

# *Italian CME System*

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# Italy

- 2002 :** CME activity started
- 2003-07 :** 30 CME credits/year  
(150 credits in five years)
- 2008-10 :** 50 CME credits/year  
(150 credits in three years)

# **Italian CME specificity**

- **All healthcare professionals must participate to CME**
- **Accreditation may be granted**
  - **on a National basis**
  - **on a Regional basis**

# Italy

## Accreditation Bodies/Agencies

- 1. National Committee for CME**  
(nominated by the Ministry of Public Healthcare) includes CME experts, professional representatives, regional representatives
- 2. Regional Committees for CME**  
nominated in each Region by the local government

**Regional Providers can plan and organize CME activities only in the Region that has granted accreditation, mainly for healthcare professionals working in that Region**

# **Italian CME is changing :**

- **from single event accreditation to providers' accreditation**
- **distance learning will be introduced in 2010**
- **future development will include CPD based on an individual dossier including guided in site activities (“learning by doing”)**
- **CME credits attributed to healthcare professionals will be electronically recorded by a national Agency of Professional Boards and by Regions**

# CME - ITALY 2009

## Criteria for Provider Accreditation

Requirements for Provider Accreditation will regard :

- the subject
- the organization
- the activity aims and contents

*For distance- learning the “organization” requirements will include the technology that the provider will use*

# **Italian CME and Europe**

**The different criteria for assigning CME credits and recognizing Providers do not allow equivalence and exchange with the European Accreditation System (UEMS - EACCME)**

**The Italian CME system recognizes 50% of CME credits that Italian healthcare professionals can obtain in EU Countries, USA and Canada**

## **Italy - CME**

**CME credits will be attributed by Providers to their educational programs on the basis of both :**

- **the time required to complete the educational program and correctly answer  $>75\%$  questions**
- **the pedagogic quality of the procedure**

# CME - ITALY 2009

## Quality of Distance-Learning CME

### *Chronic complications of Diabetes :*

- **classification and description**
- **+ images (video)**
- **+ images and clinical examples**
- **+ user involvement in clinical cases**
- **+ links to background**
- **+ real time access to tutorship**

# CME - ITALY 2009

- **Pharmaceutical and medical instrument companies cannot be CME providers** (not even as partners of an accredited provider)  
They can sponsor CME programs.
- **Sponsorship and advertising** for distance-learning will follow the same procedures approved for residential events
- **Commercial advertising** cannot interrupt or interfere with the CME content
- **Sponsor** can be indicated **only at the beginning or at the end** of the program

## CME - ITALY 2009

No clear and formal **sanctions** have been introduced for health-care professionals that do not cope with CME requirements

Some local institutions, however, have already included CME among criteria for the healthcare professional evaluation for career progression or contract renewal