

Joint Accreditation Policies Manual



Nationwide Children's Hospital® has been granted Joint Accreditation for a 6-year term running through November 2025. Because of Nationwide Children's history of education collaboration across teams and a focus on quality improvement, we were well positioned for the full accreditation term.

Joint Accreditation was built on the principle that interprofessional education (IPE), designed to improve interprofessional collaborative practice (IPCP) in health care delivery can improve patient outcomes. Launched in 2009, Joint Accreditation is a collaboration of the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC).

As a jointly accredited provider, Nationwide Children's Hospital will provide education programs planned by the team, for the team. The new designation will allow for a single application process so that national level interprofessional continuing education credit can be offered more easily across a spectrum of disciplines. Currently, these include:

- *Physicians*
- *Nurses*
- *Pharmacists*
- *Psychologists*
- *Physician Assistants*
- *Social Workers*
- *Dentistry*

For more information about our Interprofessional Continuing Education program, visit [NationwideChildrens.org/for-medical-professionals/education-and-training](https://www.nationwidechildrens.org/for-medical-professionals/education-and-training).

The purpose of this manual is to provide policies related to our joint accreditation in a centralized location. The policies are also available as individual documents here:

[\\ColumbusChildrens.net\Depts\ED\Shared\Joint Accreditation\Policies\FINAL POLICIES - Current\POLICY MANUAL](https://ColumbusChildrens.net/Depts/ED/Shared/Joint%20Accreditation/Policies/FINAL%20POLICIES%20-%20Current/POLICY%20MANUAL)

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Interprofessional Continuing Education (IPCE) Program

MISSION STATEMENT

Best outcomes in everything we do, together delivering the best healthcare for children.

Nationwide Children's Hospital (NCH) is committed to providing the highest quality of care to all children and their families regardless of ability to pay. NCH strives to offer pre-eminent clinical and research programs through a comprehensive, integrated pediatric healthcare delivery system. Education is a key strategy by which NCH fulfills this mission.

The Interprofessional Continuing Education Program (IPCE) leads development, deployment, and assessment of a comprehensive array of evidence-based educational services which enhance healthcare professionals' ability to provide outstanding patient care, maintain and improve patients' and the community's health, and continuously advance patient outcomes through research and quality improvement. The IPCE Program at NCH is specifically designed to improve interprofessional, team-based collaborative healthcare education and practice. The NCH IPCE Program devotes expertise and resources to:

1. Prepare current and future generations of healthcare professionals and their teams, to deliver high quality, safe, effective, efficient, timely, compassionate, patient/family-centered, equitable team-based care of children and adults with childhood conditions and their families.
 - Continuously update knowledge, competence, and/or performance of a diverse array of professionals and teams.
 - Offer multi-dimensional quality improvement educational initiatives that enhance individual, team and system performance.
 - Enhance leadership skills and facilitate career development of healthcare professionals.
2. Better manage high risk populations and reduce healthcare disparities
 - Equip professionals with tools to identify and meet the unique needs of children with complex needs and their families and adults with congenital diseases and conditions.
 - Reduce healthcare disparities by providing professionals with information relevant to their patient population.
3. Promote a common standard of pediatric care throughout the healthcare delivery system
 - Promote interprofessional collaborative practice through team-based learning and healthcare delivery.
 - Partner with hospitals, other care providers, and practices to enhance patient care.
 - Share unique expertise and outcomes developed at NCH through local/regional/national/international education.

4. Disseminate research results to contribute new knowledge and improve the health of patients with childhood diseases and conditions.
 - Reduce barriers to translation of evidence-based research and quality improvement into clinical practice.
 - Share advances in basic science to accelerate scientific breakthroughs.

Services & Activities

Healthcare is best delivered by interprofessional teams working toward common goals and supported by the environment in which they deliver care. Educational activities are developed to address practice gaps of individual professionals and the healthcare team by aligning education with models of collaborative practice. Educational opportunities are identified from the best available clinical, research, quality, safety and healthcare system information and scientific evidence.

Joint providership and educational collaborations are undertaken when the partnership enables NCH to better fulfill its educational mission by focusing on practice gaps, incorporating innovative learning strategies, promoting collaborative learning amongst teams, and tracking activity outcomes to continually improve performance in practice.

Commercial support is solicited according to the Accreditation Council for Continuing Medical Education (ACCME) Standards for Commercial Support. The IPCE Program determines all commercial support terms and conditions and oversees all funds.

Expected Results

The IPCE Program at NCH utilizes a multi-factorial approach to expected results. It strives to translate data into information by systematically tracking results as outlined below. The goal is to correlate education offerings with outcomes in order to identify which tactics are achieving desired results and which need new interventions.

The NCH Quality-Safety Strategic Plan seeks to improve care in 5 domains:

1. **Keep Us Well** – care that is accessible and coordinated for all patients and families
2. **Navigate my Care** – care that is timely, efficient, and coordinated
3. **Do Not Harm Me** – elimination of preventable harm
4. **Heal Me/Cure Me** by transforming outcomes of acute and/or chronic illnesses
5. **Treat Me with Respect**, assuring care is patient-centered and equitable

The IPCE Program tracks educational offerings in each domain. Outcomes may be identified at an individual, activity, service line, program, institutional, and/or healthcare system level based upon available data.

The IPCE Program also tracks identified professional practice gaps and the applicable changes to:

Collaborative Practice

- Communication skills (Interpersonal and Professional)
- Values/Ethics and Professionalism
- Roles/Responsibilities
- Teamwork and Team-based care

Clinical Practice

- Diagnostic approaches
- Wellness/screening processes
- Treatment and/or management protocols
- Clinical procedures
- Patient education and/or self-management guidance
- Patient Care and Procedural Skills

Data Driven Decision Making

- Quality Improvement
- Practice-based Learning and Improvement
- Informatics
- Systems-based Practice
- Evidence-based Practice

Impact is measured by improvements in professional's and/or team's knowledge, competence, and/or performance; patient and population health outcomes; organizational performance; and pediatric healthcare system and organizational performance and research is integrated throughout the continuum of medical education and pediatric practice.



Interprofessional Continuing Education (IPCE) Program
CE ACTIVITY REVIEW & APPROVAL

The program planners and/or the Course Director completes the CE application with assistance from the IPCE Program representative or designee. A Nationwide Children's Hospital (NCH) representative from the primary target audience named in the CE application must be represented on the activity planning committee and assume responsibility for the coordination of the activity content and oversight of the activity implementation.

The CE application is reviewed by the IPCE Program representative or designee for compliance with the Joint Accreditation (JA) Criteria. All CE applications are reviewed to ensure opportunities for interprofessional collaboration are considered and measurable outcomes have been identified.

The IPCE Education Committee representative or designee reviews and approves all CE applications.

The Integrated Hospital Advisory (IHA) Committee serves as an advisory body for JA compliance of the updated criteria and standards. Membership in the IHA does not equate to direct influence of educational content of activities. Members of the IHA Committee may serve as consultants as appropriate for CE applications, program content and collaborative opportunities.

As education leaders, IHA members may serve as Course Directors, planning committee members, education consultants and or perform other IPCE Program related duties. In these situations, the individual is listed on applicable forms, applications and disclosures and may be required to recuse themselves from some committee discussions. Recusals are documented in meeting minutes and in the activity file.

Prior to final CE application approval, the JA Director may consult with IHA or IPCE Program Executive Committee members as needed.

Proposed CE activities must comply with all JA updated criteria and standards as well as IPCE Program and NCH policies, to be eligible for consideration for CE credit.

All CE activities are monitored and audited by the IPCE Program to track and report compliance. See IPCE Program Policy to Address Non-Compliance.

Approved by IPCE Program Executive Committee: 6/24/2019
Approved by IPCE Program Education Committee: 6/24/2019



Interprofessional Continuing Education (IPCE) Program
CE MANAGEMENT & BUSINESS PRACTICES

The IPCE Program is administered through the Nationwide Children's Hospital (NCH) Education Institute. It administratively reports to the Vice President/DIO, Education. It abides by all NCH policies and procedures including, but not limited to those specified in the Administrative Policy Manuals (Volumes 1 and 2), the Personnel Policy Manual, and the Medical Staff Bylaws.

Financial operations of the IPCE Program are conducted through NCH unless otherwise specified in a signed, written joint provider agreement. The NCH Finance Department assures compliance with all financial and accounting practices. It conducts internal and periodic external audit of records.

Each member of the hospital and Medical Staff and all Board members and volunteers agree to abide by the NCH Corporate Compliance Standards of Conduct.

Approved by IPCE Program Executive Committee: 6/24/19
Approved by IPCE Program Education Committee: 6/24/19



Interprofessional Continuing Education (IPCE) Program
CE POLICY PROCESS

Discipline specific education policies remain in effect until IPCE Program policies are approved by the IPCE Program Executive Committee.

All IPCE Program policies are reviewed at least every three years.

The policy review/approval process:

IPCE Program Education Committee	IPCE Integrated Hospital Advisory (IHA) Committee	IPCE Program Executive Committee
<ul style="list-style-type: none"> • Develops or reviews policy • Recommends changes, if any • Approves changes • Forwards to IHA Committee 	<ul style="list-style-type: none"> • Reviews recommended policy revisions • Approves or makes changes, if any • Forwards to Executive Committee 	<ul style="list-style-type: none"> • Reviews recommended policy changes • Approves or recommends changes, if any • Approves/Rejects policy • Notifies Education Committee of decision

If no changes are made to the policy, “NC” and the date of review is noted on the IPCE policy.

Existing CE policies remain in effect as written until the IPCE Program IHA Committee reviews revisions, and IPCE Program Executive Committee approves those revisions.

All disciplines awarding credit designated by Joint Accreditation will be required to follow IPCE Program policies once approved.

Approved by IPCE Program Executive Committee: 6/24/19
 Approved by IPCE Program Education Committee: 6/24/19



Interprofessional Continuing Education (IPCE) Program
COMMERCIAL SUPPORT & EXHIBITS POLICY

All commercial support and exhibits for IPCE Program activities must adhere to the Criteria, Policies and Standards for Commercial Support of Continuing Medical Education approved by the Accreditation Council for Continuing Medical Education (ACCME) as required by Joint Accreditation criteria and Nationwide Children's Hospital (NCH) policies.

1. A commercial interest* cannot take the role of non-accredited partner in a joint providership relationship (See NCH's IPCE Program Joint Providership Policy).
2. Commercial entities providing commercial support, must sign a Letter of Agreement (LOA) with NCH documenting their knowledge of, and adherence to, the Standards for Commercial Support. This agreement is signed by VP/DIO, Education and the appropriate, designated representative from the commercial supporter prior to the activity. NCH makes all decisions regarding the disposition and disbursement of commercial support. The agreement must include NCH, even if the support is given directly to the NCH's educational partner or a joint provider.
3. A commercial interest cannot require NCH to accept advice or services concerning teachers, authors, or participants or other education matters, including content as a condition of contributing support or services.
4. Both parties agree that support for the CE activity is not an inducement for patient referrals or future purchasing contracts, as stated in the LOA.
5. All commercial support, both financial and "in-kind", is disclosed to participants prior to the start of the activity. The acknowledgment of commercial support cannot contain the corporate logo, trade name or a product-group message of an ACCME-defined commercial interest. Education planners should refer to ACCME SCS 4 for specific rules regarding appropriate management of associated commercial promotion.
6. Proposed commercial support is identified on the IPCE Program Application if known or intended at the time of submission. Additional commercial support may be solicited with approval by a representative from the IPCE Program. Some commercial support listed on the IPCE Program Application ultimately may not be received. These details must be noted in the activity file.
7. Each CE activity has a representative from the IPCE Program, or designee, on the activity planning committee. This individual assures that selection of all persons/organizations in a position to control content, identification of educational needs, determination of objectives, election of educational methods, evaluation, materials distributed, and marketing/promotion activities comply with the ACCME Criteria and Standards as well as NCH IPCE Program policies

and procedures. This representative works directly with the NCH Foundation to coordinate funding and solicit external support (See Administrative Policy V-14).

8. Commercial exhibits may be incorporated as part of the overall arrangements for a CE activity. However, their inclusion will not influence planning or interfere with the content, nor can they be a condition of the provision of commercial support for the CE activities. Exhibit placement is determined by the representative from the IPCE Program, or designee. All exhibits and product promotion/advertisement will be in a location separate from where the education is occurring. A LOA is not required for exhibit fees.
9. Commercial support levels and exhibit fees adhere to the fee schedule, approved by a representative from the IPCE Program within established guidelines. If the activity planning committee proposes a different fee schedule, it must be approved by IPCE Program Director.
10. CE activities financially supported by a hospital-restricted fund must follow NCH's restricted funds expenditure procedure.
11. NCH maintains financial reports detailing the receipt and expenditure of all commercial support.

*A commercial interest is any entity producing, marketing, re-selling, or distributing health care good and services consumed by, or used on, patients.

Approved by IPCE Program Executive Committee: 6/24/19
Approved by IPCE Program Education Committee: 6/24/19



Interprofessional Continuing Education (IPCE) Program

DOCUMENTATION OF CE CREDIT

1. Sign-in, electronic scanning or other methods for documentation of attendance are used to document learner participation in live CE activities.
2. Participants completing Enduring Material or Internet CE must complete an appropriate post course assessment following course completion to be awarded credit. A passing score on the post course assessment, as determined by the CE planners, is required for credit.
3. The number of credits awarded for participating in a CE approved activity is entered into an online CE tracking system. The IPCE Program provides access to an on-line transcript to learners through a self-service feature or by contacting the ICPE office.
4. Documentation includes:
 - Participant name
 - Title and date of activity
 - Number and type of CE credits awarded
 - Provider name
 - Provider accreditation designation statement with activity type noted
5. The IPCE Program will assist with and or fulfill credit-reporting requirements as required by respective professional Boards.



Interprofessional Continuing Education (IPCE) Program
FISCAL ACCOUNTING

All disbursements of funds for speakers and other costs associated with directly sponsored educational activities are processed through the Nationwide Children's Hospital (NCH) designated finance departments except as outlined in a Joint Providership Agreement (JPA). Finance ensures that all tax and other accounting requirements are met.

Individual departments/sections or other entities may take responsibility for some of the fiscal aspects only with approval of the IPCE Program. Responsibilities should be identified during the initial approval or renewal of the application for credit.

For jointly provided activities, the NCH ICPE Program is ultimately responsible for all funds. NCH may designate some fiscal responsibilities to the Joint Provider in the written JPA signed by both NCH and the Joint Provider prior to the activity. In all instances, a copy of the final financial accounting statement, including all revenues and expenses, will be maintained in the NCH activity file.

When expenses are paid from a NCH or The Research Institute at NCH operational budget, it is not necessary to include paper documentation of individual expense. These expenses are included as line items in the final activity income statement and details can be accessed by running a report from NCH or The Research Institute finance departments. NCH and the Research Institute financial records are subject to an external audit on an annual basis.

Educational activities financially supported by a hospital-restricted fund must follow the NCH restricted funds expenditure procedure.

All commercial support dollars received to support continuing education activities must be processed as outlined in the Commercial Support and Exhibits IPCE Program policy.



Interprofessional Continuing Education (IPCE) Program
HONORARIA & REIMBURSEMENT POLICY

Nationwide Children's Hospital (NCH) pays honoraria and reimbursement for out-of-pocket expenses directly to visiting speakers. If the activity is jointly provided, NCH may delegate this responsibility to the joint provider in the written Joint Providership Agreement which specifies that NCH maintains written documentation that the joint provider paid the visiting speaker directly. If a visiting speaker participates in the education event as a learner, in addition to his or her author or speaker role, honoraria will be paid for the teaching or author role only. Honoraria are not given to NCH faculty, course directors, members of planning committee, or any others involved in the educational activity.

1. Honoraria for visiting speakers are set by the course director upon recommendation of the course planning committee. The usual honoraria for the discipline, background of speaker, and other relevant facts are considered when determining the amount of the honoraria. Honoraria should fall between the following ranges:
 - a) Usual Visiting Speaker honorarium: \$250-\$1,500 per presentation
 - b) Special circumstance Visiting Speakers honorarium: \$750-\$3,500 per presentation

Honorariums exceeding \$5000 or amounts as listed above require approval from a member of the IPCE Program Executive Committee.

2. Reimbursement of out-of-pocket expenses for visiting speakers must be included in activity budgets and is based on the following criteria:
 - a) Travel - Travel arrangements can be made by either the visiting speaker or NCH. If the visiting speaker arranges his/her own transportation, complete itineraries and receipts must be presented to NCH in order to be reimbursed. Mode of travel is determined by the most efficient and cost-effective manner to transport the visiting speaker to the program. Airfare is reimbursed for the coach rate unless exceptions are made by the VP/DIO, Education. Mileage is reimbursed at the current NCH approved rate. Airport parking and taxi service is reimbursed provided receipts are submitted.
 - b) Accommodations - Visiting speaker's hotel accommodations and travel to and from the airport and hotel are made at the discretion of NCH IPCE Program staff and are detailed in the speaker agreement.
 - c) Meals - Meals not included as part of the conference are calculated

based on the current NCH per diem rate. In addition, meal expenses for staff to host each out- of-town guest are included in the budget based on the same criteria.

- d) Personal Expenses - Personal Expenses which include, but are not limited to, phone calls, movies, dry cleaning, and expenses for accompanying guests are not reimbursed. This information is included in correspondence with each visiting professor.
- 3. If a visiting speaker is coming into town for multiple talks at different institutions in addition to NCH, the IPCE Program staff or designee, will contact the other institutions to ensure travel and reimbursement of out-of-pocket expenses are consistent with NCH policies and are not being directly provided by a commercial entity.
- 4. The IPCE Program Honoraria and Reimbursement policy acts in accordance with the guiding principles outlined in NCH's Administrative Policy number II-4: Educational Program Budgets, originated 8/30/02.

All exceptions must be approved by the VP/DIO, Education.



Interprofessional Continuing Education (IPCE) Program
JOINT PROVIDERSHIP POLICY

Nationwide Children's Hospital (NCH) never enters into joint providerships/collaborations with commercial entities that produce, market, re-sell, or distribute health care goods or services consumed by, or used on, patients.

At times NCH may elect to work with other institutions to offer continuing education (CE) activities. NCH will enter into these relationships in order to fulfill its IPCE Program mission by adding valuable expertise, incorporating innovative educational strategies, and/or reaching target audiences otherwise difficult to attract as a means to improve quality of care, clinical outcomes, and professional practices.

These relationships fall into one of two categories: (1) non-accredited provider (joint providership) or (2) another accredited provider. The terms and conditions of each are outlined below.

Joint Providership

A CE activity is jointly provided when NCH plans, delivers, and evaluates the activity with a non-accredited provider. NCH offers joint providership when the following conditions are met:

1. The content of the activity is within the scope of the IPCE Program mission of NCH.
2. The non-accredited provider agrees to abide by all of the requirements, standards and policies and procedures established by Joint Accreditation, the IPCE Program and NCH.
3. A member of NCH Integrated Hospital Advisory (IHA) Committee or the Committee's designee is involved in planning the activity.
4. The IPCE Committee reviews and approves the activity.

In order to be considered a joint provider, the non-accredited provider must participate in the development, promotion, implementation, and/or evaluation of the activity. The respective roles and responsibilities are outlined in a Joint Providership Agreement (JPA) that is signed by appropriate representatives from each institution as soon as the prospective joint provider becomes meaningfully engaged in the activity and declares an interest in becoming a joint provider. Providing an educational grant without other involvement is considered financial support only. All financial transactions (monetary and in-kind) must be documented and fully accounted for in the financial records. The JPA requires the respective responsibilities of each entity are specified:

1. NCH may delegate some responsibilities to the non-accredited provider, however NCH

must retain ultimate responsibility for the CE activity.

2. The joint providership accreditation statement is utilized on all materials.
3. NCH is identified on all publicity materials. These materials must be reviewed and approved by a member of the Interprofessional Education Committee prior to printing.
4. NCH maintains a record of all participants, budget/finances, and evaluation for at least six years.
5. Information derived from the evaluation is utilized in planning future jointly provided activities. An IPCE Program staff or designee must approve the evaluation methods prior to the activity.
6. The JPA must be signed by all parties prior to approval of the activity CE credit.
7. Joint Providership Fees
 - a) Joint Providership fees are established by the IPCE Program and approved by the Executive Committee.
 - b) The non-accredited provider must agree to pay the fee specified by the IPCE Education Committee. IPCE Education Committee must approve any waiver of these fees.
 - c) In consideration of the following criteria, JP fees may be waived or partially waived:
 - i. The non-accredited provider is chaired by a NCH staff member in a leadership role.
 - ii. The target audience is faculty and staff of NCH (atleast30%).
 - iii. The non-accredited provider demonstrates that the fee presents such financial hardship that the activity could not be produced.
 - iv. Previous collaborations on educational activities and the joint provider's history of accreditation compliance.
 - v. The complexity/simplicity of the activity (based on attendance size, location, conference duration, commercial support)
 - vi. Waiving, or partial waiving, of the fee represents an "in-kind" contribution of a larger NCH partnership and is designated as such in the budget.
8. Commercial Support
 - a) All commercial support must be documented in a written Letter of Agreement (LOA) signed in advance of the activity by the commercial entity and the VP/DIO, Education.
 - b) The LOA cannot be between the non-accredited provider and the commercial entity.
9. If a NCH staff member is speaking at a non-accredited institution that is paying the staff member an honorarium and that institution requests CE credit, a JPA may be entered into, provided the conditions listed above are met. If an institution pays NCH for the services provided, NCH pays the honorarium/speaker expenses and NCH plans the activity, then the activity is directly sponsored by NCH.

Activities Planned with A CE Accredited Provider

1. If two or more accredited providers are involved in a CE activity, one provider must assume responsibility for the activity.
2. The accreditation statement for the CE activity must be the direct sponsorship statement.
3. If NCH assumes CE accreditation responsibility for the activity, then the activity must be approved by the IPCE Education Committee. The relationship with any accredited providers should be identified on the CE application.
4. If NCH chooses to delegate certain responsibilities to the other provider, the respective responsibilities must be documented in the activity file.
5. All financial support from other providers must be documented and acknowledged per NCH policies.
6. The other providers involved in the activity may not be listed as joint providers or co-sponsors. Their involvement in the activity will be listed as: “In collaboration with...”

Other Types of Collaboration

1. Occasionally a group or organization may be involved in a CE activity, but not assume a formal role as outlined above. For example, they may provide a mailing list or assist with the needs assessment process. In these instances, the appropriate acknowledgement of their role is “With assistance from...” If this assistance involves financial support, the relationship must be documented and acknowledged.
2. Departments or sections within NCH are incorporated within the NCH sponsorship umbrella. They may be listed under NCH: e.g.:

“Sponsored by:
 Nationwide Children’s Hospital
 Education Department
 Infectious Diseases”



Interprofessional Continuing Education (IPCE) Program

RECORDS RETENTION POLICY

The following continuing education (CE) records are maintained by the IPCE Program, Nationwide Children's Hospital.

1. **Attendance Records:** Attendance records for CE activities are maintained by the IPCE Program. The IPCE Program will be able to verify learner participation for at least six years from the date of any CE activity approved for any credit type designated by Joint Accreditation.
2. **Activity Documentation:** Individual activity files and documentation of CE planning and presentation are retained for six years or longer. If the activity is an enduring material or internet CE, the IPCE Program retains the actual CE product or a URL and access code.
3. **ICPE Program Committee Meeting Minutes:** Records of all meeting minutes and distributed meeting attachments are retained by the IPCE Program for 6 years or longer.
4. **Policies and Procedures (Expired):** A copy of all expired and discarded policies and procedures are kept on file by the IPCE Program permanently.
5. **Purging of Records:** Records older than the required retention period are purged upon approval from the Integrated Hospital Advisory Committee Chairperson.
6. **Disaster Recovery:** All electronic documents, including databases, are backed up daily on the hospital network. For on-line activities, NCH may employ an outside vendor (e.g. cornerstone) for hosting of content. Back up would follow the vendor's protocols, which must be at least daily.

Approved by IPCE Program Executive Committee: 6/24/2019

Approved by IPCE Program Education Committee: 6/24/2019



Interprofessional Continuing Education (IPCE) Program

IPCE PROGRAM EXECUTIVE COMMITTEE SCOPE AND AUTHORITY

COMPOSITION

The IPCE Executive Committee shall consist of the following representatives:

Voting:

- Director, IPCE Program
- VP of Education/DIO
- Chief Pharmacy Officer
- CNO/Senior VP of Patient Care Services
- Physician Educator (appointed by the CMO and Medical Staff President)

Non-voting:

- Staff, IPCE Program Administrator

DUTIES

IPCE Program Executive Committee will:

1. Set the strategic direction to include approving the mission, vision, strategic plan, and annual goals of the IPCE Program; assure integration with other NCH strategic initiatives in order to improve professional practice and patient outcomes.
2. Approve policies and procedures pertaining to continuing educational activities, including, but not limited to, those receiving Joint Accreditation (JA) credit that support best practices.
3. Oversee the IPCE Program budget and resources to efficiently and effectively deliver interprofessional continuing education; monitor annual program expenses and revenue; assure the IPCE Program is in full compliance with NCH's policies and procedures.
4. Appoint members to the IPCE Program Integrated Hospital Advisory Committee and assigns responsibility for this committee to establish and oversee the administration of the IPCE Program.

MEETINGS

The IPCE Program Executive Committee will meet quarterly; or no less than three times per year or as otherwise necessary at the call of a committee member.

ATTENDANCE AND ENGAGEMENT:

The IPCE Program Executive Committee serves a vital communication and coordination link for continuing education throughout NCH. Members must attend all meetings in person or by conference call.

Approved by IPCE Program Executive Committee: 6/24/2019



Interprofessional Continuing Education (IPCE) Program

IPCE PROGRAM INTEGRATED HOSPITAL ADVISORY (IHA) COMMITTEE SCOPE AND AUTHORITY

COMPOSITION

The IPCE Program IHA Committee shall be appointed by the IPCE Program Executive Committee and shall consist, at a minimum, of the following representatives:

Members:

- Physician Leader(s) (Medical)
- Physician Leader(s) (Surgical)
- Nurse Leader(s)
- Pharmacy Leader(s)
- Regional Affiliate Partner(s)
- Research Institute Leader
- Outreach Education Leader
- Community/Population Health Leader
- Other Specialty Representatives as appropriate
- QIS Leader, representative or designee
- Director, IPCE Program
- IPCE Program Administrator
- IPCE Program Education Committee members

DUTIES

The IPCE Program IHA Committee has responsibility for establishing and overseeing the overall IPCE Program.

IPCE Program IHA Committee will:

1. Review the mission, vision, strategic plan, and annual goals of the IPCE Program. Ensure that the IPCE Program is integrated into the NCH quality/patient safety program and other strategic initiatives in order to improve professional practice.
2. Oversee processes to assure that educational activities are balanced, independent, objective, scientifically rigorous, and follow best educational principles consistent with the NCH IPCE Program Mission.

3. Analyze practice gaps of NCH's healthcare team and pediatric healthcare providers regionally, nationally, and internationally; professional, certification, governmental, and regulatory organizations; and NCH's administration.
4. Review the effectiveness of the IPCE Program through periodic evaluation of the overall program goals, strategies and educational activity outcomes and utilize the results to make improvements. Report and or present progress in fulfilling the mission and annual goals to the IPCE Program Executive Committee.
5. Review policies and procedures pertaining to IPCE Program; ensure all educational activities comply with Joint Accreditation (JA) criteria, including but not limited to a minimum threshold of 25% interprofessional activities; conduct a quarterly review of activities.
6. Advocate for programmatic, technological, and financial resources to fulfill the IPCE Program mission.
7. Utilize NCH's financial, human resources, and other administrative systems to conduct business and assure that activities and operations of the IPCE Program are in full compliance with NCH's policies and procedures.
8. Collaborate with the IPCE Program Education Committee and provide Program oversight, alignment and shared IPCE and learning.

MEETINGS

The IPCE Program IHA Committee will meet quarterly, or other as necessary, at the call of the committee chair. A quorum shall consist of 60% of members.

ATTENDANCE AND ENGAGEMENT:

The IPCE Program IHA Committee serves a vital communication and coordination link for continuing education throughout NCH. Therefore, members or designees must attend at least 2 of the 4 meetings annually (in-person or teleconference). A designee may take the place of member with prior advance notice.

Approved by IPCE Program Executive Committee: 6/24/19
Approved by IPCE Program IHA Committee:6/24/2019