pac-lac

Perinatal Advisory Council:
Leadership, Advocacy and Consultation

Content Validation Verification

This form must be completed by <u>every</u> faculty member of the CME Activity. The Joint Provider must submit this form to PAC/LAC.

Title of Presentation: _____

Date of CME Activity: _____

Faculty Name: _____

Brief Topic Summary: _____

_____

CMA/ACCME Standards on Content Validation

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

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

Please check off the appropriate boxes and sign below.

☐ I have read the above CME standards regarding Content Validation, and I understand that non-compliance with this standard will disqualify me as faculty.

AND

☐ The above mentioned lecture does not contain any recommendations in the diagnosis or management of patient care.

OR

☐ My presentation contains recommendations, diagnoses and treatment in the care of patients and the following resources were used for content validation:

  ☐ Cochrane Collection or other evidence-based reviews

  ☐ Peer reviewed journals and literature reviews

  ☐ National Practice Guidelines

  ☐ Medical textbook

  ☐ Other references (please list below)

  _____

  _____

Rev 2022

Compliance with Continuing Education: Cultural and Linguistic Competency (CLC) & Implicit Bias (IB) standards. CMA requires that all continuing medical education courses contain curriculum that includes relevant cultural and linguistic competency and Implicit Bias standards in the practice of medicine.

- CLC is defined as the ability and readiness of health care providers and organizations to humbly and respectfully demonstrate, effectively communicate, and tailor delivery of care to patients with diverse values, beliefs, identities and behaviors, in order to meet social, cultural and linguistic needs as they relate to patient health.

- IB is defined as the attitudes, stereotypes and feelings, either positive or negative, that affect our understanding, actions and decisions without conscious knowledge or control. Implicit bias is a universal phenomenon. When negative, implicit bias often contributes to unequal treatment and disparities in diagnosis, treatment decisions, levels of care and health care outcomes of people based on race, ethnicity, gender identity, sexual orientation, age disability and other characteristics.

Discuss how your presentation/activity addresses a specific need underlying the identified CLC and/or IB gap.

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☐ EXEMPT COURSE: This presentation is dedicated solely to research or other issues that does not include a direct patient care component.

Desired Outcomes: (Session Objectives)
Note: Desired outcomes must be in terms of physician competence, performance or patient outcomes. An increase in physician knowledge is not sufficient.

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_____

_____

_____   _____
Signature   Date

_____
Print Name

Direct links for AB 1195 and AB 241
CLC and IB resources:
- Patient Care Through Better Cultural Awareness
- Health Equity Training Courses
- Achieve Health Equity Through Culturally Competent Care for BIPOC Patients
- Initiatives to Reduce Maternal Mortality and Severe Maternal Morbidity in the US
- Childhood Immunizations: Cultural Approaches to Support Parents Who are Vaccine Hesitant