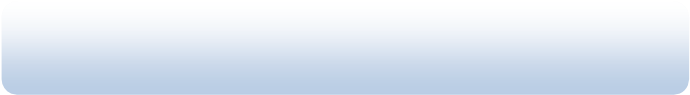


**JOINT PROVIDERSHIP PROGRAM**

**DIVISION OF CONTINUING MEDICAL EDUCATION**



**PRIOR TO THE ACTIVITY**

**CME JOINT-PROVIDER (JP) ACTIVITY CHECKLIST**

* **INTAKE FORM**: **(JP)** Complete and return Intake Form to the ISMA **prior** to the planning of the activity.

|  |  |
| --- | --- |
|  | **PLANNING COMMITTEE DISCLOSURES: (JP) The activity Planning Committee must complete & return to the ISMA their Disclosure of Financial Relationship Forms, along with Intake Form, prior to the first planning meeting.** |

* **PRE-APPROVAL EMAIL:**  If approved, **ISMA** will send you via email a Preliminary Approval, the Joint Providership Fee Schedule, an extensive CME Application and Planning Worksheet, and a Joint Providership Agreement for signature by an authorized company representative.

**NOTE:** To be in compliance with ISMA’s policy, the Planning Committee meeting minutes **MUST** reflect the Chair of the Committee *directing all members who have indicated a potential conflict of interest will be recused from any discussion where there is a potential for the stated conflict to influence the content of the program.*

* **ISMA JOINT PROVIDERSHIP AGREEMENT: (JP)** Sign and return to ISMA the Joint Providership Agreement. A fully executed copy must be on file before proceeding.
* **SUBMIT CME APPLICATION & PLANNING WORKSHEET: (JP)** Complete and submit the ISMA CME Application & Planning Worksheet no less than **3 months prior** to the activity.

Supporting documentation **required** at time of submission:

* Documentation that supports the practice gaps identified
* Global program learning objectives
* Initial planning meeting minutes
* Projected budget for the activity
* Preliminary program agenda listing all educational sessions, breaks and meals (including purported faculty, if known)
* Submit all application documentation via email to [**cstearley@ismanet.org**](mailto:cstearley@ismanet.org)
* **APPLICATION REVIEW BY ISMA:** **ISMA** reviews the final CME Application & Planning Worksheet and provides feedback. **Upon ISMA approval, current forms and templates will be emailed to you.** ISMA forms and templates sent in the approval email MUST be used; there may have been updates made to the forms since a previous activity.
* **DISCLOSURE FORMS: (JP)** Send Disclosure of Financial Relationship Forms and Content Validity Forms to all speakers and moderators for completion. For all potential Conflicts of Interest (COI) identified, a designated ISMA official must manage the disclosure and complete the ISMA COI Resolution Form.
  + **APPROVAL OF MARKETING MATERIALS: (JP)** Furnish ISMA with a copy of all print and electronic marketing materials for review & approval **2 weeks prior** to publishing/distributing.
  + All materials, including save-the-dates, brochures, flyers, website announcements, etc., must meet ISMA Marketing Guidelines and Requirements.
* Materials should include the following elements:
* Program/session learning objectives
* CME accreditation, designation and disclosure statements and ISMA logo use in format provided in Marketing Guidelines
* Acknowledgement of Educational Grants/Commercial Support (both financial & in-kind contributions)
* **EDUCATIONAL GRANTS:**
* Any commercial support/educational grants sought must be done so with the full knowledge of ISMA. Formal Letters of Agreement (LOA) must be signed by **ALL 3 entities**:

Joint Provider

ISMA as Accredited Provider

Commercial Supporter/Industry Partner

#  MEETING MATERIALS:

# Due 30 days prior to meeting

* **(JP)** Submit completed Disclosure of Financial Relationship Forms and Content Validity Forms to ISMA for all speakers & moderators who are participating in the activity.

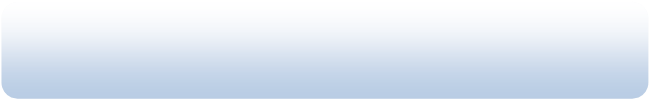
**NOTE:** All potential Conflicts of Interest (COI) disclosed **MUST** be vetted and resolved by ISMA before speakers/ moderators are allowed to present.

* **(JP)** Submit program Syllabus to ISMA for review/approval.
* **(JP)** Submit all speaker powerpoint presentations to ISMA for review/approval.

# Due 2 weeks prior to meeting

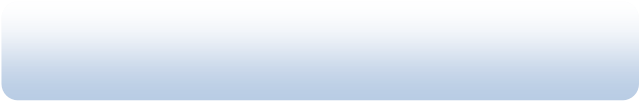
* **(JP)** Submit handouts to ISMA for review/approval.
* **(JP)** Submit adapted Evaluation Form & CME Certificateto ISMAforfinal approval.
* **(JP)** Submit Pre & Post-Test Forms to ISMA for final approval (if applicable).
* **ISMA** will generate a Disclosure Grid/Table and send to JP for inclusion in program materials

# DURING THE ACTIVITY



* **DISCLOSURE INFORMATION: (JP)** Provide the Disclosure Grid in the program syllabus or handout, or you **MUST** show the disclosure information on the 1st slide of the presentation, to be reviewed **prior** to start of the activity.
* **ACTIVITY EVALUATION FORMS & PRE/POST TESTS: (JP)** Gather all Activity Evaluation Forms (and Pre/Post-Tests, if applicable).

# AFTER THE ACTIVITY



##  CME CERTIFICATES: (JP) Create/distribute CME certificates by email or snail mail. Credit may not be claimed until after the learners have participated in the activity.

 **(JP)** Send the following **within 2 weeks** of conclusion of the activity:

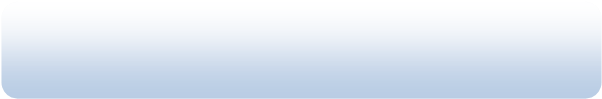
* Attendance List
* Copy of Certificates of Attendance issued
* Program Evaluation Summary

 **(JP)** Send the following **within 30 days** of conclusion of the activity:

* Pre/Post-Test Summary (if applicable)
* Final activity budget (reflecting actual revenue & expenses, including commercial support, exhibitor fees, registration fees, etc.)

**The Activity File will not be considered closed until final documentation is submitted.**

# RETAIN FOR 6 YEARS



**RETAIN ALL PROGRAM DOCUMENTATION IN YOUR FILES FOR 6 YEARS TO BE AVAILABLE FOR ISMA/ACCME REVIEW:**

* Planning Committee meeting minutes
* All Financial Disclosure forms
* Disclosure grid
* Final program syllabus
* All program marketing materials
* Summary of program evaluations (including actual onsite evaluations completed by participants)
* Summary of Pre/Post-Test (including actual tests completed by participants – if applicable)
* Attendance List
* Financial Recap/Final Activity Budget