Coordinator Application and My Credits Module

April/May 2018
Plan an Activity

Start at least 45 days before your activity

Decide on activity goals and target audience

• If 2 or more professions, please consider making this an Interprofessional activity
• Will there be an opportunity to learn with and about each other
  • presenters from various professions
  • question and answer session
  • panel discussion
  • if enduring-discussion board
• Designed to change performance of the team and/or patient outcomes
• We need to have at least 25% of our approved programs IPE
Create your planning committee

- Make sure you have someone from each target audience group you wish to award credit to
- If applying for nursing credit, please include a nurse on the planning committee and have an approved nurse educator review for content
  - A list of approved nurse educators can be found on our website
  - When asking them to review, please send a copy of the completed application as well as your planning committee minutes for review
Minutes – Upload with your application

• Include a representative for each target audience who was in attendance and label each one

• Discussion points:
  • Gap – Why are you having this activity-what is currently happening, what would you like to see happen, how will you get there? 
  **Documentation of gap needs to be uploaded with your application**

  • How the meetings will help each target audience achieve their goals

  • How the two or more target audience groups will have the opportunity to learn from each other

  • Objectives: By the end of this educational activity, learners should be able to...
    • The objectives for the program should fit everyone on the team (patient outcomes) but you can still have individual objectives for each specialty.
Disclosure

• Please ask the planners if they have any possible conflicts at the beginning of the planning process. Let them know that they will need to complete an online disclosure form (notification email will be sent when you start completing the application)

• All faculty (speakers) and planners need to be entered into the application leadership tab. Please review all disclosures to make sure there are no conflicts of interest

• Complete either a Monitoring Form (RSS programs) or a Conference Disclosure Form and *upload with your application*

Conflict of Interest

• If any of your planners or speakers has a possible conflict of interest, please complete the Conflict of Interest (COI) Resolution form and *upload with your application*
Measurement process 3-4 months after the activity

• How will you measure the success of your program after its completion?
  • Examples: Revisit hospital data or survey your learners to see if they have made/seen changes after participating in the learning activity (we do this for all RSS programs)
    • Please ask your learners: One goal of this conference is to educate and transform collaborative care. To that end, please tell us whether this education has enhanced your team’s care in treating patients with ________?
    • If “yes”, please describe the change that was made as a result of the education.
Brochure/Marketing Piece

• **Please make sure to upload** any marketing pieces you wish to use. Any mention of credit will need to be pre-approved before you distribute.

• Accreditation wording
  • Make sure you have the correct wording (cut and paste it off the monitoring form/disclosure form)
  • Make sure you also have the logo
Not IPCE

- 2+ professions on planning committee (Eg RN + Pharmacist)
- Planning committee is reflective of target audience
- Information presented is applicable to both groups
- No opportunity to learn with, from or about each other.
- Focus is not on the team and/or patient outcomes.

Can still award credit for each group, but it is **not** IPCE
“My Credits” Portal

My Credits
My Applications
My Activity Center
My Required Forms

https://www.highmarksce.com/uvmmmed
(Link on our CME page)
http://www.med.uvm.edu/cme
Use the method of log in you are connected with:
- Hospital - M or P number
- UVM - PeopleSoft
- College of Medicine - COM

If outside the network, please log in here once your account is created.
Completing the application
If you duplicate an application from a previous one, please note that all faculty will be sent a notification that they have been listed as a course director/planner/or faculty for that event.

Also, please go through the entire application, we have edited/added new questions.
Create New Application

Use the tabs below to submit your application. Required items are noted in red text and must be completed before submitting your application. You may click on any of the other tabs after completing the title tab.

Please be sure to click Save before moving on to (or clicking) the next tab. Any unsaved data will be lost.

Please do not use the browser's back button to navigate to the previous page.


*Title
Please provide the title of your activity below:

Test For Nurse Educators

Check Spelling Characters Left: 2%

*Application Type
Regularly Scheduled Series (RSS)

*Credit Hours Requested
Note: The amount of credit requested must have supporting documentation that meets the accrediting body's guidelines. Amount requested may not always be granted.

1

*Activity Start Date
05-05-2017

Save

This is the website for the University of Vermont College of Medicine's CME system.
Tabs will turn green when they are completed
If the disclosure is complete, click on the words “Financial Disclosure” to see if there is any possible conflicts to resolve.
Financial Disclosure

* - indicates a required item.

* Do you and/or your spouse/partner have any financial relationship with any commercial interest currently or within the last 12 months? Any dollar amount constitutes a relationship. (The ACCME definition of a commercial interest is “any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients”. Please see the link below for exceptions and more information.)

☐ Yes  ☐ No

Confirmation

☐ I confirm that the above financial disclosure is correct and up to date.

Last Confirmed On: 07/22/2016 10:20 AM

Submit
The data was saved successfully.

314 - Test for Nurse Educators

**Leadership**
Use the fields below to identify people who will be involved in this activity's planning and administration.

- Contact Person - The person responsible who could answer logistical questions about the program and any outstanding paperwork.
- Course Director - The person who assumes responsibility for the program content.
- Submitter - The person completing the application.
- Planning Committee Member - Please list all planning committee members.

One or more of the required items on this step have not been completed.
1 Planning Committee Member is required.
1 Faculty is required.

**Main Contact**
1. Mary Gagne, MD - UW/CME

**Course Director(s)**
No Course Director has been submitted.

Add Course Director

**Planning Committee Member(s)**
No Planning Committee Member has been submitted.

Minimum Planning Committee Member Required: 1
Add Planning Committee Member

**Faculty(s)**
No Faculty has been submitted.

Minimum Faculty Required: 1
Add Faculty

Save
Create New Application

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Please be sure to click Save before moving on to (or clicking) the next tab. Any unsaved data will be lost.

Please do not use the browser’s back button to navigate to the previous page.

334 - Test For Nurse Educators

*Find Course Director

Use the options below to search for the Course Director.

To search, simply type the first or last name in the search field. For example, searching for "Mary" could return "Mary Gagne" and "Mary Smith".

To restrict your search, type last name, first name. For example, "Gagne, Mary".

Name: 

Search
If you duplicated your application from last year, you will need to select each item and answer any new questions that have been added.
We moved the IPE question here. Please make sure to answer.

**Target Audience, Objective, Designed to Change**
- Indicates a required item.

* Is this activity interprofessional education (IPE): an activity planned by the team and for the team? The IPE requirement is that two or more professions, representative of the target audience, helped to plan the activity.
  - Yes
  - No

* Please check which types of credit you will be applying to UVM for:
  - Physician
  - Nursing
  - Pharmacy

* Please identify the objective for each target audience group and the planner who will represent that audience (you are required to have one representative for each group you wish to receive credit for - Physician, Nurse, Pharmacy and/or other):

<table>
<thead>
<tr>
<th>Target Audience</th>
<th>Planner Who Represents Target Audience (If selecting nursing credit, please list the approved nurse educator who has reviewed your program).</th>
<th>Designed To Change</th>
<th>Objective: By the end of this activity, the target audience should be able to...(PLEASE LIST THREE OBJECTIVES IF APPLYING FOR PHARMACY CREDIT)</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Physician</em></td>
<td></td>
<td></td>
<td></td>
<td>Remove</td>
</tr>
<tr>
<td><em>Nurse</em></td>
<td></td>
<td></td>
<td></td>
<td>Remove</td>
</tr>
<tr>
<td><em>Pharmacist</em></td>
<td></td>
<td></td>
<td></td>
<td>Remove</td>
</tr>
<tr>
<td><em>Other</em></td>
<td></td>
<td></td>
<td></td>
<td>Remove</td>
</tr>
</tbody>
</table>

Add Another
Always remember to **SAVE** before leaving the tab.
There are new Interprofessional Education Competencies that have been added.
**Educational Format**

* Indicates a required item.

1. Educational Format
   - Didactic
   - Panel discussion
   - Case presentations
   - Small group discussions
   - Hands-on workshop
   - Simulation lab
   - Roundtable discussion
   - Standardized patient
   - Other: [ ]

2. Any other enhancements?
   - Toolkits
   - Patient information packet
   - Checklists
   - Newsletter
   - Audience response system
   - Other: [ ]

3. Will this program address the following
   - Pain Management
   - Controlled Substances
   - End of Life Care

[Save button]
Reminder that Gap Reports have been attached to your RSS programs this year. Please contact Karen if you wish to receive a copy to help plan the upcoming year (these can be used as Gap Documentation during your planning meetings).
Create New Application

Use the tabs below to submit your application. Required items are noted in red text and must be completed before submitting your application. You may click on any of the other tabs after completing the title tab.

Please be sure to click Save before moving on to (or clicking) the next tab. Any unsaved data will be lost.
Please do not use the browser’s back button to navigate to the previous page.

334 - Test For Nurse Educators

In progress

Supporting Documentation

Use the form below to upload documents. To upload a document, select the classification below, then click the add document button, and use the uploader to upload your document.

* Document Classification:

- SELECT -
- Announcement
- Commercial Support Letter of Agreement
- Conflict of Interest Resolution Form
- Gap Documentation
- Planning Committee Minutes
- Sample Monitoring Form
- Additional Information

This is the website for the Unit...
http://www.med.uvm.edu/cme

Additional information and forms are at the bottom of the “Plan an Activity” page.
Coordinator Module

My Credits
Use this section to manage your credits. You can claim credit, edit your evaluations, and print your transcript or certificate.

To claim credit for sessions, please use the option below to list sessions by activity or use the Search Sessions button for advanced search options.

Claim Credit
-- Select Activity --

List Sessions By Activity

You have not entered or been awarded any credits to date.
The Activities for which you are assigned to will appear. Select the desired activity to manage the sessions.
- Workshop Number
- Start time
- End time
- Location
- Room - if it is not listed, let us know and we will add it
- Description
- Objectives
Once you have created a new session you can modify it. These are the functions available:
Edit Session:

My Sessions To Build for OB/GYN Grand Rounds FY2018

Use the options below to build out your session shells

Create Session from Pre-Approved Template


June 26, 2018
7:30 AM - 8:30 AM

Preview - Edit Session - Manage Roles - Manage Documents - Reporting - Cancel

Edit Session: OB/GYN Grand Rounds FY2018 - Pregnancy of unusual locations: Part II early pregnancy

Use the form below to update the information about this session.

* Indicates a required item.

Title:
OB/GYN Grand Rounds FY2018 - Pregnancy of unusual locations: Part II early pregnancy

Remaining: 217

Code: 18-117-38

Starts On: 06-26-2018 7:30am

Ends On: 06-26-2018 8:30am

Location: University Medical Center

Room: Davis Auditorium

Credits: 1

Description:

Remaining: 10000

Objectives:
This is where you will add or remove a speaker (or another coordinator if you work with someone else).

Reminder that you will need to notify/send directions to your speaker(s) after you add them to your session so that they can complete the disclosure form.
# Search Speakers

Use the options below to find speakers.

## Search Criteria

**Last Name:**

<table>
<thead>
<tr>
<th>First Name:</th>
<th>Institution Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preferred Email:</td>
<td>Sort By: Last Name</td>
</tr>
<tr>
<td>State/Province/Region:</td>
<td>Then By:</td>
</tr>
</tbody>
</table>

---

**-- ALL --**
**Available Speakers for Medicine Grand Rounds FY 2017**

**Role Details**

- EvFullCoordinator: (EvFullCoordinator) Activity Coordinator (Session Assignment)
- EvRSCoordinator: (EvRSCoord) RSS Coordinator
- EvSpeaker: (SpeakerMaster) Speaker

<table>
<thead>
<tr>
<th>Role(s)</th>
<th>Last Name</th>
<th>Middle Name</th>
<th>First Name</th>
<th>City, State</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>EvFullCoordinator: EvRSCoordinator: EvSpeaker:</td>
<td>Gagne</td>
<td></td>
<td>Bob</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EvFullCoordinator: EvRSCoordinator: EvSpeaker:</td>
<td>Gagne</td>
<td>Havaleh</td>
<td></td>
<td>Burlington, VT</td>
<td>United States</td>
</tr>
<tr>
<td>EvFullCoordinator: EvRSCoordinator: EvSpeaker:</td>
<td>Gagne</td>
<td>Mary</td>
<td></td>
<td>Burlington, VT</td>
<td>United States</td>
</tr>
<tr>
<td>EvFullCoordinator: EvRSCoordinator: EvSpeaker:</td>
<td>Gagne</td>
<td>Murphy</td>
<td>c. VT</td>
<td></td>
<td>United States</td>
</tr>
<tr>
<td>EvFullCoordinator: EvRSCoordinator: EvSpeaker:</td>
<td>Gagne</td>
<td>Peg</td>
<td></td>
<td>Burlington, VT</td>
<td>United States</td>
</tr>
</tbody>
</table>
Add New Speaker

Contact Information

* First Name: 
* Middle Name: 
Last Name: 
Phone Number: 
* Preferred Email: 

Submit
My Sessions To Build for OB/GYN Grand Rounds FY2018

Use the options below to build out your session shells

Create Session from Pre-Approved Template


June 26, 2018
7:30 AM - 8:30 AM

Preview · Edit Session · Manage Roles · Manage Documents · Reporting · Cancel
My Sessions To Build for OB/GYN Grand Rounds FY2018

Use the options below to build out your session shells

Create Session from Pre-Approved Template


June 26, 2018
7:30 AM - 8:30 AM

Preview · Edit Session · Manage Roles · Manage Documents · Reporting · Cancel

Reports Menu

Session Reports
Status Report

RSS Coordinator

CEU/CME Reports
View Claiming Instructions
Credit Report

This is the My Credits / Application portal for the University of Vermont Office of Continuing Medical and Interprofessional Education.
For Assistance email futuremc@med.uvm.edu
Reporting:

<table>
<thead>
<tr>
<th>Status report: Shows the status of documents related to that session.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Event Status Report</strong></td>
</tr>
<tr>
<td>Tuesday, May 1</td>
</tr>
<tr>
<td>18-117-31 - OB/GYN Grand Rounds FY2018 - Adding insult to ovarian cancer injury through PARP inhibition</td>
</tr>
<tr>
<td>7:30 AM - 8:30 AM</td>
</tr>
<tr>
<td>Davis Auditorium</td>
</tr>
<tr>
<td>RSS Coordinator</td>
</tr>
<tr>
<td>1. Darlene Sweeney NIA</td>
</tr>
<tr>
<td>UVM Medical Center</td>
</tr>
<tr>
<td>111 Colchester Avenue</td>
</tr>
<tr>
<td>Mall Stop 251 SM4</td>
</tr>
<tr>
<td>Burlington United States 05401</td>
</tr>
<tr>
<td>Phone Number: 802-847-5112</td>
</tr>
<tr>
<td>Preferred Email: <a href="mailto:Darlene.Sweeney@uvmhealth.org">Darlene.Sweeney@uvmhealth.org</a></td>
</tr>
<tr>
<td>Bio: X = Not Completed</td>
</tr>
<tr>
<td><strong>Forms</strong></td>
</tr>
<tr>
<td>Financial Disclosure (required): ✓ Completed</td>
</tr>
<tr>
<td><strong>Document</strong></td>
</tr>
<tr>
<td>Monitoring Attestation Form (required): ✓ Completed</td>
</tr>
<tr>
<td>0739_Sweeney_1617131.pdf</td>
</tr>
<tr>
<td>X = Public X = Approved</td>
</tr>
</tbody>
</table>

For Assistance email UVMCMC@med.uvm.edu
This is where you will find your QR Code
The system will generate a distributable PDF of the link to claim credit and the QR Code.

Claiming Instructions

OB/GYN Grand Rounds FY2018-02/27/2018

Use the following link to access the claiming app, or scan the QR code below.

Claiming App:
http://www.highmarksce.com/uvmed/index.cfm?do=ip.claimCreditApp&eventID=7473

[QR Code]
The credit report will show you a list of attendees for this session.
If your session is cancelled, please make sure to click on Cancel so it is no longer available to claim credit. Just typing CANCELLED is not enough.
Speaking Assignments
This is where you will upload your Monitoring form and COI form if applicable.

You will also attest that your monitoring form was posted for the learners to see prior to the start of the session.
Activity Center

OB/GYN Grand Rounds FY2013
Regularly Scheduled Series
September 1, 2017 - June 20, 2018

Options:
- Manage Sessions
- Speaking Assignment
- Reporting

Darlene Sweeney

My Account
My Credits
My Online Courses
My External Certificates
My Applications
My Activity Center
My Required Forms
My Department Staff
Sign Off

This is the My Credits / Application portal for the University of Vermont Office of Continuing Medical and Interprofessional Education.

For Assistance email LIVMC.ME@med.uvm.edu
Here you can review who completed the Gap Survey and you can print off your overall gap summary. You can also obtain a list of all attendees for the year.
• Applications for July activities are due June 1.
• If you take the summer off, please submit by August 1.
• You will not have access to My Activity Center until your applications have been approved.
• Send us any questions or suggestions.

Any Questions?

Feel free to call Mary or Karen at 656-2292
or email
mary.gagne@med.uvm.edu
Karen.whitcomb@med.uvm.edu