NEW QUARTERLY IPCE SERIES

Accreditation in Practice: IPCE Updates for Planners and Activity Directors Series

Topic: From Commendation to Practice – Planning, Process Updates and 2027 Readiness

September 9, 2026 | 12:00 to 1:00 p.m. | Microsoft Teams

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Learning Objectives

At the end of this session, learners should be able to:

- Analyze and apply current updates to Joint Accreditation and Interprofessional Continuing Education (IPCE) submission requirements, incorporating revised processes and expectations into their planning and submission practices.

CE Information

Target Audience:
This activity is designed for physicians, nurses, pharmacists, pharmacy technicians, social workers, and other health care professionals.

Disclosures: The planner(s) and speaker(s) have indicated that there are no relevant financial relationships with any ineligible companies to disclose.

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Accreditation Statement

Accreditation Statement

In support of improving patient care, Advocate Health is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

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Credit Designation Statements

Credit Statements

Accreditation Council for Pharmacy Education (ACPE)
Advocate Health designates this live activity for a maximum 1.0 hours of CPE credit for (pharmacists and pharmacy technicians). CPE credit can be claimed on the AAH CE platform within 60 days of activity completion and information will be provided to CPE Monitor. Participants should only claim credit commensurate with the extent of their participation in the activity.

American Medical Association (AMA)
Advocate Health designates this live activity for a maximum of 1.0 *AMA PRA Category 1 Credits™.* Physicians should claim only the credit commensurate with the extent of their participation in the activity.

American Nurses Credentialing Center (ANCC)
Advocate Health designates this live activity for a maximum of 1.0 ANCC contact hours. Nurses should claim only the credit commensurate with the extent of their participation in the activity.

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Credit Designation Statements

Association of Social Work Boards (ASWB)

As a Jointly Accredited Organization, Advocate Health is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved under this program. Regulatory boards are the final authority on courses accepted for continuing education credit. Social workers completing this course receive 1.0 general continuing education credits.

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Artificial Intelligence (AI)

AI Disclosure
Artificial Intelligence (AI) tools were used to assist in the development of this educational activity, including content editing, formatting, and content refinement.

All AI-assisted content was reviewed, validated, and approved by the faculty and planning team. Faculty and planners retained full responsibility for ensuring the accuracy, evidence base, balance, independence, and educational integrity of the content. AI was used to support, not replace, expert review, professional judgment, and decision-making.

AI Tools Used: Microsoft 365 Copilot in PowerPoint
Human Review: Completed prior to dissemination to learners.

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Audience Poll

Which best describes your role?

Choose the one that fits you best

- A **Activity Director**
- B **Planning Committee**
- C **Speaker**
- D **Author**

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Audience Poll

Which best describes the credit that you represent?

Choose the one that fits you best

- A — Continuing Medical Education
- B — Continuing Nursing Education
- C — Continuing Pharmacy Education
- D — Continuing Social Work Education
- E — Interprofessional Continuing Education

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Audience Poll

What percentage of our activities must be deemed interprofessional to maintain Joint Accreditation?

- **A** 10%
- **B** 15%
- **C** 20%
- **D** 25%

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About this series

A standing forum for planners and activity directors across the enterprise

QUARTERLY + VIRTUAL

A quarterly virtual session where you bring CE questions and get answers in real time.

WHAT WE COVER

Accreditation updates, workflow changes and planning expectations.

WHO SUPPORTS YOU

Two teams by format: Carissa for live and enduring, Holly for series.

WHAT TO EXPECT

Requirements • Workflows • Best practices • Discussion • CE credit

Accreditation in Practice: IPCE Updates for Planners and Activity Directors 2026 | Advocate Health

Today’s agenda

1. **Our commendation story**
   Where we are today and how we got here
2. **What is changing**
   New standards and expectations ahead
3. **Active learning in action**
   Practices that make learning stick
4. **Resources**
   Additional job aids
5. **Your next move**
   Concrete actions to take this week

1 | OUR COMMENDATION STORY

Where we are today and how we got here.

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What Accreditation with Commendation means

ACCREDITATION

Joint Accreditation confirms we meet every required criterion for planning and delivering interprofessional continuing education.

This is the bar every activity must meet.

COMMENDATION

Awarded when a provider also meets criteria beyond those requirements: education shaped by the team, informed by data, and shown to change practice.

It is Joint Accreditation's highest recognition.

Commendation extends our accreditation term to six years instead of three.

JA Commendation Criteria

We are required to meet seven commendation criteria. These first two the IPCE team owns, nothing needed from your planning teams.

THE IPCE TEAM CARRIES THESE

JAC 15 | The provider supports the continuous professional development of its own education team.

JAC 16 |The provider engages in research and scholarship related to accredited IPCE and/or CE and disseminates findings through presentation or publication.

Full commendation criteria from Joint Accreditation: **jointaccreditation.org/accreditation-with-commendation**

JA Commendation Criteria

These are things we ask of your planning teams.

JAC 17

Practice data
The provider integrates the use of health and/or practice data in the planning and presentation of accredited IPCE and/or CE.

JAC 18

Beyond clinical care
The provider identifies and addresses factors beyond clinical care (e.g., social determinants) that affect the health of patients and integrates those factors into accredited IPCE and/or CE.

JAC 21

Skills with feedback
The provider designs accredited IPCE and/or CE (that includes direct observation and formative feedback) to optimize technical and procedural skills of learners.

JAC 24

Quality improvement
The provider demonstrates healthcare quality improvement achieved through the involvement of its overall IPCE program.

JAC 25

Patient impact
The provider demonstrates the positive impact of its overall IPCE program on patients or their communities.

No activity carries all five.
Upload evidence in the application; set it back to Needs Review.

Full commendation criteria from Joint Accreditation: **jointaccreditation.org/accreditation-with-commendation**

Commendation in practice: Example 1 | Formative Feedback

An example you can build. The first three are already how you plan today; commendation asks one step further on the fourth.

ALREADY STANDARD PRACTICE

NEED

What practice gap are we addressing?

Name the educational need.

TEAM

Who needs to influence planning?

List the professions.

ACTIVE LEARNING

DESIGN

What should learners do?

Build a team-based task.

COMMENDATION

FEEDBACK

How do learners know they improved?

Give individual written (formative) feedback.

JAC 21: The provider designs accredited IPCE and/or CE (that includes direct observation and formative feedback) to optimize technical and procedural skills of learners.

Commendation in practice: Example 2 | Practice data and impact

Same activity, a different criterion. The first two are standard; the last two are the commendation step.

ALREADY STANDARD PRACTICE

GAP
What practice gap are we addressing?

Name the gap, as always.

TEAM
Who needs to influence planning?

List the professions.

COMMENDATION

DATA
What proves the gap is real?

Send a Rewire or KRA measure.

IMPACT
What changes if it works?

Name the patient outcome.

JAC 24: The provider demonstrates healthcare quality improvement achieved through the involvement of its overall IPCE program.

2 | WHAT IS CHANGING

New standards and expectations ahead.

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How submissions work and what to use

Current due dates are posted on the **CE Planning Page** at ce.advocatehealth.org

PRE-PLANNING

Identify the educational need, intended audience and participating professions.

APPLICATION

Document the gap, planning team, design, outcomes and operational details.

DISCLOSURES

Complete all disclosures before the education occurs. The form now asks about AI use.

APPROVED TEMPLATES

Use current branded templates for live, enduring and 2027 RSS, with approved disclosure and AI language.

CURRENT VERSIONS

Pull the latest file each time and retire old saved copies to reduce rework.

All required documents is due 7 business days before the activity for CE code approval; always build on the current approved template.

Responsible AI, copyright and documentation

IDENTIFY AI USE

Disclose anticipated AI use in learner-facing materials and educational content.

APPLY HUMAN REVIEW

Review accuracy, evidence, bias, independence and alignment before use.

CLEAR COPYRIGHT

Cite every source and get permission before reusing images, tables or slides.

Disclose AI use before the education begins — the planning team still owns the content, the permissions and the file.

CE application updates

Three sections of the application have changed, and division routing is coming soon.

RESPONSIBLE USE OF AI

New section on the Description tab. Tell us how AI was used in planning or content.

GAP ANALYSIS

Similar questions, reworked to match the Joint Accreditation self-study. Every practice gap source you select now needs matching documentation uploaded.

COMMENDATION CRITERIA

Select the criteria your activity supports so we know what evidence to collect with you.

We will walk through these changes live in the test environment.

Live Activity Workflow: What Has Changed

PRE-PLANNING AND APPLICATION

- CE Pre-planning form is the single entry point for every live activity
- Submit it two weeks before the 10-week application deadline; 12 weeks if the activity follows soon after
- An ICPE Senior Analyst follows up to walk through the form and application with you

REVIEW AND APPROVAL

- Speaker authorization for recording is now part of the disclosure form
- Flyers and save-the-dates still need IPCE approval before distribution
- Clinical Content Review due 7 business days before the activity

Pre-planning is reviewed within two weeks; the application link follows approval.

Enduring Material

REGULATORY NEED

- The topic supports licensure, certification, or regulatory requirements

ENTERPRISE PRIORITIES

- The activity aligns with enterprise-level priorities

DEMONSTRATED VALUE

- There is demonstrated historical success and sustained educational value
- For example, select Neuroscience or Nursing Grand Rounds activities

Many enduring applications do not meet the requirements for accreditation. These are the factors we look for.

Enduring Workflow: What Has Changed

RENEWAL AND REVIEW

- IPCE team emails the Activity Director 3 months before expiration
- The Enduring Renewal Form and evaluation results come with that notice
- Approved up to three years; renewals in increments to a maximum of nine

CONTENT AND HOSTING

- Off-cycle content updates limited to twice a year
- A new application is required if objectives or the identified need change
- Accredited enduring material is hosted only on the CE Learning Platform
- Active learning required: quizzes, knowledge checks, reflection, narrative responses

Zoom and Go-To-Webinar recordings are not accepted for enduring credit per AH policy.

Series (RSS) Workflow: What Has Changed

SESSION BUILD AND APPROVAL

- Sessions are built one quarter at a time
- Activities cannot be promoted until approved
- Required documents due 7 business days before each session for CE code approval

ELIGIBILITY AND MONITORING

- At least five clinicians claiming credit per session in total; four sessions a year
- Attendance alone does not qualify, and residents do not count
- Monitored by quarterly audits, annual renewal review and data monitoring
- Series below the minimums receive a warning; sunset status follows after one year

New RSS applications are on hold November 1 to January 31; requests resume February 1.

2027 RSS Renewal Readiness

Move early: finish before fourth-quarter credit release.

COMPLETE | JULY

Intent to renew; outcomes shared and changes identified.

COMPLETE | AUGUST 15

Intent confirmed and disclosures completed.

IN PROGRESS | AUG 15 - OCT 15

Analyst review of changes, mitigation and documentation.

UPCOMING | OCTOBER 16

2027 pages published; submit 2027 programming via the RSS workflow.

Fourth-quarter claiming codes WILL be withheld until disclosures are complete.

Audience Poll

An annual readmissions activity: three years of the same content, all-clinician planners, measured by attendance. Choose the one change you would make first

- **A** Add a patient or student to the planning team
- **B** Use current readmission data to redefine the gap
- **C** Address barriers outside clinical care, like transport
- **D** Measure a change in practice, not attendance

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3 | ACTIVE LEARNING IN ACTION

Practices that make learning stick.

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Active Interprofessional Learning

LEARN FROM
Different professions contribute their knowledge, priorities and experience.

LEARN WITH
Learners discuss, decide, practice or solve together.

LEARN ABOUT
Learners understand one another's responsibilities, expertise and points of coordination.

Interaction should be intentionally connected to the change the activity is designed to support.

Audience Poll

Which design best demonstrates active learning?

Choose the one that fits you best

- **A** 45-minute lecture, then open Q&A
- **B** Case discussion where professions build one shared plan
- **C** Recorded talk with a downloadable resource
- **D** Expert panel with no task for learners

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4 | Resources

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Resources Available

CE Planning Page

State Licensure Page

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5 | YOUR NEXT MOVE

Concrete actions to take this week.

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What will you apply after today?

Choose one update that will change your next planning or submission step.

START

What new or revised practice will you begin using?

CHECK

What requirement or document will you verify earlier?

ASK

What question still needs clarification?

Audience Poll

What timeframe works best for you for this Series?

Choose the one that fits you best

- **A** 1000-1100 CST/ 1100-1200 EST
- **B** 1200-1300 CST/ 1300-1400 EST
- **C** 1400-1500 CST/ 1500-1600 EST

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Questions?

Thank you for participating in the first Accreditation in Practice session.

Carissa Blumenshine MSN, RN, NPD-BC, PCCN and Holly Spencer | Managers, Interprofessional Continuing Education

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Claiming Credit

1. Text code **DUZQUZ** to (414) 219-1219

2. You will also receive a reminder email within 24 hours with instructions on how to claim your credit

3. To fully claim credit, go to “MY ACTIVITIES/Pending Activities” tab to complete evaluation and/or assessment

Texting the code alone will not give your credit. You will need to go online.

Please direct any related IPCE questions to cme@aah.org