A close-up of a business card

Description automatically generated

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| Quality Improvement Activity Application For MOCA® |
| ALL FIELDS ARE REQUIRED |
| DATE: |
| NAME OF ORGANIZATION: |
| NAME OF ACTIVITY: |
| CONTACT NAME: |
| CONTACT TITLE: |
| ADDRESS: |
| CITY: |
| STATE: |
| ZIP: |
| PHONE NUMBER: |
| FAX NUMBER: |
| EMAIL ADDRESS: |
| ORGANIZATION WEBSITE: |
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| ACTIVITY OVERVIEW |
| Briefly describe your activity: |
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| Who are your target audiences? |
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| What is the length of time your activity has been available? |
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| Describe the strengths of your activity and the benefits it will offer our diplomates: |
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| ACTIVITY AVAILABILITY |
| Explain where our diplomates can purchase your activity: |
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| In what format is your activity available? |
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| What would be the cost of the activity to diplomates? |
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| How long would it take diplomates to complete the activity? |
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| Describe the continuing medical education credits (if applicable) diplomates will receive upon successful completion of the activity: |
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| ACTIVITY DEVELOPMENT |
| Describe how the activity was developed, including the practice standards and reference materials used: |
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| Explain how the activity is evaluated to determine the effectiveness of the educational offerings: |
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| Explain how you keep the activity updated with current information: |
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| ACTIVITY CONTENT |
| Explain the activity’s learning objectives: |
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| Describe the quality improvement cycle a physician goes through as they complete the activity: |
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| Explain how the activity uses evidence-based guidelines, explicit expert consensus and/or normative peer comparisons: |
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| Describe how your activity incorporates one or more of the six core competencies (patient care, knowledge, communication, professionalism, practice-based learning and improvement, and system-based practice): |
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| FEEDBACK |
| Explain how physicians are assessed and re-assessed during the activity: |
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| Explain the feedback you provide during and after completion of the activity: |
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| ACTIVITY DATA |
| Explain how you collect data from the physicians and how it is validated: |
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| Explain your process for retaining the data collected: |
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| Explain how you will report completion of the activity to us on behalf of the diplomates, as well as the data in aggregate for us to use: |
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