

**DHP-AS Accreditation Standards for Continuing Professional  
Development (CPD) Provider Organizations**



## INTRODUCTION

The establishment of a Continuing Medical Education (CME) / Continuing Professional Development (CPD) accreditation system for the State of Qatar is designed to support learning and continuous professional development of all healthcare practitioners.

This document describes the accreditation standards for CPD provider organizations. These standards reflect a common set of values, principles and metrics endorsed by the Department of Healthcare Professions (DHP) Accreditation Section, the CPD Task Force and the CPD Accreditation Committee.

Organizations eligible to become accredited CPD providers include governmental or non-governmental academic institutions and governmental or non-governmental health-care facilities.

The accreditation standards for CPD provider organizations are designed to improve the competence and performance of healthcare practitioners, promote collaboration and be responsive to the health needs of patients and communities.

All accredited CPD provider organizations are expected to develop a range of educational activities and demonstrate how they have integrated and use the scholarly work of others to inform the design, development and implementation of their activities.

All CPD provider organizations, regardless of their infrastructure or sources of support must ensure their activities are developed to address assessed needs, use high quality scientific evidence and implement evaluation strategies to determine the achievement of intended outcomes across a range of competency domains. All CPD provider organizations must ensure their activities are free from external influence of competing (including commercial) interests.

Collectively the standards, criteria, survey questions, documentation requirements and the accreditation process are foundational to establishing a national CPD provider accreditation system that is transparent, accountable and responsive to all stakeholder organizations and to the public the health professions are privileged to serve.



**ACCREDITATION STANDARDS**

**Section 1: Purpose and Mission**

**Preamble**

Accredited CPD provider organizations are required to establish specific written goals or priorities to enable their CPD program to:

- enhance the continuing professional development of healthcare practitioners and/or inter-professional health teams; and
- address the health needs of communities.

**Standard 1.1 Organizational CPD Mission**

An accredited CPD provider organization must have a formally approved written mission statement for their CPD program that describes the:

- target audience(s);
- overall purpose or goals; and
- anticipated or expected results.

**Evaluation Criteria**

|                     |  |
|---------------------|--|
| Non-compliance:     | There is no approved written mission statement for the CPD program.  |
| Partial-compliance: | There is a written mission statement for the CPD program that has either not been formally approved or does not include all required elements.                                   |
| Compliance:         | There is a formally approved written mission statement for the CPD program that describes the target audience, overall purpose or goals and the anticipated or expected results. |

**Documentation**

- Provide a copy of the current CPD program mission statement. **(appendix A)**
- Provide minutes and/or other evidence demonstrating the process by which the CPD program mission statement was formally approved. **(appendix B)**

**Questions**

1. How frequently does your organization review and revise the CPD program mission statement?
2. What process was used to identify your CPD program mission statement?
3. How does the CPD program mission statement influence the selection and development of specific CPD activities?
4. How does your organization communicate the CPD program mission statement to stakeholders?



## Standard 1.2 Assessing Effectiveness

An accredited CPD provider organization has implemented a process, at least once every accreditation cycle, that:

- assesses the degree to which the organizational CPD mission statement has been achieved; and
- identifies opportunities and plans for improvement.

### Evaluation Criteria

|                     |   |
|---------------------|---|
| Non-compliance:     | There is no process established to assess the degree to which the CPD program’s mission statement has been achieved.  |
| Partial-compliance: | The process to assess achievement of the CPD program’s mission statement is either in development; has not been executed during this accreditation cycle; or does not enable the identification of opportunities and plans for improvement.   |
| Compliance:         | The process to assess the achievement of the CPD program’s purpose, goals or expected results in the CPD program’s mission statement has been implemented at least once during the current accreditation cycle and has enabled the organization to identify specific opportunities and plans for improvement. |

### Documentation

**For new applicants use examples from the past and re-applicants since the last accreditation cycle.**

- Provide a description of the type of activities included in the CPD Program. **(appendix C)**
- Provide at least two (to a maximum of four) examples of tools or processes the organization used to assess the degree to which the organizational CPD mission statement has been achieved. **(appendix D)**
- Provide a document that describes an area(s) identified for improvement. **(appendix E)**
- Provide at least one example of how the organization has developed a plan to address an area for improvement. **(appendix F)**

### Questions

1. What approach has the organization developed and implemented to assess the degree to which the organizational CPD mission statement has been achieved? How do the results from this evaluation influence the strategic directions and implementation of plans to improve the CPD Program?



### Standard 1.3 Scholarly Activities in Health Professions Education

An accredited CPD provider organization uses an evidence-informed approach to design, develop, and implement their CPD activities. This might include using published medical education/CPD literature, information presented at a conference or other venue, or other information shared by experts in the field.

#### Evaluation Criteria

|                     |   |
|---------------------|---|
| Non-compliance:     | The CPD provider organization does not use an evidence-informed approach to design, develop, and implement their CPD activities.  |
| Partial-compliance: | The CPD provider organization has developed but has not implemented a plan to use an evidence-informed approach to design, develop, and implement their CPD activities. |
| Compliance:         | The CPD provider organization has developed and implemented a plan to use an evidence-informed approach to design, develop, and implement their CPD activities.         |

#### Documentation

**For new applicants use examples from the past, and re-applicants since the last accreditation cycle.**

- Provide documentation for two CPD activities that your organization designed and implemented using an evidence-informed approach. This might include using published medical education/CPD literature, information presented at a conference or other venue, or other information shared by experts in the field. The documentation should include reference to the sources used and how this work was used to inform the development of the CPD activity. **(appendix G)**

#### Questions

1. What strategies, resources or infrastructure has the organization developed to promote a scholarly approach to the development of your CPD program?
2. Has the organization faced any challenges in using the medical education/CPD literature to inform the design, development and implementation of their CPD activities? If so, how has the organization attempted to address these challenges?



## Standard 1.4 Relationships with Sponsors

An accredited CPD provider organization has implemented written policies and procedures that address how relations with sponsors and/or exhibitors are managed to safeguard the planning process from the introduction of commercial bias.

### Evaluation Criteria

|                     |  |
|---------------------|--|
| Non-compliance:     | There are no written policies and procedures that describe how the CPD provider organization manages relationships with sponsors and/or exhibitors.  |
| Partial-compliance: | The written policies and procedures describing how the CPD provider organization manages relationships with sponsors have been developed but the implementation has not addressed all required elements. |
| Compliance:         | There are implemented written policies and procedures that describe how the CPD provider organization manages relationships with sponsors and/or exhibitors.   |

### Documentation

**For new applicants use examples from the past, and re-applicants since the last accreditation cycle.**

- Provide the policies and procedures that describe how funding arrangements with sponsors and/or exhibitors of CPD programs are managed. This must include the process by which funding is solicited, how funds are handled, and how sponsors are to be acknowledged in program materials. **(appendix H)**
- Provide sample correspondence with potential/confirmed sponsors from one recent CPD activity. This should include any letters of invitation to sponsor/exhibit, sponsorship/exhibitor prospectus, letters of confirmation of sponsorship or contracts established between the CPD provider organization and the sponsor. **(appendix I)**

### Questions

1. How often are the policies and procedures included in appendix H reviewed and updated?
2. How does the organization promote adherence to the policies and procedures in appendix H?



## Standard 1.5 Conflicts of Interest

An accredited CPD provider organization has implemented written policies and procedures that address how:

- individuals who develop the content for CPD activities document and disclose their real or potential conflicts of interest.
- identified conflicts of interest are managed.

### Evaluation Criteria

|                     |   |
|---------------------|---|
| Non-compliance:     | There are no written policies and procedures that describe how conflicts of interest are identified, disclosed, and managed.  |
| Partial-compliance: | The written policies and procedures describing how conflicts of interest are identified, disclosed, and managed are either in development, have been developed but not fully implemented or have not addressed all required elements. |
| Compliance:         | There are implemented written policies and procedures that describe how conflicts of interest are identified, disclosed, and managed.   |

### Documentation

**For new applicants use examples from the past and re-applicants since the last accreditation cycle.**

- Provide the policies and procedures used to collect, review and manage conflicts of interest. This should include the CPD provider’s conflict of interest declaration form, procedures for how potential conflicts of interest are managed by the scientific planning committee (or other), and how CPD program participants are made aware of an individual’s conflict of interest disclosure. **(appendix J)**
- Provide sample correspondence with speakers, authors, scientific planning committee members that demonstrates how the CPD provider’s policies and procedures have been implemented. **(appendix K)**

### Questions

1. Has the organization faced any challenges when gathering and managing disclosed conflicts of interest? If so, please describe.



## Section 2: Educational Planning, Implementation, and Evaluation

### Preamble

Accredited CPD provider organizations are required to demonstrate effective educational planning, implementation and evaluation processes of activities, programs or strategies they develop to facilitate learning and contribute to enhanced competence and performance of individuals, groups or teams.

### Standard 2.1 Assessing Needs

An accredited CPD provider organization uses multiple sources of data to identify the needs of its target audience(s) to plan educational initiatives. Sources of data include (but are not limited to) participant surveys, focus groups or evaluation forms; literature reviews; assessments of knowledge, competence, performance or quality of care provided to patients.

### Evaluation Criteria

|                     |   |
|---------------------|---|
| Non-compliance:     | The CPD provider cannot demonstrate the sources of data they use to identify the needs of members of its target audience(s) to plan educational activities.   |
| Partial-compliance: | The CPD provider uses data expressed by participants using surveys, focus groups or evaluation forms to identify the needs of members of its target audience(s) to plan educational activities.                           |
| Compliance:         | The CPD provider uses data expressed by participants and data from assessments of the knowledge, competence, performance or quality of care provided by members of its target audience(s) to plan educational activities. |

### Documentation

**For new applicants use examples from the past and re-applicants since the last accreditation cycle.**

- Provide three examples of different data sources that were accessed to assess the professional practice needs of your target audience(s). **(appendix L)**

### Questions

1. What is the organization's overall strategy to assess professional practice needs of their target audience?
2. Does the organization have consistent access to the educational expertise required to assess the professional practice needs of their target audience(s)? If so, please describe.





## Standard 2.2 Development of Learning Objectives and Selection of Learning Formats

An accredited CPD provider organization uses identified professional practice needs to develop overall and session specific learning objectives and select appropriate learning formats. The learning objectives must be written from the learner’s perspective and provided to potential participants prior to the learning activity.

### Evaluation Criteria

|                     |  |
|---------------------|--|
| Non-compliance:     | The CPD provider organization has not developed or implemented a plan to demonstrate how identified professional practice needs are used to develop overall and session specific learning objectives and select appropriate learning formats.        |
| Partial-compliance: | The CPD provider organization has developed but not fully implemented a plan to demonstrate how identified professional practice needs are used to develop overall and session specific learning objectives and select appropriate learning formats. |
| Compliance:         | The CPD provider has implemented a plan that demonstrates how identified professional practice needs are used to develop learning objectives and select the learning formats for educational initiatives.  |

### Documentation

**For new applicants use examples from the past and re-applicants since the last accreditation cycle.**

- Provide final copies of brochures/programs or handout materials from three activities that describe the overall and session specific learning objectives. **(appendix M)**
- Provide documentation from these three activities that demonstrate how identified professional practice needs were used to develop learning objectives and select the learning formats. **(appendix N)**
- Provide any guidelines or tools used by the organization to assist individuals to develop learning objectives. **(appendix O)**

### Questions

1. What process has the organization used to develop overall and session specific learning objectives based on identified professional practice needs?
2. Who is responsible to develop learning objectives that meet established standards?
3. What process has the organization used to select the learning formats based on identified professional practice needs?



## Standard 2.3 Content Development

An accredited CPD provider organization has implemented a process to support the development of content that is responsive to identified professional practice needs of its target audience(s).

### Evaluation Criteria

|                     |   |
|---------------------|---|
| Non-compliance:     | The CPD provider organization has not developed or implemented a process to support the development of content that is responsive to identified professional practice needs of its target audience(s).  |
| Partial-compliance: | The CPD provider organization has developed but not implemented a process to support the development of content that is responsive to identified professional practice needs of its target audience(s). |
| Compliance:         | The CPD provider organization has implemented a process to support the development of content that is responsive to identified professional practice needs of its target audience(s).                   |

### Documentation

**For new applicants use examples from the past and re-applicants since the last accreditation cycle.**

- Provide at least two examples that demonstrate how the content developed for activities was responsive to identified needs. **(appendix P)**

### Questions

1. What strategies has your organization implemented to support the development of content that is responsive to identified needs?



## Standard 2.4 Achieving Balance

An accredited CPD provider organization has implemented a process to develop content that is based on scientifically-credible evidence and provides a balanced view across all relevant therapeutic options.

### Evaluation Criteria

|                     |  |
|---------------------|--|
| Non-compliance:     | The CPD provider organization has not developed or implemented a process to develop content that is based on scientifically-credible evidence and provides a balanced view across all relevant therapeutic options.  |
| Partial-compliance: | The CPD provider organization has developed but not implemented a process to develop content that is based on scientifically-credible evidence and provides a balanced view across all relevant therapeutic options. |
| Compliance:         | The CPD provider organization has implemented a process to develop content that is based on scientifically-credible evidence and provides a balanced view across all relevant therapeutic options.                   |

### Documentation

**For new applicants use examples from the past and re-applicants since the last accreditation cycle.**

- Provide at least two examples that demonstrate how the content developed for activities is based on scientifically-credible evidence and provides a balanced view across all relevant therapeutic options. **(appendix Q)**

### Questions

1. What strategies has your organization implemented to develop content that is scientifically credible and balanced across relevant therapeutic options?



## Standard 2.5 Promoting Reflection, Self-Learning, and Self-Assessment

An accredited CPD provider organization has implemented strategies, services or tools that promote reflection, self-learning or self-assessment skills of individuals or teams.

### Evaluation Criteria

|                     |  |
|---------------------|--|
| Non-compliance:     | The CPD provider organization has not developed or implemented strategies, services or tools to promote reflection, self-learning or self-assessment skills of individuals or teams. |
| Partial-compliance: | The CPD provider organization has developed but not implemented strategies, services or tools to promote reflection, self-learning or self-assessment of individuals or teams.       |
| Compliance:         | The CPD provider organization has implemented strategies, services or tools to promote reflection, self-learning or self-assessment of individuals or teams.                         |

### Documentation

**For new applicants use examples from the past , and re-applicants since the last accreditation cycle.**

- Provide three examples of strategies, services or tools that promote reflection, self-learning or self-assessment. The documentation submitted can be any combination of these tools. **(appendix R)**

### Questions

1. What strategies has the organization implemented to promote reflection or self-learning or self-assessment of participants in your CPD program?



## Standard 2.6 Evaluation Strategies

An accredited CPD provider organization has implemented an evaluation process to assess the degree to which the intended outcomes of individual CPD activities were achieved. The range of evaluation methods used include self-reported changes by participants, measured gains in knowledge, skills, competences, attitudes; improvement in performance; or enhanced patient care outcomes.

### Evaluation Criteria

|                     |   |
|---------------------|---|
| Non-compliance:     | The CPD provider organization has not developed or implemented an evaluation process to assess the degree to which the intended outcomes of individual CPD activities were achieved.  |
| Partial-compliance: | The CPD provider organization uses self-reported changes from participants to assess the degree to which the intended outcomes of individual CPD activities were achieved.  |
| Compliance:         | The CPD provider organization has implemented a process that uses self-reported changes from participants and measured gains in knowledge, competence, attitudes, performance or health outcomes (as appropriate) to assess the degree to which the intended outcomes of individual CPD activities were achieved. |

### Documentation

**For new applicants use examples from the past and re-applicants since the last accreditation cycle.**

- Provide two examples of evaluation tools or strategies used by the organization to assess the achievement of intended outcomes of your CPD activities. At least one of the examples must describe a method(s) that measured changes in knowledge, competence, attitudes, performance or patient outcomes. **(appendix S)**
- Provide the compilation/summary of the evaluation results for one CPD activity. **(appendix T)**

### Questions

1. What is the organization's overall approach to the evaluation of individual activities?
2. How is evaluation data from individual CPD activities used to plan future learning activities?



## Section 3: SUSTAINABILITY

### Preamble

Accredited CPD provider organizations are required to develop an appropriate administrative structure and operational plan to ensure the CPD Program’s mission can be accomplished.

### Standard 3.1 Operations

An accredited CPD provider organization has implemented an operational plan to support the implementation of the organizational CPD mission statement including a:

- budget process that prospectively allocates sufficient financial resources,
- human resource recruitment and retention strategy for volunteers and paid staff;
- dedicated CPD resource person(s) to support their duties as an accredited CPD provider;
- plan to ensure access to appropriate physical (for example office) space and technical resources (for example databases, media resources etc.)

### Evaluation Criteria

|                     |  |
|---------------------|--|
| Non-compliance:     | The CPD provider organization has not developed an operational plan to support the implementation of the organizational CPD mission statement.                                 |
| Partial-compliance: | An operational plan to support the implementation of the organizational CPD mission statement is either in development or does not satisfy all required elements.              |
| Compliance:         | The CPD provider organization has implemented an operational plan to support the achievement of the organizational CPD mission statement that satisfies all required elements. |

### Documentation

**For new applicants use examples from the past and re-applicants since the last accreditation cycle.**

- Provide an organizational chart. **(appendix U)**
- Provide the job description of the organization’s dedicated CPD resource person(s). **(appendix V)**
- Provide a letter confirming that the CPD program is financially supported by senior leadership. **(appendix W)**



## Questions

1. What is the process by which the organization allocates the financial resources required to achieve the organizational CPD mission statement?
2. What is the CPD program's strategy to recruit and retain volunteers and paid staff?
3. How does the organization secure access to appropriate physical space to enable the achievement of the organizational CPD mission statement? For example, access to office and/or learning space?
4. How does the organization secure access to technical resources to enable the achievement of the CPD mission statement?
5. How does the organization store records on participation in educational activities and how these can be accessed?



## Standard 3.2 Collaboration with Stakeholders

An accredited CPD provider organization has developed a plan to purposely collaborate with other stakeholders to support the achievement of the organizational CPD mission statement.

### Evaluation Criteria

|                     |   |
|---------------------|---|
| Non-compliance:     | The CPD provider organization has not developed or implemented a plan to collaborate with other stakeholders to support the achievement of the organizational CPD mission statement.      |
| Partial-compliance: | The CPD provider organization has developed but has not implemented a plan to collaborate with other stakeholders to support the achievement of the organizational CPD mission statement. |
| Compliance:         | The CPD provider organization has developed and implemented a plan to collaborate with other stakeholders to support the achievement of the organizational CPD mission statement.         |

### Documentation

**For new applicants use examples from the past , and re-applicants since the last accreditation cycle.**

- Provide two examples of how the organization has actively collaborated with stakeholders to achieve the organizational mission statement. **(appendix X)**

### Questions

1. What overall strategy has the organization implemented to purposely collaborate with other stakeholders? For example, how does the organization decide which collaborations are appropriate and with whom?
2. How has the organization's collaborations with other stakeholders supported (or hindered) the achievement of the organizational CPD mission statement?





### Standard 3.3 Professional and Legal Standards

An accredited CPD provider organization has policies and procedures related to its governance, operations, planning processes, and records management. The policies and procedures have been implemented and meet applicable professional and legal standards including the protection of privacy, confidentiality, and copyright regulations.

#### Evaluation Criteria

|                     |  |
|---------------------|--|
| Non-compliance:     | The CPD provider organization has not developed or implemented policies and procedures to ensure its governance, operations, planning processes, and records management meets applicable professional and legal standards including the protection of privacy, confidentiality, and copyright regulations.       |
| Partial-compliance: | The CPD provider organization has developed but not fully implemented policies and processes to ensure its governance, operations, planning processes, and records management meets applicable professional and legal standards including the protection of privacy, confidentiality, and copyright regulations. |
| Compliance:         | The CPD provider organization has implemented policies and procedures to ensure its governance, operations, planning processes, and records management meets applicable professional and legal standards including the protection of privacy, confidentiality, and copyright regulations.                        |

#### Documentation

**For new applicants use examples from the past, and re-applicants since the last accreditation cycle.**

- Provide policies and procedures governing how the organization protects the privacy and confidentiality of individuals who participate in their CPD program's activities. **(appendix Y)**
- Provide policies and procedures governing how the organization respects copyright regulations. **(appendix Z)**

#### Questions

1. How does the organization develop policies that are compliant with relevant professional and legal standards related to privacy and confidentiality?
2. How does the organization develop policies that are compliant with national copyright standards?



### Appendices list

| Standard | Appendix | Details  | Label  |
|----------|----------|--|--|
| 1.1      | A        | A copy of the current CPD program mission statement.   | APPENDIX A_STANDARD<br>1.1_APPPLICANT ACRONYM NAME |
| 1.1      | B        | Minutes and/or other evidence demonstrating the process by which the CPD program mission statement was formally approved.  | APPENDIX B_STANDARD<br>1.1_APPPLICANT ACRONYM NAME |
| 1.2      | C        | A description of the type of activities included in the CPD program.   | APPENDIX C_STANDARD<br>1.2_APPPLICANT ACRONYM NAME |
| 1.2      | D        | At least two (to a maximum of four) examples of tools or processes the organization used to assess the degree to which the organizational CPD mission statement has been achieved.   | APPENDIX D_STANDARD<br>1.2_APPPLICANT ACRONYM NAME |
| 1.2      | E        | A document that describes an area(s) identified for improvement.   | APPENDIX E_STANDARD<br>1.2_APPPLICANT ACRONYM NAME |
| 1.2      | F        | At least one example of how the organization has developed a plan to address an area for improvement.  | APPENDIX F_STANDARD<br>1.2_APPPLICANT ACRONYM NAME |
| 1.3      | G        | Documentation for two CPD activities that your organization designed and implemented using an evidence-informed approach. This might include using published medical education/CPD literature, information presented at a conference or other venue, or other information shared by experts in the field. The documentation should include reference to the sources used and how this work was used to inform the development of the CPD activity. | APPENDIX G_STANDARD<br>1.3_APPPLICANT ACRONYM NAME |



|     |   |  |  |
|-----|---|--|--|
| 1.4 | H | Policies and procedures that describe how funding arrangements with sponsors and/or exhibitors of CPD programs are managed. This must include the process by which funding can be solicited, how funds are handled and how sponsors are to be acknowledged in program materials.   | APPENDIX H_STANDARD<br>1.4_APPPLICANT ACRONYM NAME |
| 1.4 | I | Sample correspondence with potential/confirmed sponsors from one recent CPD activity. This should include any letters of invitation to sponsor/exhibit, sponsorship/exhibitor prospectus, letters of confirmation of sponsorship or contracts established between the CPD provider organization and the sponsor.   | APPENDIX I_STANDARD<br>1.4_APPPLICANT ACRONYM NAME |
| 1.5 | J | Policies and procedures used to collect, review and manage conflicts of interest. This should include the CPD provider's conflict of interest declaration form, procedures for how potential conflicts of interest are managed by the scientific planning committee (or other) and how CPD program participants are made aware of an individual's conflict of interest disclosure. | APPENDIX J_STANDARD<br>1.5_APPPLICANT ACRONYM NAME |
| 1.5 | K | Sample correspondence with speakers, authors, scientific planning committee members that demonstrates how the CPD provider's policies and procedures have been implemented.  | APPENDIX K_STANDARD<br>1.5_APPPLICANT ACRONYM NAME |
| 2.1 | L | Three examples of different data sources that were accessed to assess the professional practice needs of your target audience(s).  | APPENDIX L_STANDARD<br>2.1_APPPLICANT ACRONYM NAME |



|     |   |   |  |
|-----|---|---|--|
| 2.2 | M | Final copies of brochures/programs or handout materials from three activities that describe the overall and session specific learning objectives.   | APPENDIX M_STANDARD<br>2.2_APPPLICANT ACRONYM NAME |
| 2.2 | N | Documentation from these three activities that demonstrate how identified professional practice needs were used to develop learning objectives and select the learning formats.   | APPENDIX N_STANDARD<br>2.2_APPPLICANT ACRONYM NAME |
| 2.2 | O | Any guidelines or tools used by the organization to assist individuals to develop learning objectives.  | APPENDIX O_STANDARD<br>2.2_APPPLICANT ACRONYM NAME |
| 2.3 | P | At least two examples that demonstrate how the content developed for activities was responsive to identified needs.   | APPENDIX P_STANDARD<br>2.3_APPPLICANT ACRONYM NAME |
| 2.4 | Q | At least two examples that demonstrate how the content developed for activities based on scientifically-credible evidence and provides a balanced view across all relevant therapeutic options.   | APPENDIX Q_STANDARD<br>2.4_APPPLICANT ACRONYM NAME |
| 2.5 | R | Three examples of strategies, services or tools that promote reflection, self-learning or self-assessment. The documentation submitted can be any combination of these tools.   | APPENDIX R_STANDARD<br>2.5_APPPLICANT ACRONYM NAME |
| 2.6 | S | Two examples of evaluation tools or strategies used by the organization to assess the achievement of intended outcomes of your CPD activities. At least one of the examples must describe a method(s) that measured changes in knowledge, competence, attitudes, performance or patient outcomes. | APPENDIX S_STANDARD<br>2.6_APPPLICANT ACRONYM NAME |
| 2.6 | T | The compilation/summary of the evaluation results for one CPD activity  | APPENDIX T_STANDARD<br>2.6_APPPLICANT ACRONYM NAME |



|     |   |   |  |
|-----|---|---|--|
| 3.1 | U | An organizational chart.  | APPENDIX U_STANDARD<br>3.1_APPPLICANT ACRONYM NAME |
| 3.1 | V | The job description of the organization's dedicated CPD resource person(s).   | APPENDIX V_STANDARD<br>3.1_APPPLICANT ACRONYM NAME |
| 3.1 | W | A letter confirming that the CPD program is financially supported by senior leadership.   | APPENDIX W_STANDARD<br>3.1_APPPLICANT ACRONYM NAME |
| 3.2 | X | Two examples of how the organization has actively collaborated with stakeholders to achieve the organizational mission statement.                                 | APPENDIX X_STANDARD<br>3.2_APPPLICANT ACRONYM NAME |
| 3.3 | Y | Policies and procedures governing how the organization protects the privacy and confidentiality of individuals who participate in their CPD program's activities. | APPENDIX Y_STANDARD<br>3.3_APPPLICANT ACRONYM NAME |
| 3.3 | Z | Policies and procedures governing how the organization respects copyright regulations.  | APPENDIX Z_STANDARD<br>3.3_APPPLICANT ACRONYM NAME |



## Glossary of Terms

| Term                                      | Definition   |
|---|--|
| Accredited CPD activity                   | An educational activity that meets the administrative, educational and ethical standards of the DHP-AS. Accredited CPD activities include group learning and assessment, in a live or electronic format.   |
| Accredited CPD Provider                   | An organization that has been reviewed and approved by the DHP-AS based on their ability to demonstrate adherence to established accreditation standards in areas of educational development, governance, organizational infrastructure and administrative operations.   |
| Commercial interest                       | As defined by the Accreditation Council for Continuing Medical Education (ACCME), is "any entity producing, marketing, reselling, or distributing healthcare goods or services consumed by or used on patients, or an entity that is owned or controlled by an entity that produces, markets, resells, or distributes healthcare goods or services consumed by or used on patients. Nonprofit or government organizations, non-healthcare-related companies, and healthcare facilities are not considered commercial interests." |
| Continuing medical education (CME)        | Teaching and learning that meets an identifiable need and designed to enhance medical/clinical knowledge, skills, attitudes, performance or health outcomes.   |
| Continuing professional development (CPD) | Educational activities that extend beyond the scope of traditional CME (defined above), and includes learning activities that incorporate content areas outside discipline specific knowledge and skills.  |
| CME/CPD Activity                          | Individual educational activities that support an organization's CME/CPD program.  |
| CME/CPD Program                           | The overall educational plan of an organization, including all educational initiatives, that addresses the needs of an organization's members or identified target audience(s).  |
| CME/CPD Session                           | A component within a larger educational event. An example would be a workshop contained within an annual conference.   |
| Conflict of interest                      | A set of conditions in which judgment or decisions concerning a primary interest (example a patients' welfare, the validity of research and/or quality of medical education) is unduly influenced by a secondary interest (personal or organizational benefit including financial gain, academic or career advancement, or other benefits to family, friends, or colleagues).  |



|   |  |
|---|--|
| CPD (Continuing Professional Development) | Educational activities that extend beyond the scope of traditional CME (defined above), and includes learning activities that incorporate content areas outside discipline specific knowledge and skills.                                |
| Educational Method and Delivery           | The format in which educational activities are delivered/relayed to learners.  |
| Evaluation                                | An assessment conducted to determine the effectiveness of the event in meeting the stated learning objectives.   |
| Interactive Learning                      | A portion(s) of the educational method that incorporates and fosters opportunities for dialogue or communication among participants and speakers to enhance knowledge transfer and acquisition.  |
| Learning Objectives                       | Statements that are based on the identified needs of the target audience, and indicate what a participant will be able to know or do following an educational event.   |
| Needs Assessment                          | Method(s) used to identify the identified professional practice needs of an identified target audience.  |
| Perceived conflict of interest            | A perceived conflict of interest is the appearance of a conflict of interest as judged by outside observers regardless of whether an actual conflict of interest exists.   |
| Real conflict of interest                 | A real conflict of interest is when two or more interests are indisputably in conflict.  |
| Sponsor                                   | An individual, group, corporation or organization (for-profit and not for-profit) that provides financial or in kind support, including goods or services in support of accredited educational activities, learning resources, or tools. |
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