Guidance for BMS-IME Projects:
Updates, Interim Reports, and Final Outcomes Reports

❖ Updates: Notify the respective IME Specialist via email at least 60 days before launch date with the activity details:
  o Program date, time, and venue or online link to the activity
  o Program agenda
  o Confirmed Program faculty
  o Registration information
  o Number of complimentary observer spots, if applicable
  o Exhibit or other opportunities available

❖ Submission of Interim and Final Outcomes Reports
  o Live Meetings: Submit Final Outcomes Reports within 60 days post-meeting. If a 6-week or 3-month follow-up post-meeting survey is conducted, submit a final Outcomes Report within 30 days of the post-meeting survey. Please notify us in advance if a report submission past the 60 day requirement is needed.
  o Interim Components (e.g., webcast, print, audio, podcast, etc.):
    o Interim Reports are due every 90 days from initiation of the enduring activity.
    o Final Report is due 90 days from close of the activity
  o All Reports should be emailed to IMEOutcomes@bms.com.

❖ Format and Content of the Interim and Final Outcomes Reports
  o The written Outcomes Report(s) should include the program name, provider(s), venue, supporter(s), maximum number of credits offered and granted, launch and closing dates of the activity (both live and enduring) and the BMS grant number.
  o It should begin with a 2-3 page/slide Executive Summary of the activity
    o Material contained within the Executive Summary should include:
      - Educational Purpose: the professional practice gap addressed
      - Measurable learning objectives
      - Unique registration and activity information/link to website
      - Launch date(s) of activities including the duration of enduring materials such as print journals, webinar schedule, online module, live event/series schedule
      - Target Audience and Number of Learners reached
      - Written summary of the outcomes analysis, including:
        ❖ Key outcomes and highlights of supported program
        ❖ The most significant impact of the educational activity on learners
        - Collaborations: Single or multi-supported, and if so, by whom?
  o Target audience, with estimated and actual numbers of attendees grouped by licensure (MD, NP/PA, Nurses, Pharmacists and other HCPs). A breakdown of US vs. International participation, where applicable, should also be included. The Interim Reports should include attendees to date.
  o Describe the learning objectives and the measured achievement of the learning objectives.
  o Describe any increase in knowledge, confidence, and performance and relate to the data collected.
  o Provide cost per learner for the activity.
  o Provide unique visits, slide-set downloads, audio downloads, etc. If available, it would be nice to know the extended reach of downloadable slide decks and audio podcasts.
- Number and locations of actual live activities (if a series)
- Describe additional insights, educational needs, and/or unfilled practice gaps that continue to exist after the completion of the activity(ies).
- A complete description of the most significant impact of the educational activity on learners
- The ideal report should contain graphs, charts and tables wherever possible. Infographics that are usable in PowerPoint presentations are most welcome.
- In addition to the written Report, the following items should be included:
  - A downloadable power point slide deck with speaker notes, as needed, to guide the interpretation of the slide
  - Copies of the final program (e.g., final agenda with topics and faculty, speaker slides, resources, tools, etc.)
  - Links to any enduring materials, practice resources, etc.

Moore’s Outcomes Levels (1-7)
The Report(s) should include key outcomes and the data to support how various levels were achieved, as applicable. Provide 1-2 sentences on how each applicable level was measured and provide a sample size for each outcomes level result. **Always include “N” values and “p” values, as appropriate.**

- **Level 1 (Participation) by Modality (e.g., Live, Web, Enduring)**
  - Number of attendees
  - Number of survey respondents
  - Learner Demographics
    - US vs. Ex-US breakdown by region
    - Breakdown by profession/specialty (i.e., Physicians – PCP, Physicians – Specialty [specify specialty], Nurses, Nurse Practitioners, Pharmacists, Physician Assistants, Other Healthcare Professionals, Non-Healthcare Provider)
    - Practice setting/affiliation
    - Years in practice
    - Number of patients seen by the learner with the condition/disease focus of the activity per week (and, if applicable, estimated number of patients that were impacted as a result of the participation in the educational activity)

- **Level 2 (Satisfaction):**
  - Was the educational activity satisfactory?
  - Were the learning objectives met?
  - Were the instructional techniques and materials helpful?
  - What are participant preferences in keeping up-to-date with educational advances in treatment, knowledge, and practice?
  - Number of participants that perceived there was NO commercial bias in the content of the educational activity?

- **Level 3 (Knowledge)**
  - Provide an analysis and summary of insights on how each Learning Objective was met (include the “N” values and “p” values, when appropriate)
  - Level of increase in knowledge, confidence, competence, performance based on analysis of baseline vs. post-activity results
  - Total number of questions asked of the audience during activity
Level 4 (Competence)
- Provide a brief description of the evaluation methodology used to measure learners’ competence including statistical testing
- What percentage of learners reported commitment to change and specify intended changes that they reported: e.g., practice knowledge (98%), screening and diagnosis (78%), practice behavior (78%), and patient clinical outcomes (85%)
- Include 3 to 4 examples of questions or case vignettes that captured pre-test, post-test and follow-up survey responses
- Provide educational insights as a result of responses to questions asked during the educational activity

Level 5 (Performance) – Analysis of survey responses
- Provide detailed analysis of learners’ change in performance as a result of the educational initiative, including impact of educational activity on clinical practice, knowledge, etc.
- Include what clinical practice changes were implemented as a result of their attendance; what barriers to change or challenges they identified.
- Please note if the data presented is objective data or subjective data.

Level 6 (Patient Health)
- If applicable and available, include patient reported outcomes (PRO)
- Include any improvements in patient/provider communication as a result of the education?
- Include data (e.g., QI reports, chart pulls, etc.,) that support learner’s response to their intent to change practice as a result of attending the activity.
- Please note if the data presented is objective data or subjective data.

Implications for Future Education/Outstanding Needs Observed
- Discuss identified gaps not fulfilled or new gaps discovered based on survey responses (pre and post-data analysis)

In addition to the above, please include a top-line summary/highlights of participant write in comments regarding the activity that are of value and would be important for BMS to share with our key internal stakeholders. Please keep in mind that we want key comments consolidated and not a full listing of all the comments.

Please contact the Department Director and/or any IME Specialist with any questions or comments.

Thank you for your continued interest in providing high quality continuing medical education with the mutual goal of improving patient outcomes.