

August 2010



*“Education,
Collaboration,
Fellowship,
Networking.”*

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MESSAGE FROM THE PRESIDENT

It's hard to believe that Summer is nearing an end, and our Fall Educational Conference is just around the corner! Below are my top 5 reasons for encouraging you to register today:

1. **The program.** This program is a great combination of targeted sessions on specific knowledge and skills areas and a broader look at what education is really about (and it's not the accreditation rules!)
2. **The networking.** We have one of the best (if not THE best) professional networks for CME professionals in Illinois. This is such a great resource – how can you not take advantage of it?
3. **Collaboration with the ISMS.** This collaboration offers us all a different perspective on what we do, both from the state-accredited providers and the physicians, and it only happens once a year.
4. **It's the “best bang for your buck.”** I know times are tight, and the way we do business is changing – but that doesn't mean we stop doing business. This is a comparatively affordable way to keep up with your profession and the environment.
5. **It's coming up faster than you think!** September starts next week and before you know it October 1st will be here – just register now and check it off your list! www.isms.org/physicians/cme/pages/default.aspx

More information is provided below. As always, feel free to send us any of your feedback at ilalliance@aol.com or email me directly at rdevivo@asge.org.

IACME and ISMS Collaborative Fall Educational Conference Register Now!!!

Friday, October 1, 2010
Oak Brook Marriott

Spearheading this effort on behalf of IACME and working on the event are Rita LePard, ISMS Education Staff Specialist and IACME Director, and Chris Presta, IACME Program Committee Chair. Registration is now open at www.isms.org/physicians/cme/pages/default.aspx or get more information and download the registration brochure at www.iacmeonline.org.

GOING GREEN

Do you have ideas on how to “Go Green CME!” Please e-mail ilalliance@aol.com or join the discussion on LinkedIn. Go to: http://www.linkedin.com/groups?gid=1903150&trk=myg_ugrp_ovr

The Illinois Perspective on the Updated Criteria: an IACME Forum to Provide Ideas and Practice Examples to Meet the New Criteria

We are continuing our series of articles addressing the updated criteria. These articles focus on the first 15 criteria, as a similar series addressing 16-22, published in the Alliance for CME Almanac. This month, three IACME members address criteria 9 and 10 using examples from their CME programs. Please join the discussion on LinkedIn if you have any feedback you want to share with your colleagues! See the IACME LinkedIn Discussion Group box at the bottom of this issue.

The following are perspectives of a hospital, an independent accredited education provider, and an association on compliance with Criteria 9 and 10. They are not meant to represent the opinion of the IACME or the ACCME, only the writers.

C9. The provider maintains a separation of promotion from education (SCS 4) C 10. The provider actively promotes improvements in health care and NOT proprietary interests of a commercial interest (SCS 5)

Hospital Perspective

Our organization does not solicit commercial support and does not provide exhibit space. However, policies and procedures are in place in order to ensure independence in case of commercial support acceptance. Terms and conditions of commercial support acceptance are laid out in our CME Policy on Solicitation and Acceptance of Commercial Support, and more specifically, Commercial Support Agreement.

Criterion 9 (SCS 4)

- The "Written Agreement for Commercial Support" sets forth the terms that ensure separation of promotion from education. Specifically, the terms indicate that:
 - Product-promotion material or product-specific advertisement of any type is prohibited in or during the CME activity. The juxtaposition of editorial and advertising material on the same products or subjects is not allowed. Live or enduring promotional activities must be kept separate from the CME activity. Promotional materials cannot be displayed or distributed in the education space immediately before, during or after a CME activity. Commercial Interests may not engage in sales or promotional activities while in the space or place of the CME activity.
 - The Commercial Interest may not be the agent providing the CME activity to the learners.

Criterion 10 (SCS 5)

- The "Written Agreement for Commercial Support" sets forth the terms that insure independence from commercial supporter and promote improvements in healthcare. Specifically, the terms indicate that:
 - The activity is for scientific and educational purposes only and will not promote any specific proprietary business interest of the Commercial Interest.
 - The CME provider is responsible for all decisions regarding the identification of educational needs, determination of educational objectives, selection and presentation of content of the CME, selection of educational methods, and the evaluation of the activity.
 - The commercial interest will not require the CME Provider to accept advice or services concerning teachers, authors, or participants or other education matters, including content, as conditions of receiving the grant.
- Generally, when speakers/authors disclose their ties with a commercial interest (when we identify a potential conflict of interest) they sign an attestation from, which asks them to attest to statements validating the content. In addition, presentations/educational content of such speakers/authors undergo a peer

review. In this case, a peer review form is used, and involves statements that help the reviewer determine the validity of the content, specifically, that it is evidence based, unbiased and promotes improvements in healthcare.

Medical Education Company Perspective
Criterion 9 (SCS 4)

This standard is really a guideline for providers who have relationships with commercial interests outside of the educational support arena through the acceptance of funds for promotion of commercial products as part of their revenue stream associated with their CME program. There are 5 sections to it, and all are pretty straightforward and procedural.

Although we do not currently accept any associated commercial promotion, such as advertising or exhibits, our organization has in place Policies and Procedures that outline how we would ensure that all 5 sub points are complied with, should we decide to enter into a situation where we had associated commercial promotion.

Criterion 10 (SCS 5)

In complying with Standard 5, the new criteria provide an impetus to ensure that the activity is geared toward the improvement of healthcare. By following criterion 2 and designing the activity to narrow identified professional practice gaps of learners, the first step toward meeting 5.1 which states that the CME activity must promote improvements or quality in healthcare have been taken.

The processes of ensuring balance, avoiding bias, and developing activities that do not promote the interests of the supporters is an integral component of developing certified CME. It is woven into the fabric of what our organization does. The outline of how this appears is as follows:

Planning:

The planning of our activities is the responsibility of individuals who have been screened for any potential conflict with a commercial interest, and if any is found, the conflict is resolved. The planning of each activity is outlined in the Activity Planning Document. This document follows the ACCME's Updated Criteria for Accreditation and is reviewed and signed off on by the faculty chairperson, the Scientific Director, the Medical Director and the Senior Manager, Certification Services.

Monitoring:

We use the following methods to monitor activities to ensure that they do not promote the proprietary interests of any commercial interest(s) and that these activities provide a balanced view of therapeutic options to participants.

A. Live activity audits:

We incorporate a review process that includes the auditing of every live activity by a member of our certification services team and/or an external peer auditor.

Activities that are repeated multiple times are subject to a representative sample of audits.

1. Audit by Certification Services Staff: An audit review form is completed for each activity reviewed, and the data from these forms is compiled as part of our quality assurance review.

2. External Audit of live activities by an outside Peer Reviewer

We retain an outside audit firm to conduct external review of certain commercially supported live activities. These audits provide an objective 60-point review of the activity by a non conflicted, physician reviewer in the specialty area of the target audience. The reviewer is not identified to us as the CME provider. We receive a report within 2 weeks of the activity. Data from these reports is compiled by certification services and reported to our advisory board as part of the quality assurance process.

B. Review of activity evaluation data:

We examine the evaluation data for each activity to screen for participants' perception of commercial bias or influence, or any lack of balance or objectivity. Any activity that achieves a score of > 5% of participants triggers an investigation into possible causes for bias perception. Any activities beyond this threshold are discussed by the Senior Management Team and by the Advisory Board as part of the review of the CME program. Appropriate corrective action is taken, depending on the scenario.

Our content validation policy is in alignment with ACCME's policy on the Validation of the Clinical Content of CME (published July 2002).

Medical Association Perspective Criterion 9 (SCS 4)

We rarely accept commercial support for any of our programs. However, when we do, we have policies and procedures in place that ensure that all CME activities are planned by our content experts and that there is no influence on content, speaker selection or any other aspects of the activity planning/delivery process by commercial interest. Here is how we accomplish it:

- Commercial support is only sought after an activity is already planned. Planning would never be influenced by commercial supporters and they are informed of this. They know that the activity we are seeking a grant for has already been planned and they would only contribute unrestricted educational funds.
- We have a letter of agreement that all commercial sponsors must sign that stipulates that we maintain total control of all planning and delivery of CME activities.
- We allow no advertising and promotional materials within our activities.
- All exhibits are held in a completely separate area.
- Generic terms are used whenever possible.
- We maintain total control of all stages of any CME activity.
- All joint sponsorships are with non-profits and they must uphold all our standards and policies.
- We ask all planners, authors and speakers to sign an agreement that they will not promote any commercial products.
- Commercial support is a very low percentage of our total budget and does not influence the production of any courses.
- We resolve any potential conflicts of interest of our speakers, planners or authors.

Criterion 10 (SCS 5)

- We are a medical specialty group, and as such, have a valuable resource of committees of nationally known experts on most of the topics that we address. We ask the committees to peer review the content of our courses prior to it being presented or published. If they find any potential conflict of interest, or cases where the recommendations do not promote improvements in health grounded in evidenced based medicine, we work on solving the issue prior to the publication or presentation of the CME activity.
- We ask all planners, authors and presenters to sign an agreement, where they acknowledge that they will promote improvements in health care and not proprietary interests of any commercial interest.
- In our evaluations, we ask the participants whether they noticed any commercial bias. If there are cases where bias is noted, we investigate the issue and work on preventing it from happening again.
- For live presentations, we periodically send a representative of our Education Committee to the course in order to ensure the quality; specifically, to monitor that the course is promoting improvements in health care and not proprietary interests of the commercial interest. Staff also attend all live meetings and are trained to spot any issues.
- We use national data and nationally known experts to determine professional practice gaps in order to ensure that we are addressing issues that will promote improvements in health care.

How is your organization addressing Criteria 9 and 10?

What you are doing may help your colleagues, or spark questions that will help you! **Add to the conversation on the IACME LinkedIn Discussion Group! Go to:**

http://www.linkedin.com/groups?gid=1903150&trk=myg_ugrp_ovr

You must be a member of the IACME to join.