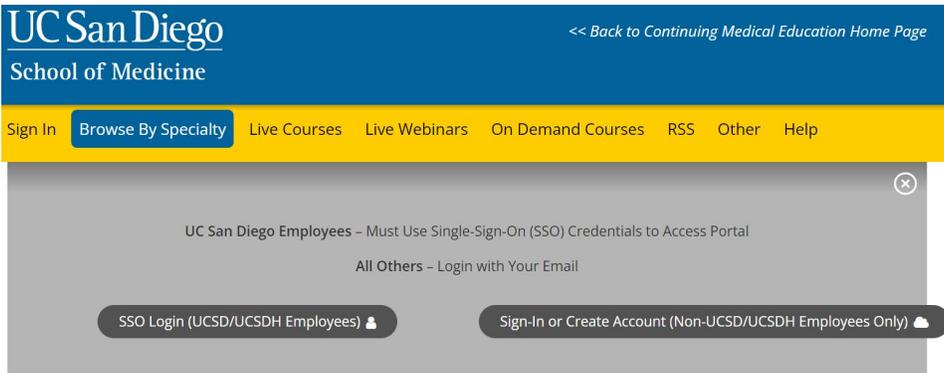


Step 1: <https://ucsd.cloud-cme.com/default.aspx>

Step 2: Click **Sign In**



Step 3: If you are a UCSD/UCSDH employee log in using the **SSO Login** option otherwise click on **Sign-In** or **Create Account**



Step 4: Scroll down to the bottom of the page and click on **Plan an Activity**

WELCOME TO THE UC SAN DIEGO CONTINUING MEDICAL EDUCATION LEARNING PORTAL

Here you can access information about courses offered, register to attend, and manage your learning needs. If you are an educator or planner, you can also browse resources and apply for credit.

If you are a UC San Diego or UC San Diego Health employee, please log in with your @ucsd.edu SSO credentials (do not use your health email account).



Step 5: Click the Create New Application button:

CME APPLICATION

Please complete the entire accreditation application and submit for review by UC San Diego Continuing Medical Education. Scroll to the bottom of each form (or page) and click SAVE. Note that you will need the email addresses of any persons you plan to include as planners or faculty in the application. **Please use @ucsd.edu emails only** for all UC San Diego faculty/staff. The application can be edited as needed until all required information is entered. When finished, click the 'Submit For Review' button to send the application for review and possible approval. Review times vary, depending on how complete your application is and whether financial relationships from all persons have been submitted. You will be contacted via email with the status and/or approval of your application.

[+ Create New Application](#) [Export XLS](#) [Reset Filters](#) [Find Disclosures](#)

Filter By Application Status: Filter By Accreditation: Filter By Activity Type: Filter By Date Range: [Search](#)

Filter By Event Name:

Step 6: Start by entering the activity information into the Basic Information tab.

[Find Disclosures](#)

Basic Information

Specify the following for your activity

Activity Name: *

Activity Format: *

Planned Learning Technique(s): Select all methods planned to enhance learner engagement during the activity: *

<input type="checkbox"/> Case Based Learning	<input type="checkbox"/> Debate
<input type="checkbox"/> Didactic Sessions	<input type="checkbox"/> Panel Discussion
<input type="checkbox"/> Patient Perspective (e.g., live patient/patient advocate speaker)	<input type="checkbox"/> Polling/Interaction
<input type="checkbox"/> Reflective Learning	<input type="checkbox"/> Project Based Learning (e.g., quality improvement project)
<input type="checkbox"/> Skill-Based Training/Hands-On Workshop	<input type="checkbox"/> Simulation
<input type="checkbox"/> Standardized Patients/Medical Actors	<input type="checkbox"/> Small Group Learning
<input type="checkbox"/> Use of Medical Equipment	<input type="checkbox"/> Use of Cadavers
	<input type="checkbox"/> Other (specify)

AMA Activity Format: *

<input type="checkbox"/> Live Activity	<input type="checkbox"/> Enduring Material
<input type="checkbox"/> Journal-based CME activity	<input type="checkbox"/> Test-item writing activity
<input type="checkbox"/> Manuscript review activity	<input type="checkbox"/> PI CME activity
<input type="checkbox"/> Internet point-of-care activity	<input type="checkbox"/> Learning from teaching
<input type="checkbox"/> Other	

If other format, please specify:

Does the content of this activity contain clinical or non-clinical (i.e. leadership, communication, ethics, professional responsibilities, etc.) or a combination of both? *

Yes, Clinical No, Non-Clinical Combination of Both

- Add any other pertinent information regarding this application, such as additional session dates, at the bottom of this page under application comments.

Application Comments:

[Save and Continue](#)

- After all questions in red have been answered please click **Save and Continue** at the bottom of the screen.

Equity, Diversity and Inclusion

Planners and faculty of CME/CPD education are expected to consider equity, diversity, and inclusion in the planning, development, delivery, and evaluation of activities. This includes consideration of the specific needs of the populations served and disparities that may influence the health outcomes of patients. At a minimum, all activities that are related to patient care must include curriculum that includes the understanding of cultural and linguistic competency (CLC) and implicit bias (IB), per [California legal mandates](#).

Check the appropriate box(s) indicating which elements you will consider and include in the planning and delivery of this activity (Select all that apply): *

- Specific content and/or open discussion on implicit bias along the lines of race, ethnicity, gender identity, sexual orientation, age, socioeconomic status, etc.
- Consideration of the risks, experiences and needs of vulnerable or marginalized population groups including indigenous peoples, age-related groups, immigrants, refugees, ethnocultural and racialized (IRER) groups, linguistic groups, different genders
- Inequities in health status, health outcomes or quality of care among population groups
- Equity-based improvements in program or service delivery, decision making or resource allocation
- Other, please specify
- None, please specify reason

Save and Continue

Step 7: Enter faculty and planner information into the **Planners and Faculty** tab.

Find Disclosures

Basic Information

Planners and Faculty

Gap and Needs

Objectives and Learning Outcomes

Financial Information

Commendation Criteria

Signatures

Files - upload/download

Comments

Return To Applications List

Approval

Instructions: Click the sections of the application to review. Add comments below. Supporting files may have been uploaded and if so, are available in the File uploads area.

Approve

Reject

Save

Update Missing Disclosures, if available

To add more planners or faculty, click the green plus (+) sign. To remove a planner or faculty, click the red minus (-) sign.

Upload Faculty List (Acceptable File Types: Word, Excel, or PDF)

Add Files

Planner/Faculty

Email *

First and Last Name *

Degree *

Profession *

Title

Department or Affiliation

Role in Activity *

Will this faculty/planning committee member be limited to a non-clinical (i.e., communication, leadership, ethics, etc.) subject only? *

Yes

No

The disclosure field below is for use by the system and is not editable, please do not attempt to enter information into the field.

Disclosure Information

Save and Continue

- It is required for you to collect disclosures in CloudCME from all faculty and planners before you can submit your application.
- Under the **Planners and Faculty** section be sure to **use @UCSD.EDU** email address and not @health.ucsd.edu email addresses for any UCSD/UCSDH employees.
- You are required to assign at least one (1) meeting coordinator and one (1) course director.

- The course director must be a full time UC San Diego faculty member and must not have any relevant conflicts of interest.
- If the course director has existing financial relationships that are relevant to the content area of your activity, an additional course director must be assigned, who does **not** have any financial relationships that are relevant to the content area of your activity.
- If you are submitting the application and you are the meeting coordinator, you need to assign yourself to the application.
- To add additional individuals, click on the green plus sign on the top right.

Once this section is completed click on **Save and Continue**.

Step 8: Complete the following section, **Gap and Needs**

The screenshot shows the 'Gap and Needs' section of the application. On the left is a sidebar with a search bar labeled 'Find Disclosures' and a list of navigation items: Basic Information, Planners and Faculty, **Gap and Needs** (highlighted with a red border), Objectives and Learning Outcomes, Financial Information, Commendation Criteria, Signatures, Files - upload/download, Comments, and Return To Applications List. Above the sidebar is a 'print' icon. The main content area has a dark header 'Gaps and Needs' and a sub-header 'Gap Analysis'. The text reads: 'State the professional practice gap(s) of your learners. This is the problem in practice or the opportunity for improvement (difference between current and optimal practice) of your learners that drive the planning for th activity: *'. Below this is a large red-to-white gradient text input field. The next instruction is: 'State the educational need(s) that you determine to be the cause of the professional practice gap(s)'. Two examples are provided: 'Example: A knowledge gap exists because learners are unaware of the latest screening guidelines.' and 'Example: A performance gap exists because learners do not know how to correctly use ICU monitors. *'. Below the examples are three radio button options: 'Knowledge Need', 'Competence Need', and 'Performance Need'. The final instruction is: 'The major reason for planning your accredited activity should be to close the gap(s) you have identified. Stat what this CME activity was designed to change in terms of increased competence, improved performance or patient outcomes. (50 words max):'.

Once you complete all required questions in red click on **Save and Continue** on the bottom left



Step 9: Complete the following section, **Objectives and Learning Outcomes**

Find Disclosures print

Basic Information
Planners and Faculty
Gap and Needs
Objectives and Learning Outcomes
Financial Information
Commendation Criteria
Signatures
Files - upload/download
Comments
Return To Applications List

Objectives, Learning Outcomes and Competencies

Objectives/Learning Outcomes

Learning objectives must be measurable and provide linkage to the desired outcome(s) of the activity. For more information, use the following [resource for writing objectives](#).

To enter your objectives/learning outcomes, type an objective/learning outcome into the table below. Typical activities list approximately 1-2 learning objectives per practice gap, or 3-4 learning objectives per overall activity.

To add additional objective/learning outcomes, click the (+) plus icon. To remove objectives, click the (-) minus icon.

At the conclusion of this activity, participants will be able to:

Objectives

Once you complete all required questions in red click on **Save and Continue** on the bottom left

Save and Continue

Step 10: Complete the following section, **Financial Information**

Find Disclosures print

Basic Information
Planners and Faculty
Gap and Needs
Objectives and Learning Outcomes
Financial Information
Commendation Criteria
Signatures
Files - upload/download
Comments
Return To Applications List

Financial Information

Enter information about funding for this activity in this section and upload a projected budget. Note that all commercial support pursued must be in compliance with the **ACCME Standards for Integrity and Independence in Accredited Continuing Education**.

Will you pursue commercial support for this activity (financial and/or in-kind)? *

Yes No

Will you pursue other non-commercial financial support such as government grants or private donations? *

Yes No

Will you provide exhibits and/or other promotional opportunities in conjunction with this activity? *

Yes No

You may retrieve our [budget template](#) to use, or upload your own format.

Upload Projected Budget (Accepted File Types: Excel, Word, PDF)

Add Files

Save and Continue

Approval

Instructions: Click the sections of the application to review. Add comments below. Supporting files may have been uploaded and if so, are available in the File uploads area.

- Once section is completed click on **Save and Continue**

Step 11: (Not a required tab), Commendation Criteria

Find Disclosures

print

Basic Information
Planners and Faculty
Gap and Needs
Objectives and Learning Outcomes
Financial Information
Commendation Criteria
Signatures
Files - upload/download
Comments
Return To Applications List

Commendation Criteria

ACCME Commendation Criteria

The ACCME encourages and rewards accredited CME providers for implementing best practices in educational methods, engagement, evaluation, assessment of change, and generating meaningful outcomes.

For this activity, please consider whether any of the following criteria may apply. If you are uncertain, please leave blank or contact the CME team.

Promotes Team-Based Education

- C23 Members of interprofessional teams are engaged in the planning and delivery of Interprofessional continuing education (ICPE).
- C24 Patient/public representatives are engaged in the planning and delivery of CME.
- C25 Students of the health professions are engaged in the planning and delivery of CME.

Approval

This is not a required tab; however, if you think your activity touches on any of these items feel free to check the appropriate boxes.

Step 12: Complete the following section, Signatures

Find Disclosures

print

Basic Information
Planners and Faculty
Gap and Needs
Objectives and Learning Outcomes
Financial Information
Commendation Criteria
Signatures
Files - upload/download
Comments
Return To Applications List

Signatures

Attestation:

Please review the UC San Diego [CME Application Terms and Conditions](#) before submitting your application.

By submitting this application, I attest to the accuracy and completeness of the application, accept responsibility for the planning, implementation and evaluation of this activity, and agree to the UC San Diego Application Terms and Conditions and associated accreditation fees.

Please indicate payment method (billed separately):

- Credit Card
- RMP recharge via a UC San Diego Chart of Accounts (COA)
- Check (mailed separately)
- Other, please specify

Signature: *

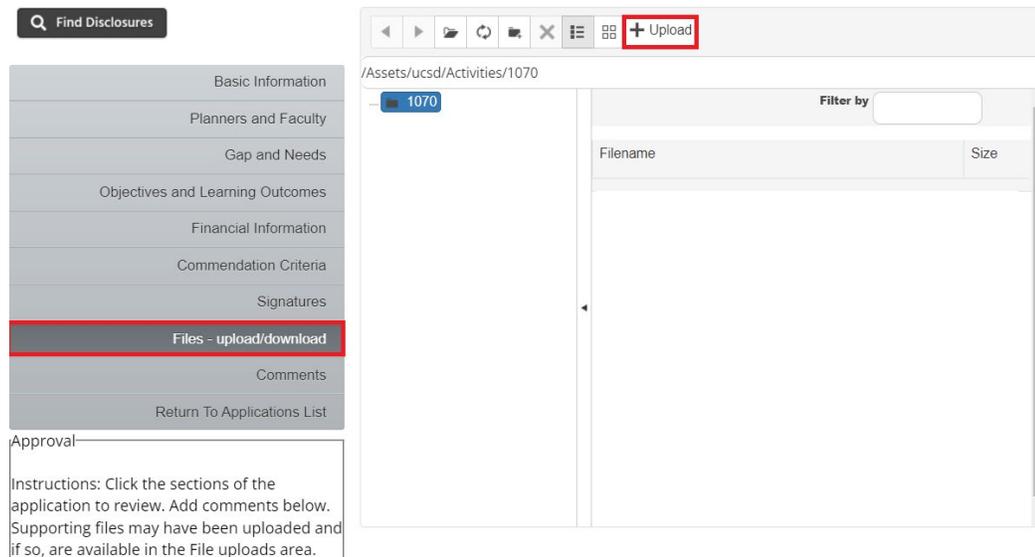
Date:

Approval

Instructions: Click the sections of the application to review. Add comments below. Supporting files may have been uploaded and

Once you indicate how you plan to pay the accreditation fee please sign and click on **Save Application**.

Step 13: (not required section), Files – upload/download



If you have any other documents to share that would help during the application review process please upload them by clicking on the upload button on the top right.

Step 14: Application Completed

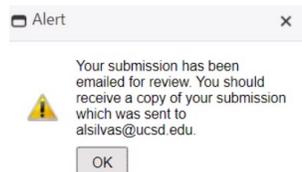
You will receive a notification indicating you have completed your CME application and that it is ready for submission pending review and submission.



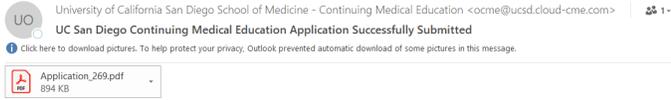
Step 15: When you have completed the activity application and all disclosures are on file, click the **Submit For Review** button.

ActivityID	Activity Details	Author	Planners	Disclosure Status	Copy	Delete
269	<p>Activity Type: Directly Provided - Courses Activity Date: 2/2/2023 8:00:00 AM Last Revised: 11/14/2022 5:19:45 PM</p>	Jeonathan Rodriguez Roman, MPH	Jeonathan Rodriguez Roman, MPH (Course Director), John Rodriguez, MPH (Other Planning Committee Member)	All necessary disclosures on file.		

Once you have reviewed hit the **Submit For Review** you will receive a notification indicating that your submission has been emailed for review



You will receive a copy of your application emailed to you



Hello Jeonathan Rodriguez Roman, MPH

The accreditation application for the following Directly Provided - Courses has been submitted for review.

Submitter: **Jeonathan Rodriguez Roman, MPH** (jrodriguezroman@ucsd.edu)
Title: **Test Application [ID#269]**
Type: **Directly Provided - Courses**
Start Date: **02/02/2023 08:00 AM**
End Date: **02/02/2023 09:00 AM**

This application is now locked and no longer available for editing. Please allow 2-3 weeks for completion of the application review process.

- If approved, you will receive an approval email and an accreditation specialist will be in contact regarding next steps.
- If rejected, you will receive an email informing you of next steps.

Thank you,

Continuing Medical Education
UC San Diego
cmeaccreditation@health.ucsd.edu

The activity application button will be greyed out until the review is complete. Activity application review times can vary but usually take up to 15 business days. You will be contacted by email when the review is complete, when the application has been approved, if the application requires additional information, or the application has been rejected. If an application has been rejected, click on the activity name. Then, click **Comments** to view the peer reviewer feedback and/or make any required changes.