.

² Lown B, Manning C. The Schwartz Center Rounds: Evaluation of an Interdisciplinary Approach to Enhancing Patient-Centered Communication, Teamwork, and Provider Support. *Academic Medicine*. 2010;85:1073-81.

9. Advertising

9A. How is this activity to be promoted/announced?

(What means of communication/distribution?)

9B. To whom will this activity be promoted?

(What organizations/specialties/# of prospective learners?)

10. Finances and budget

10A. Funding source:

10B. Budgeted expenses per calendar year:

Food

Note any other remaining fees (e.g. for handout materials if any, CME fees, AV equipment, etc.)

Planning documents for individual Schwartz Center Rounds sessions: Documentation of individual activities fulfilling requirements for AMA PRA Category 1 Credit™

A. Schwartz Center Rounds session title: _____

B. Learning objectives:

Learning objectives refer to what CME and program planners anticipate participants will be able to **describe** (knowledge learned), **value or appreciate** (attitudes learned) and/or **demonstrate** (skills learned)

In writing learning objectives, use the stem:

By the end of this activity participants will be able to...

Then fill in the specific learning objectives that you hope to achieve with each individual Rounds session you are planning.

Example: CME planners listed the following learning objectives for a Schwartz Center Rounds session entitled, “When Worlds Collide,” a session about an immigrant family’s challenges in managing a complicated birth of a child in a country new to them.

Participants will be able to:

1. Describe how differences in cultural contexts affect patients’ beliefs about health and illness.
2. Describe the role of interpreters in bridging the diversity of languages and cultures among the patients we serve.
3. Demonstrate strategies for negotiating healthcare expectations with patients and families from different cultures.

C. Faculty information:

In addition to the Schwartz Center Rounds Physician Leader and Facilitator, the following people will be participating in this educational activity:

- 1.
- 2.
- 3.

D. Each panelist in the Schwartz Center Rounds session must complete a Speaker Disclosure Form and Attestation Statement.

An example of a Planner Disclosure form can be found at the end of this toolkit.

E. Resources and handouts

Although not necessarily required for CME credits, Schwartz Center Rounds leaders may provide articles related to the topic discussed at the session. Many relevant articles are listed on the Schwartz Center website:

<http://mydigitalpublication.com/publication/?i=232212>

<http://content.healthaffairs.org/content/30/9/1772.full?ijkey=HfkGZlyKWkIkA&keytype=ref&siteid=healthaff%2520>

F. Evaluation form

Please use the Schwartz Center Rounds evaluation form posted on the Member Community website under “Materials” in the top menu bar.

**HOSPITAL
CME PLANNER DISCLOSURE FORM**

_____ Hospital (name of your institution) is accredited by the _____ (name of accrediting organization) to award *AMA PRA Category 1 Credit(s)*TM to hospital programs developed to enhance and improve the practice of medicine. We endorse the ACCME Standards for Commercial SupportSM and seek clarification of each CME planner’s affiliation with any commercial entity. The purpose of this form is to help you identify and resolve all potential conflicts of interests that arise from financial relationships with any commercial* or proprietary entity that produces healthcare-related products and/or services relevant to the content you are planning, developing, or presenting for this activity. This includes any financial relationships active within the last 12 months, as well as known financial relationships of your spouse or partner.

NAME OF PLANNER: _____

CME ACTIVITY TITLE: _____

CME PROGRAM FOR YEAR: _____

On Behalf of Yourself and Your Spouse/Partner Please Check One of the Boxes Below

A. In keeping with the current ACCME Standards for Commercial SupportSM, I/we hereby disclose that I/we have a financial interest/arrangement or affiliation with the commercial organization(s) listed below:

Organization	Consultant	Grant or research support	Speaker’s bureau	Major stockholder	Other financial or material interest

B. I/we have no financial interests or relationships to disclose.

Signature of Planner

Date

* For the purposes of this form, do not consider providers of clinical service directly to patients to be a “commercial entity.”

Type of relationship may include: full-time or part-time employee, independent contractor, consultant, research or other grant recipient, paid speaker or teacher, membership on advisory committees or review panels, ownership interest (product royalty/licensing fees, owning stocks, shares, etc) or any other financial relationship.

ATTESTATIONS FOR CME PLANNERS

Please indicate your understanding of and willingness to comply with each statement below. They are based on requirements of the ACCME. If you have any questions regarding your ability to comply, please contact the course director as soon as possible. (A=Agree, D=Disagree)

A	D	
<input type="checkbox"/>	<input type="checkbox"/>	On this form I have disclosed all relevant financial relationships, and I will disclose this information to learners verbally (for live activities) and in print. I understand that if I refuse to disclose relevant financial relationships with commercial interests, I will be disqualified from any role involved in the planning, management, presentation, or evaluation of this Series.
<input type="checkbox"/>	<input type="checkbox"/>	The content and/or presentation of the information with which I am involved will promote quality or improvements in healthcare and will not promote a specific proprietary business interest of a commercial interest.
<input type="checkbox"/>	<input type="checkbox"/>	Content for this activity, including any presentation of therapeutic options, will be well balanced, unbiased, and to the extent possible, evidence-based. Opinions that are not supported by evidence, or are supported by limited or preliminary evidence will be so identified.
<input type="checkbox"/>	<input type="checkbox"/>	I have not and will not accept any honoraria, additional payments or reimbursements for this CME activity beyond that which has been agreed upon directly with the course director.
<input type="checkbox"/>	<input type="checkbox"/>	I understand that the course director may need to review my presentation and/or content prior to the activity, and I will provide educational content and resources in advance as requested.

A	D	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If I am presenting at a live event, I understand that a CME monitor may be attending the event to ensure that my presentation is educational, and not promotional, in nature. If I am providing recommendations involving clinical medicine, they will 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. All scientific research I refer to, report, or use in support of justification of a patient care recommendation will conform to the generally accepted standards of experimental design, data collection and analysis.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	For any drug/product discussed, the data must be objectively selected and presented, both favorable and unfavorable information about the drug/product must be fairly presented, and I will include information about reasonable alternative treatment options. Where there is a suggestion of superiority of one drug/product over another, this suggestion needs to be supported by evidence-based data.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If I am discussing specific healthcare products or services, I will use generic names to the extent possible. If I need to use trade names, I will use trade names from several companies when available, and not just trade names from any single company.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If I am discussing any drug/product use that is off label, I will disclose that the use or indication in question is not currently approved by the FDA.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If I have been trained or utilized by a commercial entity or its agent as a speaker (e.g., speaker's bureau) for any commercial interest, the promotional aspects of that presentation will not be included in any way with this activity.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If I am presenting research funded by a commercial company the information presented will be based on generally accepted scientific principles and methods, and will not promote the commercial interest of the funding company.
I have carefully read and considered each item in this form, and have completed it to the best of my ability.			

Signature

Date

ATTESTATIONS FOR CME SPEAKERS

Please indicate your understanding of and willingness to comply with each statement below. They are based on requirements of the ACCME. If you have any questions regarding your ability to comply, please contact the course director as soon as possible. (A=Agree, D=Disagree)

A	D		
<input type="checkbox"/>	<input type="checkbox"/>	On this form I have disclosed all relevant financial relationships, and I will disclose this information to learners verbally (for live activities) and in print. I understand that if I refuse to disclose relevant financial relationships with commercial interests, I will be disqualified from any role involved in the planning, management, presentation, or evaluation of this Series.	
<input type="checkbox"/>	<input type="checkbox"/>	The content and/or presentation of the information with which I am involved will promote quality or improvements in healthcare and will not promote a specific proprietary business interest of a commercial interest.	
<input type="checkbox"/>	<input type="checkbox"/>	Content for this activity, including any presentation of therapeutic options, will be well balanced, unbiased, and to the extent possible, evidence-based. Opinions that are not supported by evidence, or are supported by limited or preliminary evidence will be so identified.	
<input type="checkbox"/>	<input type="checkbox"/>	I have not and will not accept any honoraria, additional payments or reimbursements for this CME activity beyond that which has been agreed upon directly with the course director.	
<input type="checkbox"/>	<input type="checkbox"/>	I understand that the course director may need to review my presentation and/or content prior to the activity, and I will provide educational content and resources in advance as requested.	
A	D	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If I am presenting at a live event, I understand that a CME monitor may be attending the event to ensure that my presentation is educational, and not promotional, in nature. If I am providing recommendations involving clinical medicine, they will 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. All scientific research I refer to, report, or use in support of justification of a patient care recommendation will conform to the generally accepted standards of experimental design, data collection and analysis.
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I have carefully read and considered each item in this form, and have completed it to the best of my ability.

Signature

Date