



2026-2027 In-Hospital New Series Proposal

In-hospital series are planned by and presented to the organization's professional staff to improve patient care. In-hospital series generally target the same audience over the whole series. These series are also known as grand rounds, journal clubs, case conferences, and morbidity and mortality rounds.


This form asks for the essential logistical and educational information needed to provide credit for your series.

Contact Mass General Brigham Continuing Professional Development (MGB CPD) at mgbcpd@mgb.org for any questions.

Series Details

1. Name of the Series *

2. Hospital or Entity *

3. Series Start Date *

Please provide the expected date of the first session.



4. Day(s) of the Week the Sessions Take Place *

Check all that apply.

Monday

Tuesday

Wednesday

Thursday

Friday

5. Session Start Time *

Examples: (8:00 AM, 12:00 PM, 1:30 PM)

6. Session Duration *


1 Hour

2 Hours

Other

7. Session Occurrence/Frequency *


Please indicate how often your sessions take place.

Select your answer 

8. Session Frequency - additional details

Provide additional detail as needed. (e.g., first Tuesday, every Monday, 2nd and 4th Wednesday, etc.)

9. Activity Format *

Select your answer 

Course Directors, Coordinators and Planners

This form includes space for one director, coordinator, and planner. There will be an option to upload a document with additional directors, coordinators, and planners. We encourage you to include trainees (residents or fellows) as planners or reviewers for your series.

10. Name and Credentials of Course Director *

Please include credentials (e.g., Alison Smith, MD). CPD needs credentials to confirm planners for all requested credits are represented.

11. Course Director Email *

Please enter an email

12. Does this course director need admin access to the series website? *

13. Name and Credentials of Course Coordinator *

Please include credentials (e.g., Alison Smith, MD). CPD needs credentials to confirm planners for all requested credits are represented.

14. Course Coordinator Email *

Please enter an email

15. Do you want to add additional course directors, coordinators, or planners? *

Reminder: All professions receiving credit must have a corresponding planner to represent the profession. (For example, a series offering nursing credits must include a nurse as a planner.)

Yes

No

16. Please upload a file with any additional course directors, coordinators, or planners

Please use this link to download a file that can be uploaded with the additional contacts:

<https://bit.ly/43qhm0e>

17. What method will you be using for the speaker disclosures in your series - will you be using on-line disclosures or the pdf version of disclosures or a combo of both? *

This method can be changed at a later date during the academic year

On-line disclosures

PDF disclosures

Combo disclosures (on-line & pdf)

Credits Being Offered

Joint Accreditation

Mass General Brigham is a provider of Joint Accreditation for Interprofessional Continuing Education. As a Joint Accreditation provider, Mass General Brigham can provide credit for any single discipline or combination of **physicians, nurses, pharmacists, physician assistants, dentists, psychologists, optometrists, social workers, dieticians and athletic trainers.**

For each credit type you are offering, there must be a planner who represents the profession. Having a representative from the profession review the activity and offer input from their profession's perspective meets this requirement.

The first 2 credit types (e.g., physicians and nurses) are included in the series ac-

18. Credits Being Offered *

- Physicians
- Nurses (includes Nurse Practitioners)
- Psychologists
- Social Workers
- Pharmacists (includes Pharmacy Technicians)
- Physician Assistants
- Optometrists
- Dentists
- Dieticians
- Athletic Trainers

Maintenance of Certification (MOC)

We can provide MOC for boards participating in the ACCME "CME That Counts for MOC" collaboration. For more information about the collaboration, visit <https://www.accme.org/cme-counts-for-moc>.

The fee to add this credit is \$500.

19. Are you interested in offering MOC for this series? *

- Yes
- No
- Not sure (MGB CPD will contact you to answer your questions about MOC)

20. Please select MOC *

Please check all that apply.

- ABA Lifelong Learning
- ABA Patient Safety
- ABIM Medical Knowledge
- ABIM Patient Safety
- ABOHNS Self-Assessment
- ABOHNS Patient Safety
- ABPath Lifelong Learning
- ABP Lifelong Learning & Self-Assessment
- ABS Accredited CME
- ABS Self Assessment
- ABOS Accredited CME
- ABTS Accredited CME
- ABTS Patient Safety
- ABTS Self Assessment

21. Did you select ABIM, ABP, ABOHNS, ABS (self Assessment) or ABTS (self Assessment)? *

Yes

No

22. Which evaluation and feedback method(s) will you use? *

Series requesting MOC for ABIM, ABP and ABOHNS credits have an evaluation and feedback requirement. You can meet this requirement using one or more of the options listed below. For a full list of evaluation and feedback options, please see the ACCME Maintenance for Certification Program Guide, <https://www.accme.org/cme-counts-for-moc>, page 23. You will need to send copies of feedback summaries provided to learners to mgbcpd@mgb.org.

Please select all methods you plan to use. If you select "other," MGB CPD must approve the method.

Written responses done during meeting, with evaluation and feedback. Feedback provided using chat during the session or by email after the session.

Written responses with 2x/year evaluation or after every session. Evaluation completion is mandatory for anyone claiming credit and MOC feedback is provided by course director as email summary or as discussion during one of the sessions.

23. Are you interested in offering Quality Improvement MOC with your series?

The fee to add this credit is \$750.

Yes (MGB CPD will contact you to explain the process)

No

Not sure (MGB CPD will contact you to answer your questions)

Risk

24. Are you requesting Risk Management for this series? *

10 Risk Management credits are required every licensing cycle. Morbidity & Mortality (M&M) sessions are the only sessions that automatically meet the criteria for Risk Management in Massachusetts. For all other options, a form to determine risk credit will be required.

- Yes, this is an M&M series.** Use this option if all sessions are M&M.
M&Ms automatically meet the criteria for Risk Management in Massachusetts.
- Yes, for all sessions in the series.** Use this option if all sessions in the series meet risk management requirements, but not all sessions are M&M.
- Yes, for some of the sessions in the series.** Use this option if you anticipate some of the sessions in the series will meet risk management requirements.
- No.** Use this option if you anticipate none of the sessions in the series will meet risk management requirements.

25. Risk Management Topics *

Risk management study can include instruction on any of the items in the list below.

Please check topics you plan to discuss in the series.

- Medical Ethics
- Medical Legal Issues/Malpractice
- Quality Assurance
- Improving Patient Relations
- Review/Improvement of Non-Economic Aspects of Practice Management
- Implicit Bias in Healthcare
- End of Life Care
- Opioid Education and Pain Management
- Physician Burnout

Professional Practice Gap and Educational Needs

The practice gap is the gap between what the professional or team is doing or accomplishing compared to "what is achievable on the basis of current professional knowledge." (<https://www.accme.org/faq/educational-needs-criterion-what-meant-professional-practice-gap>)

26. Current Problems or Issues *

Please list 3-5 specific clinical examples of problems or issues that your series will address.

27. Education Needs *

Please describe what the learners need to address to improve the practice gap.

- **Knowledge Deficits:** Lack of understanding of current best practices or emerging technologies.
- **Competence Gaps:** Insufficient skills or abilities to perform specific tasks or procedures.
- **Performance Issues:** Inadequate application of knowledge or skills in real-world clinical settings

28. References *

Please provide 3-5 references to support the practice gap and educational needs. Examples of references include:

- Citations to journal articles
- Links to authorities such as the NIH or IOM
- Internal data with source such as EPIC

29. Barriers *

What are the potential barriers that may prevent attendees from changing the way they manage these patient problems? How do you plan to overcome these barriers?

30. Interactivity *

How will you ensure participants have ample time to engage with the presenters and each other?

- Case discussion
- Question and answer
- Evaluation and feedback during session
- Other

31. Desirable Professional Attributes and Core Competencies *

Please pick 2-4 competencies from the list below.

- Patient care and procedural skills
- Medical knowledge
- Practice-based learning and improvement
- Interpersonal and communication skills
- Professionalism
- Systems-based practice
- Values and ethics
- Roles and responsibilities for collaborative practice
- Interprofessional communication
- Teamwork and team-based care

Type of Change and Plans to Measure

*For activities selecting performance, quality and safety or patient outcomes: We will request that you complete a survey telling us about changes you measured and any results. We do not expect that education alone will impact higher-level outcomes. We do expect that the education may contribute to improvements, especially when combined with other interventions. For accreditation purposes, it is sufficient to observe and report changes that take place in the same timeframe as

32. What type of change do you plan to measure? *

State what this CE activity is designed to change in terms of learners' skills/strategy, performance, quality and safety, and/or patient outcomes.

- Skills/Strategy:** Learners will be able to say how they plan to make changes in individual or team practice
- Performance:** Learners will demonstrate changes in individual or team practice
- Quality and Safety:** Activity will contribute to improvements in quality and/or safety measures

33. How do you plan to measure changes? *

Please describe how you please to measure the changes chosen above.

Learning Objectives

Learning objectives describe what participants should be able to do after participating in this activity to improve the care of patients.

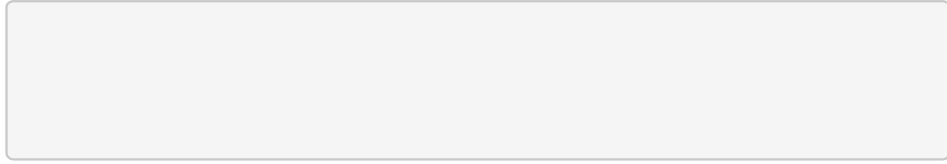
- The learning objectives need to be in measurable terms. (Please use this list: <http://bit.ly/3XjcG8J>.)
- If the series is providing credit for more than 1 profession, at least one learning objective must represent the team.
- List 3-5 learning objectives below.

34. Learning Objective 1 *

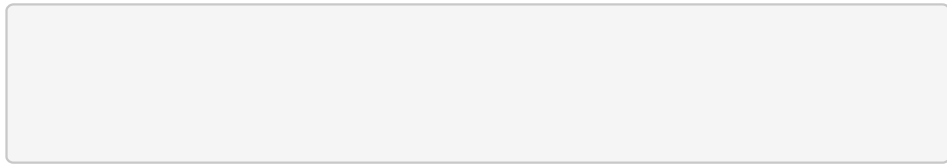
35. Learning Objective 2 *

36. Learning Objective 3 *

37. Learning Objective 4



38. Learning Objective 5



Evaluation

You DO NOT need to have an evaluation after every session tied to participant credit in the LMS.

Here is the link to a sample evaluation: <https://bit.ly/4ieJYxC>

39. Evaluation Frequency *

- 2x year (recommended)
- After every session

Systemwide Access to Series

MGB makes non-confidential series open to all MGB staff. Any MGB staff member can find the link to participate in an upcoming session on the Systemwide Grand Rounds Vitals page.

<https://partnershealthcare.sharepoint.com/sites/VitalsSystemwideGrandRounds>.

We have now built a library with all series recordings, also for systemwide access. Learners may text credit for up to 6 months after the session date. Learners may text credit for viewing the live or recorded version of the

40. My series is confidential *

- Yes – all sessions are confidential
- Yes – some sessions are confidential; some are non-confidential and are open to all MGB staff
- No – all sessions are non-confidential and are open to all MGB staff

41. Please explain why all of the sessions in your series are confidential. *

NOTE: Your series will be automatically excluded from the systemwide access project.

42. Please explain why some of the sessions in your series are confidential. *

NOTE: The systemwide site and recording library will include ONLY your non-confidential sessions.

43. Professions of the intended learners *

Please select any professions of the intended learners. This list is will be included on the Systemwide Grand Rounds Site.

- Physicians
- Nurses (includes Nurse Practitioners)
- Psychologists
- Social Workers
- Pharmacists (includes Pharmacy Technicians)
- Physician Assistants
- Optometrists
- Dentists
- Dieticians
- Athletic Trainers

44. Specialties of the Intended Learners *

Please select up to 3 specialties of the intended learners. This list is will be included on the Systemwide Grand Rounds Site.

Addiction Medicine

Allergy

Anesthesiology

Cardiology

Endocrinology

Geriatrics

Hematology

Hospitalists

Dieticians

Infectious Disease

Internal Medicine

Nephrology

Neurology/Neurocritical Care

Obstetrics

Oncology

Oral Surgery

Orthopaedics

Otolaryngology

45. Are you recording your sessions? *

A copyright & consent form will be required for speakers if you are recording.

NOTE: The systemwide site and recording library will include ONLY your non-confidential sessions.

Yes

No

46. Please provide the name of the recording contact person *

Who is the contact person for CPD to contact about the recordings?

47. Please provide the email for the recording contact person.

*

48. What is the current link to view the recordings for your series?

Please enter a URL

Vascular Medicine

49. Accreditation for Recordings *

Learners may text the credit code for **up to 6 months after the session date to receive credit for a recorded session**. There is no additional fee.

Series requesting credit for an enduring version of the series available until June 2027 must request additional accreditation. If you would like to request accreditation for the enduring/recorded version of your series through June 2027, there will be an additional fee. The additional fee will be the same as for the live series. For example, if the fee for your live series is \$2,750, the fee for the enduring version will be \$2,750. You will be required to send us copies of the recordings so that we can build the accredited enduring activity.

Please select an option below for accreditation for your recordings.

Accreditation for 6 months after each session date. Credit is

50. Alumni Access to Series *

MGB CPD is collaborating with the Mass General Brigham Alumni Association to offer educational opportunities to alumni of Mass General Brigham training programs. Alumni can view and sign up for upcoming sessions on the Alumni Association Network. Alumni must create an account and receive approval to participate in the network. GME staff verifies alumni status before approving the account. Confidential series are excluded from this initiative. Series will be listed here: <https://cpdlearn.massgeneralbrigham.org/alumni/>

- Yes – please list this series on the Alumni Network
- No – please DO NOT list this series on the Alumni Network
- Not sure – I need more information

51. Public Library of Recorded Sessions *

MGB CPD is developing a site to offer a library of recordings of sessions outside of our system. The purpose of this initiative is to grow recognition of MGB Education and to disseminate the excellent education content to audiences outside of our system. Speakers will opt in to allowing a recording of their session to be shared outside of MGB. Speakers will be required to provide a copyright and consent form. The recordings will be available for free. Credit will not be included. Confidential series are excluded from this initiative.

- Yes – please include this series in the content library for learners external to MGB.
- No – please DO NOT include this series in the content library for learners external to MGB.
- Not sure – I need more information

Additional Details

Please use this section to add any additional questions or details needed to build your site.

52. Please provide any additional details

Payment

We will calculate your fee and transfer the payment when your series is approved. Receipt is available upon request.

For fees, please see the call for proposals email or visit this link:

<https://bit.ly/3DFW8RE>

Reminder: Commercial Funding is not allowed for in-hospital series.

53. Please provide the Company ID (formerly GL) *

e.g., 0100, 1200, 2200

The value must be a number

54. Please provide the Grant ID or Cost Center *

Grant ID Examples: GR0020765, GR0017192

Cost Center Examples: MGB530, PH1479

Submission

By submitting this form, you attest that you will abide by all MGB CPD policies and the ACCME Standards for Integrity and Independence

[\(https://accme.org/rules/standards/\)](https://accme.org/rules/standards/)

55. Your Name *

56. Today's Date *

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