Our mission is to be the best state in the nation for cancer care.
Michigan Oncology Quality Consortium
Biannual Meeting
June 19th, 2020

Does Quality Improve in a Compassionate Culture?
Disclosures

• Jennifer Griggs, MD, MPH is a consultant for Pacific Business Group on Health (PBGH)*
• Michelle McQuaid, PhD has no known disclosures

*not-for-profit organization
Continuing Education Credits

Accreditation Statements

• The University of Michigan Medical School is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. The University of Michigan Medical School designates this live activity for a maximum of 2.5 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

• This course is approved by the Michigan Social Work Continuing Education Collaborative - Approval # 050820-02. Number of CE Hours approved: 2.0.

• The Collaborative is the approving body for the Michigan Board of Social Work.

Medicine, Nursing & Social Work CEs approved
Continuing Education Credits

Learning objectives
1. Implement strategies that promote self-compassion
2. Use techniques to increase compassion in the workplace
3. Understand how a compassionate culture improves the quality of patient care

Competencies
1. Practice-based learning and improvement
2. Systems-based practice
Connect with Us

@MOQCTeam or #moqc

moqc@moqc.org
<table>
<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Speaker</th>
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<tbody>
<tr>
<td>9:00 am</td>
<td>Welcome</td>
<td>Jennifer J Griggs, MD, MPH, FASCO</td>
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<tr>
<td>9:15 am</td>
<td>A Patient’s Perspective</td>
<td>Amanda Crowell Itliong, MA</td>
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<tr>
<td>9:30 am</td>
<td>Keynote Presentation: Everyday Compassion</td>
<td>Michelle McQuaid, PhD&lt;br&gt;Senior Fellow, University of Melbourne, School of Graduate Education</td>
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<tr>
<td>10:45 am</td>
<td>Break</td>
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<td>11:00 am</td>
<td>State of the Consortium</td>
<td>Diane Drago&lt;br&gt;Dawn Severson, MD&lt;br&gt;Jennifer J Griggs, MD, MPH, FASCO</td>
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<td>POQC Steering Committee</td>
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<td>MOQC Performance &amp; Quality Project Updates</td>
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<tr>
<td>11:45 am</td>
<td>Closing Remarks</td>
<td>Jennifer J Griggs, MD, MPH, FASCO</td>
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<td>12:00 pm</td>
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Introduction
Introduction
Overview

**Goal:** To help participants walk away with a better understanding of:

- How to avoid burnout;
- How to use more self-compassion in their jobs; and
- How to build psychological safety with other and patients to create change.

**Think:** Relationships can be challenging but there are tiny actions I can take as I connect with anyone that can make it easier and more rewarding for me and them.

**Feel:** More confident and motivated to experiment with the skills that improve their relationships.

**Do:** Commit to one small action each day for the next week to help them connect with someone better at work.
Agenda

(5 min) Welcome and why

(10 mins) Passion fatigue and why it makes compassion challenging.

(20 mins) Reaching for self-compassion as we learn and grow.

(20 mins) Building psychological safety to avoid compassion burnout.

(10 mins) Questions and reflections.
Everyday Compassion

THEWELLBEINGLAB
A MICHELLEMCQUAID PROGRAM

www.thewellbeinglab.com
How Are You Doing?

On a scale of 0 (not at all) to 10 (most of the time) how often in the last two weeks have you felt like:

1. The work I did felt so important I found it hard to switch off.
2. I was judgmental and critical of myself.
3. I felt safe at work to bring up problems and be honest about mistakes
Is passion fatigue burning you out?
The single strongest predictor of meaningfulness is the belief that our jobs have a positive impact on others.

Professor Adam Grant
What Impact Does Meaning Have?

1. Think of yourself as a pie. How big a slice does work take up for you right now?

2. How does this positively impact your wellbeing?

3. How does this negatively impact your wellbeing?

4. How does it impact the people around you?
When your passion takes control and makes it difficult to engage in other things or with other people, it has become obsessive.

Professor Robert Vallerand
A passion is harmonious when you feel in control of what you love doing.

Professor Robert Vallerand
Short bursts of obsessive passion rarely do lasting harm, but it’s important to rebalance when the milestone is reached.

Professor Robert Vallerand
Do You Have Passion Fatigue?

1. Think back to yourself as a pie and how big a slice work takes up for you right now?

2. Does this suggest your passion for work right now veers more towards harmonious or obsessive? What impact does this have for you and your team?

3. Generally, does your team veer towards more harmonious or obsessive passion at work? How can you help them keep their passion harmonious?
When people have more than one passion in their life, studies find they are much better off.

Professor Robert Vallerand
Is passion fatigue burning you out?

Do you treat yourself with compassion?

3
You will make mistakes, bump up against your limitations, and fall short of your ideals. This is the human condition.

Assoc. Professor
Kristin Neff
How Are You With Learning Challenges?

- When I say ‘go!’ please count backwards from 996 in increments of 7.
- Type your answers – one increment at a time - as fast as you can into the chat.
- Count your own race for as long as you can rather than getting distracted by the counting of others.
- How did you feel during this exercise?
Self-compassion can help you to break the entrenched patterns of self-criticism, whilst still being honest about your fears.

Assoc. Professor Kristin Neff
The Learning Loop

Act

Assess

Adjust

Source: McQuaid & Melville, 2018
When you already know you are deficient, you have nothing to lose by trying.

Professor Carol Dweck
Can You Reach For Self-Compassion?

Let’s try counting backwards from 996 in increments of 7 again, but before you begin take a moment to think about:

• What worked well and where did you struggle last time? What did you learn about the counting?

• How can you reach for some self-compassion rather than self-criticism as you think about how you can adjust your efforts this time?

• What are your learning goals for this activity as you try again?
Be mindful and soften to the suffering you’re experiencing, without over identifying with your mistakes.

Assoc. Professor Kristin Neff
Is passion fatigue burning you out?

Do you treat yourself with compassion?

Can you build psychological safety?
What if people are doing the best they can with what they have right now?

Professor Brene Brown
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Assoc. Professor Kristin Neff
The Learning Loop

- Act
- Adjust
- Assess

Source: McQuaid & Melville, 2018
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5 MINUTES
Be mindful and soften to the suffering you’re experiencing, without over identifying with your mistakes.

Assoc. Professor Kristin Neff
Is passion fatigue burning you out?

Do you treat yourself with compassion?

Can you build psychological safety?
What if people are doing the best they can with what they have right now?

Professor Brené Brown
Can You Read People’s Minds?

- Raise your hand if you turned up to work today trying to be as difficult, disappointing and disruptive as you could.
- Raise your hand if you think someone in your team turned up to work today trying to be as difficult, disappointing and disruptive as you could.
Psychological safety allows for moderate risk-taking, creativity, speaking your mind, and sticking your neck out without the fear of having it cut off.

Professor Amy Edmonson
Judgment
Mindset
Fear Based

- Leap to conclusions
- Bite your tongue or fix it about them
- Bitch and moan about them
- Shame and blame them for mistakes

Kindness
Mindset
 Confidence Based

- Slow down and get curious
- Respect we all need help to grow
- Be kind enough to speak directly
- Show compassion for their learning

Source: McQuaid & Melville, 2019
On average, employees spend 2 hours and 26 minutes a day leaking energy due to workplace relationship dramas.

Cy Wakeman
Can You Show Compassion For Others?

Who have you been struggling with at work recently? If you view what’s unfolded through a lens of generosity and curiosity rather than judgment, how might you answer the following?

- What do you know for sure about what’s happened?
- What is your part in this?
- What are your ideas for resolving this issue?
- What can you do to help?
Rather than stewing or seething with resentment, choose courage over comfort and get curious about what’s happening.

Professor Brene Brown
Is passion fatigue burning you out?

Do you treat yourself with compassion?

Can you build psychological safety?
What Will You Try Now?

Please type into the chat window:

• Your ah-ha takeaway from today’s conversation when it comes to making connections that matter work
I want to feel good and function effectively at work

www.permahsurvey.com
With heartfelt thanks

Thank You
Break
POQC Update
Patient and Caregiver Oncology Quality Council (POQC)

• What is POQC?
• Who are we?
  • 14 Representatives
  • Actively recruiting diverse representation
• What we do in support of MOQC
• The future of POQC
  • Formal role
  • Initiatives
Steering Committee Update
Steering Committee Update

• MOQC Quality Measures
  • Measures Committee meeting **Wed July 15, 6pm** — all welcome
  • Retiring disease-specific measures & selecting new measures

• Strategic Plan for MOQC
  • BCBSM is requiring strategic planning by all Collaborative Quality Initiatives
  • MOQC Strategic Plan will be completed by Fall 2020 and will be shared

• Keynote for Biannual Meeting January 2021—Jennifer Temel, MD

• MOQC is committed to anti-racism & will be sharing resources
MOQC Performance
Are We Improving?
Data

- Two periods of comparison to be shown
  - Round 2 2019
    - Seen at regional meetings (most recent data)
  - Round 2 2018/Round 1 2019
    - Not seen in this way (aggregated)

Note: Data just abstracted (completed June 12, 2020) will not be available to practices via their QOPI account until August 2020.
Figures

• First histogram (most recent round of data)
  • Performance by practice in order of performance

• Second histogram (previous year of data)
  • Performance by practice, practice stays “fixed”
# Legend

<table>
<thead>
<tr>
<th>Symbols</th>
<th>Period or Explanation</th>
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<tr>
<td>Quartiles (1&lt;sup&gt;st&lt;/sup&gt;, Median, 3&lt;sup&gt;rd&lt;/sup&gt;)</td>
<td>Round 2, 2019</td>
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<tr>
<td>MOQC aggregate</td>
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<td>QOPI aggregate</td>
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<td>MOQC practice (presented by MOQC number)</td>
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<td>N</td>
<td>Denominator for measure across all contributing practices; Round 2, 2019</td>
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<td>^ or v</td>
<td>Associated with a MOQC practice if the difference in % between time periods is significant (p&lt;0.05) and the direction of change. Direction is favorable (or not) dependent on measure</td>
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</table>
Tobacco cessation counseling administered or patient referred in past year
N = 456

VBR Target = 75%

QOPI Measure CORE22bb - Practice and Comparative Groups
Fall 2019

Note: ^ or v indicates statistically significant difference in proportions between time periods (p < 0.05)
Practices with no eligible cases in the denominator and/or missing data from one of the time periods are not shown.
Tobacco cessation counseling administered or patient referred in past year
N = 456

VBR Target = 75%

QOPI Measure CORE22bb - Practice and Comparative Groups
Fall 2019

Note: ^ or v indicates statistically significant difference in proportions between time periods (p < 0.05)
Practices with no eligible cases in the denominator and/or missing data from one of the time periods are not shown.
NK1 Receptor Antagonist & Olanzapine prescribed or administered with high emetic-risk chemotherapy
N = 984

QOPI Measure SMT28 - Practice and Comparative Groups
Fall 2019

Note: ^ or v indicates statistically significant difference in proportions between time periods (p < 0.05)
Practices with no eligible cases in the denominator and/or missing data from one of the time periods are not shown.
NK1 Receptor Antagonist or Olanzapine administered for low or moderate emetic risk Cycle 1 chemotherapy (lower is better)
N = 1015

VBR Target = 30%

QOPI Measure SMT28a - Practice and Comparative Groups
Fall 2019

Note: ^ or v indicates statistically significant difference in proportions between time periods (p < 0.05)
Practices with no eligible cases in the denominator and/or missing data from one of the time periods are not shown.
Pain addressed appropriately (assessed, quantified, and plan of care documented for moderate-to-severe pain)
N = 1014

QOPI Measure EOL38 - Practice and Comparative Groups
Fall 2019

Note: ^ or v indicates statistically significant difference in proportions between time periods (p < 0.05)
Practices with no eligible cases in the denominator and/or missing data from one of the time periods are not shown.
Hospice Enrollment
N = 999

VBR Target = 50%

QOPI Measure EOL42 - Practice and Comparative Groups
Fall 2019

Note: ^ or v indicates statistically significant difference in proportions between time periods (p < 0.05)
Practices with no eligible cases in the denominator and/or missing data from one of the time periods are not shown.
Hospice enrollment & enrollment within 7 days of death (lower is better)
N = 533

QOPI Measure EOL45 - Practice and Comparative Groups
Fall 2019

Note: ^ or v indicates statistically significant difference in proportions between time periods (p < 0.05)
Practices with no eligible cases in the denominator and/or missing data from one of the time periods are not shown.
Hospice enrollment or documented discussion
N = 999

VBR Target = 65%

QOPI Measure EOL47a - Practice and Comparative Groups
Fall 2019

Note: ^ or v indicates statistically significant difference in proportions between time periods (p < 0.05)
Practices with no eligible cases in the denominator and/or missing data from one of the time periods are not shown.
Chemotherapy administered within the last two weeks of life (lower is better)
N = 1014

QOPI Measure EOL48 - Practice and Comparative Groups
Fall 2019

Note: ^ or v indicates statistically significant difference in proportions between time periods (p < 0.05)
Practices with no eligible cases in the denominator and/or missing data from one of the time periods are not shown.
Measures with Round 2 data only

• These measures were new for Fall 2019
  – Bone mineral density testing within first year of starting ADT for prostate cancer
  – Breast measures
    • Re-calculated from QOPI
    • Previous data not valid
  – Bone modifying agent (breast ca & myeloma)
  – G-CSF for non-curative chemotherapy (1st cycle)
  – Complete family history
Bone-modifying agent administered for breast cancer bone metastases & multiple myeloma, $N = 54$

**QOPI Measure MOQC PM1 - Practice and Comparative Groups**
**Round 2 2019**

*Note: Practices with no eligible cases in the denominator are not shown*
Complete family history documented in patients with invasive cancer, N = 3040

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QOPI Measure MOQC PM2 - Practice and Comparative Groups
Round 2 2019

Note: Practices with no eligible cases in the denominator are not shown
GCSF administered to patients who received chemotherapy with non-curable treatment (lower is better), \( N = 727 \)

QOPI Measure MOQC PM3 - Practice and Comparative Groups
Round 2 2019

Note: Practices with no eligible cases in the denominator are not shown
PET, CT, or radionuclide bone scan ordered by practice within 60 days after diagnosis for Stage I, IIA or IIB breast cancer (lower is better), N = 988

QOPI Measure BR62a1 - Practice and Comparative Groups
Round 2 2019

Note: Practices with no eligible cases in the denominator are not shown
Serum tumor marker surveillance ordered by practice between 30 – 365 days after diagnosis of breast cancer in patients who received treatment with curative intent (lower is better), N = 73

QOPI Measure BR62c1 - Practice and Comparative Groups
Round 2 2019

Note: Practices with no eligible cases in the denominator are not shown
Bone density testing to monitor for bone loss within a year of starting ADT for treatment of prostate cancer, N = 110

QOPI Measure PROS113 - Practice and Comparative Groups
Round 2 2019

Note: Practices with no eligible cases in the denominator are not shown
Summary & Next Steps

• Excellent progress on a number of measures
• Date will inform decisions of Measures Committee
• What do you think about data presentation?
• Outreach by MOQC to selected practices
Questions & Comments
Quality Projects Update
MOQC Quality Projects

**Active**
1. Tobacco cessation
2. Oral oncolytics
3. Hospice enrollment
4. Chemotherapy-induced nausea/vomiting (CINV)

**Exploratory**
1. Advanced imaging & serum tumor marker surveillance
2. Primary care-oncology model (PCOM)
3. Fatigue management support

**Active, Grant-support**
1. Patient-reported outcomes (PROM-Onc)
2. Cancer Thriving & Surviving/Survivorship (CTS)
3. Ovarian Patient Navigator Line
4. Ovarian Cancer Patient Education Material
Pathway for Palliative Radiation Therapy for Patients on Hospice
Innovative Approaches to Expand Cancer Genetic Screening & Testing for Patients & Families in a Statewide Oncology Network through Community, State, & Payer Partnerships (Moonshot U01 Grant)

Elena M. Stoeffel, MD, MPH
Jennifer J. Griggs, MD, MPH
Kenneth Resnicow, PhD
Shitanshu Uppal, MD, MS
The Gap & the Barriers

Of those eligible

Testing

$$
Study Aims:
Three Questions & Goals
Focus on 5 cancers:
breast, endometrial, ovarian, pancreas, & prostate

Practice-Level

1. Improving the quality of the family history

Does a tablet-based family health history survey tool improve the completion of the family history?

In conjunction with genetics information support for oncology teams
Study Aims

Patient- and Family-Level

2. Increasing the proportion of people who get genetic testing

*Can we improve the proportion of patients getting guideline-concordant genetic risk assessment & testing?*

3-arm study of
tailored messaging via mobile optimized web interface (app) vs
genetic counseling with motivational interviewing vs
usual care

3. Exploratory question: Can we improve the uptake of cascade testing?
Virtual Genetic Counselor App

Content

Why should I get tested?
- Knowledge
- Myths & facts
- Attitudes
- Norms
- Motivation
- Barriers

How & where do I get tested?
- Practice-based
- Direct-to-Consumer options

Understanding results
Communication with family
- Cascade Testing Tips

Function

- Tailored content
- Reminders to follow up
- Communication tips with oncologist & primary care physician
- Geolocated testing and counseling
- Frequently-asked questions
Chat Questions or Comments
Complete Meeting Evaluation


2. See bottom of today’s agenda
## 2020 Regional Fall Meetings

A physician per practice must attend

<table>
<thead>
<tr>
<th>Region</th>
<th>Fall 2020*</th>
<th>Location*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Metro East</td>
<td>Wednesday, October 28</td>
<td>Troy Marriott Troy</td>
</tr>
<tr>
<td>LMOR</td>
<td>Monday, November 2</td>
<td>Grand Valley State Grand Rapids</td>
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<tr>
<td>WOW</td>
<td>Wednesday, November 11</td>
<td>Eagle Crest Conference Center Ypsilanti</td>
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<tr>
<td>CMG</td>
<td>Monday, November 16</td>
<td>Horizons Conference Center Saginaw</td>
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<tr>
<td>Superior West</td>
<td>Wednesday, October 14</td>
<td>Hampton Inn Marquette</td>
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<tr>
<td>Superior East</td>
<td>Thursday, October 15</td>
<td>Bay Harbor Village Petoskey</td>
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</tbody>
</table>

*Locations and dates subject to change*
Next Biannual Meetings

A physician per practice must attend one meeting each calendar year

<table>
<thead>
<tr>
<th>MOQC BIANNUAL MEETINGS</th>
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<tbody>
<tr>
<td>2021 and 2022</td>
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<table>
<thead>
<tr>
<th>Date</th>
<th>Location</th>
<th>City</th>
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<tbody>
<tr>
<td>Friday, January 15, 2021</td>
<td>Inn at St. John’s</td>
<td>Plymouth</td>
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<tr>
<td>Friday, June 18, 2021</td>
<td>H Hotel</td>
<td>Midland</td>
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<tr>
<td>Friday, January 21, 2022</td>
<td>Inn at St. John’s</td>
<td>Plymouth</td>
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</tbody>
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Locations and dates subject to change
Gyn Oncology Practices

Saturday
May 30
Virtual

Saturday
November 14*
Inn at St. John’s
Plymouth*

*date and location under discussion re: Michigan and Michigan State football schedules
Order MOQC Resources

Common Herbal Supplements with Photosensitivity Properties:
- Chrysanthemum
- Dong Quai
- Shitake Mushroom
- St. John's Wort

Potential Interactions:
Increases skin sensitivity to sunlight.

Who Should Avoid Use:
- Patients undergoing radiation therapy.

Common Herbal Supplements with Estrogenic Properties:
- Black Cohosh
- Chasteberry
- Dong Quai
- Flax Seed Oil
- Ginkgo Biloba
- Red Clover
- Soy Products

Herbal Supplements & Cancer Treatment

DIAGNOSED WITH CANCER?
QUITTING MATTERS

QUITTING MATTERS
START TODAY

Free Coaching Services

We will refer you to the Michigan Tobacco Quitline to help you quit. Expect a phone call from 1-800-QUIT-NOW (1-800-784-8669).

MICHIGAN TOBACCO QUITLINE
1-800-QUIT-NOW
784.9669

Need help quitting smoking?
- Keeping yourself busy will help keep your mind off cravings.
- Try oral alternatives like gum, mints, straws, or lozenges.
- Find support through friends & family. Quitting is tough & there's no need to do it alone. The Michigan Quitline is also available 24/7!
Closing Comments

• CME instructions are in this deck and will be sent out today to all who registered
• Email us: first initial, last name@moqc.org
• Telephone us: (734) 232-0043 or 1.866.GET.MOQC
• No need to leave name tags on tables
• See you at Fall Regional Meetings
• Travel safely and with compassion
Continuing Education Credit – Creating an Account

MOQC uses the University of Michigan MiCME continuing education platform for awarding credit. If you have not done so already, you will need to create a MiCME account to claim continuing education credit.

Steps to create a MiCME Account:
1. Go to https://ww2.highmarksce.com/micme/
2. Click the “Create a MiCME Account” tile at the bottom of the screen
3. Under New User? click “Create a MiCME Account”
4. Enter the Profile Information questions, confirm consent, and click “Create a MiCME Account”
5. Enter your password and complete your profile. Your MiCME account is created and you can now claim continuing education credits

If you have any difficulties, email moqc@moqc.org
We will assist you and resolve any issue
Steps to Claim Credits and Print a Transcript
1. Once your MiCME account has been created (see instructions above), navigate to your Dashboard
2. Click on Claim Credits and View Certificates
3. Locate ‘MOQC June 2020 Biannual Meeting’ in the Activities Available for Credit Claiming section
4. Under Action, click on Claim. Add Credit
5. Enter the number of credits you are claiming and the “I Attest” button
6. Complete the evaluation
7. Click the Submit button
8. Scroll down to the Awarded Credits section to view or print your certificate and/or comprehensive transcript