EVERYTHING STANDARD 3

- Including the Kitchen Sink –



April 2023





STANDARD 3: IDENTIFY, MITIGATE, AND DISCLOSE RELEVANT FINANCIAL RELATIONSHIPS



STANDARD 3 applies to ALL accredited continuing education

Many healthcare professionals have financial relationships with ineligible companies.

These relationships must not be allowed to influence accredited continuing education.



1ST PHASE: INDENTIFICATION, WHICH INVOLVES "COLLECTION"

You must collect from all individuals in control of content.

- Planners:
 - ➤ CME Staff, Course Director, CME Committee
- Faculty Presenters:
 - ➤ Speakers, Panelists, Moderators
- · Reviewers:
 - ➤ Peer reviewers, CME Staff



WHAT DO YOU COLLECT?

- <u>All</u> of their financial relationships with ineligible companies (commercial interests).
 - > Regardless of the amount
 - Regardless of their view of the relevance of the relationship to the education*
 - ➤ Within the prior 24 months

The CME provider is now fully responsible for determining relevancy.*



DISCLOSURE MECHANISMS

A Disclosure Form is one mechanism that providers can use.

Other mechanisms could include:

- Collecting the information verbally and recording it in a spreadsheet, table, or database
- Collecting disclosure information electronically (i.e, via e-mail, web-based form, or database)



FOR EACH FINANCIAL RELATIONSHIP, DISCLOSURE INFORMATION MUST INCLUDE:

- Name of ineligible company
- Nature of the relationship
 - > Consultant
 - > Speakers Bureau
 - ➤ Grant/Research Support
 - ➤ Principal Investigator
 - ➤ Board Member
 - > Stock Shareholder
 - > Employee/Owner
 - > Other



WHAT IF A RELATIONSHIP HAS ENDED?

If a relationship has ended within the last 24 months, you no longer have anything to mitigate.

However, you should still disclose the financial relationships to your learners.

Nature of Financial Relationship	Name of Ineligible Company(s)	Has the relationship ended?
☐ Consultant	Click here to enter text.	☐ Yes
☐ Speaker's Bureau	Click here to enter text.	☐ Yes
☐ Grant/Research Support ☐ Principal Investigator	Click here to enter text.	□ Yes
☐ Board Member	Click here to enter text.	☐ Yes
☐ Stock Shareholder (Privately held, self-managed)	Click here to enter text.	☐ Yes
☐ Stock Shareholder (Publicly traded, pension/mutual fund and/or self-managed)	Click here to enter text.	□ Yes
☐ Full-time/part-time Employee/Owner*	Click here to enter text.	☐ Yes
☐ Other (Describe):	Click here to enter text.	☐ Yes

MANAGING USE OF EMPLOYEES/OWNERS OF INELIGIBLE COMPANIES

These individuals must be <u>excluded</u> from controlling content or participating as planners or faculty in accredited education.

There are three exceptions to this exclusion!



WHAT ARE THE EXCEPTIONS?

EXCEPTION #1

When the content of the activity is not related to the business lines or products of their employer/company.

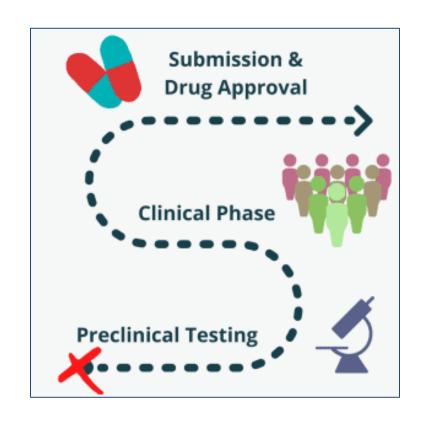






EXCEPTION #2

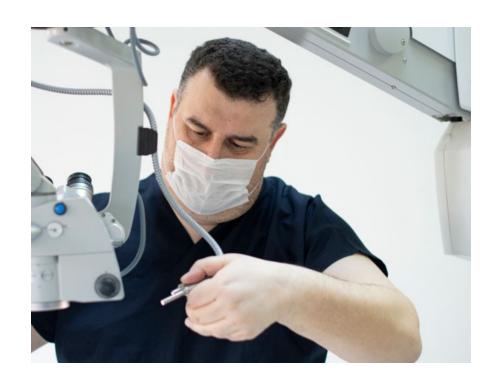
When the content of the accredited activity is limited to basic science research, such as pre-clinical research and drug discovery, or the methodologies of research, and they do not make care recommendations.





EXCEPTION #3

When they are participating as technicians to teach the safe and proper use of medical devices, and do not recommend whether or when a device is used.





DOES STOCK OWNERSHIP CREATE AN EMPLOYEE/OWNER RELATIONSHIP?

If an individual is an owner of stock in a company that is **privately held,** that individual would be considered by ACCME to be an owner of the company. This relationship is not mitigatable.

If stock/stock options are in **publicly traded companies**, and the financial relationships are relevant to the CME content, those relationships are mitigatable and should be disclosed to learners.

NOTE:

ACCME does not require individuals who control CME content to disclose **diversified mutual funds**, but any other stocks or stock options should be disclosed to the provider.



LETS TAKE A LOOK AT HOW THESE FORMS OF STOCK OWNERSHIP DIFFER

Publicly Traded Company

A company that has sold all or a portion of itself to the public via an initial public offering, meaning shareholders have a claim to part of the company's assets and profits.

They <u>can</u> tap the financial markets by selling stock to raise capital.

Privately Held Company

The company is owned by its founders, management, or a group of private investors.

A private company <u>cannot</u> dip into the public capital markets and must rely on private funding.





ISMA now differentiates on our Financial Disclosure Form

Nature of Financial Relationship	Name of Ineligible Company(s)	Has the relationship ended?
☐ Consultant	Click here to enter text.	□ Yes
☐ Speaker's Bureau	Click here to enter text.	☐ Yes
☐ Grant/Research Support ☐ Principal Investigator	Click here to enter text.	□ Yes
☐ Board Member	Click here to enter text.	☐ Yes
☐ Stock Shareholder (Privately held, self-managed)	Click here to enter text.	☐ Yes
☐ Stock Shareholder (Publicly traded, pension/mutual fund and/or self-managed)	Click here to enter text.	□ Yes
☐ Full-time/part-time Employee/Owner*	Click here to enter text.	☐ Yes
☐ Other (Describe):	Click here to enter text.	□ Yes



Are patent holders who receive royalty payments from ineligible companies considered to be owners of those companies?

NO

The ACCME advises that individuals who receive patent royalties from ineligible companies are <u>not</u> considered owners or employees of those companies.

Those individuals may control content in accredited continuing education, if the appropriate steps are taken to mitigate.



IDENTIFICATION INVOLVES "DETERMINING RELEVANCY"

The accredited provider is responsible for identifying relevant financial relationships.

- Faculty/speakers can no longer self determine relevancy -



Individuals must disclose regardless of their view of the relevance of the relationship to the education.



WHEN ARE FINANCIAL RELATIONSHIPS "RELEVANT?"

Standard 3.3 states:

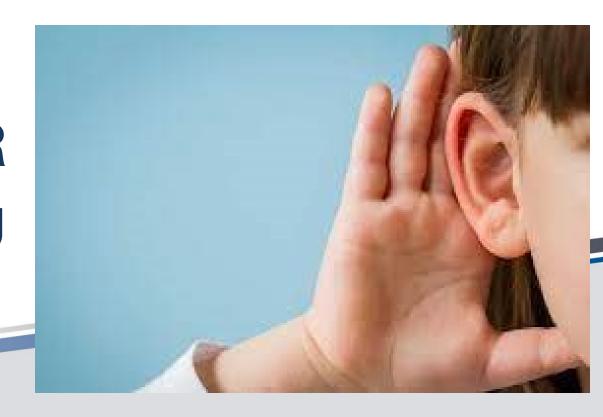
"Financial Relationships are **relevant** if the educational content an individual can control is related to the business lines or products of the ineligible company."

This is plural and not singular



Consider the process <u>you</u> use to determine which financial relationships are relevant to the educational content.

LETS HEAR FROM YOU



Did you find the content of the CE activity the person can control is related to the products or business lines of the ineligible company?

Faculty

Content

Business Line



ALWAYS DO YOUR ONLINE RESEARCH OF THE INELIGIBLE COMPANY(S)





If the ineligible company has a product line related to the topic, but the subject matter is not related to the planner or speaker's area of practice/expertise......

- Is there a conflict of interest?
- Is the relationship with the company relevant?
- Do you need to disclose the relationship to the learners?



2ND PHASE: MITIGATION

Before a person assumes their role in a CME activity, you must take steps to prevent all those with relevant financial relationships from inserting commercial bias into the content.



STEPS FOR PLANNERS WILL LIKELY BE DIFFERENT THAN FOR FACULTY

And would occur before planning begins.





MITIGATION FOR PLANNERS

Those making decisions related to the scope and direction of the content, educational goals, identification of practice gaps and needs, selecting speakers, authors, and reviewers. If a planner or reviewer discloses a financial relationship, here are options that can be considered to mitigate the relationship.

- End the financial relationship (including having ended the relationship within 24 months)
- Recuse individual from controlling aspects of planning and content with which there is a financial relationship
- Peer review planning decisions and review determinations by persons without relevant financial relationships



MITIGATION FOR FACULTY/PRESENTERS

This is teaching, writing, producing and delivering education. If a faculty presenter discloses a financial relationship, here are options that can be considered to mitigate the relationship.

- End the financial relationship (including having ended the relationship within 24 months)
- Recuse individual from controlling aspects of planning and content with which there is a financial relationship
- Peer review of content by persons without relevant financial relationships
- Attest that clinical recommendations are evidencebased and free of commercial bias (e.g., peerreviewed literature, adhering to evidence-based practice guidelines)



MITIGATION IN GENERAL

- Planners and other content experts can help determine relevance of relationships, if necessary.
- Keep in mind that simply monitoring the CME content for commercial bias at the time of presentation is <u>not</u> an acceptable mitigation mechanism.
- When providers identify relevant relationships, they must direct authors/ teachers to take actions to assist in the mitigation.



DOCUMENT THE STEPS TAKEN TO MITIGATE RELEVANT FINANCIAL RELATIONSHIPS



You will be asked about this at reaccreditation time during PIP activity review



COI Mitigation (Resolution) Spreadsheet for Use with Individual Activities

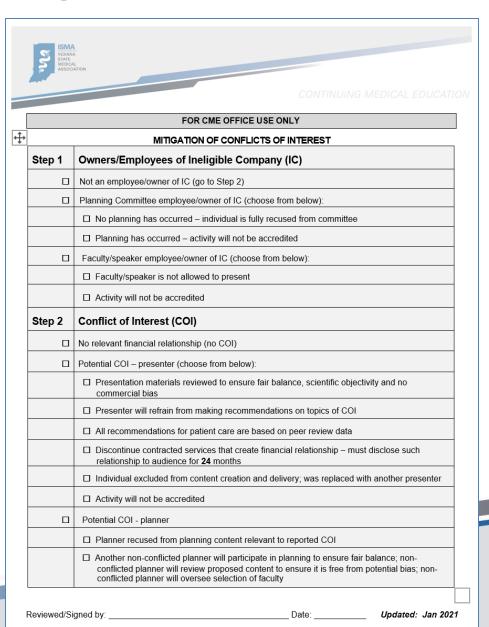
Name of Individual	Individual's Role(s) in Activity	Name of Commercial Interest(s)	Nature of Relationship(s)	Mechanism(s) implemented to resolve conflict of interest appropriate to role(s) in the activity

Record the steps you took in a spreadsheet, table, or database



COI Mitigation (Resolution) Form

This is another mechanism providers might use.





NEW EXCEPTIONS TO DISCLOSURE

Accredited providers do <u>not</u> need to identify, mitigate, or disclose relevant financial relationships for any of the following activities:

- Education that is non-clinical in nature, or
- Where the learner group is in control of content, such as spontaneous case conversations among peers (also referred to as Peer-to-Peer, At the Elbow CME).



WHAT CONSTITUTES A NON-CLINICAL TOPIC?

Education is considered **non-clinical in nature** when it is not providing any type of clinical recommendations in caring for patients but is directly related to their professional work.

When it is not directly related to their professional work, it does not fall within ACCME's definition of CME content.



EXAMPLES OF NON-CLINICAL TOPICS

- Advocacy and Legislation
- Employment Contracting
- Billing, Coding and Reimbursement
- Telehealth Fraud
- Electronic Medical Records (EMR)
- Social Determinants of Health
- Diversity, Equity and Inclusion
- Improving Physician Communication with Patients
- Practice Management
- Starting Your Own Medical Practice
- Connecting Practice to Research
- Physician Burnout and Well-Being
- Physician Leadership
- Education Basics for Teaching Patients, Families/Caregivers
- Financial Planning for Physicians Personal Finance for Physicians at Every Stage of Their Career



IN DOUBT WHETHER A TOPIC IS CLINICAL VS. NON-CLINICAL IN NATURE?

I would err on the side of caution and collect disclosure.

FOR EXAMPLE:

The field of **Medical Ethics** encompasses both practical application in **clinical** settings and scholarly work in philosophy, history, and sociology. **Ethics consultants offer clinical and non-clinical recommendations**.

Thus, if an **Ethics** topic is being presented to you as a non-clinical topic, but you have not yet seen any content or outline for content, you have every right as the accredited provider to question and make the final decision.



WHAT CONSTITUTES SPONTANEOUS CASE CONVERSATIONS?

The exception is meant to apply to spontaneous learning opportunities that previously might not have been considered CME, like team huddles and impromptu leadership discussions.

In these cases, with the guidance of the CME Department, learners can describe the learning opportunity (problem-in-practice and change that resulted)



WHAT SPONTANEOUS CASE CONVERSATIONS ARE NOT!

- Regularly scheduled series
- Case conferences
- Tumor boards

These are <u>not</u> considered "spontaneous case conversations among peers."

The exception does not apply to conferences or grand rounds that have set times and dates and have traditionally been planned as accredited CME.

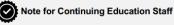






What is your name and email?	Name:		
	Email:		
When will the education take place?	Date:		
Do you have a title or brief description for the education? If yes, please note it to the right; if no, leave blank.	Title/Brief Description:		
Examples: Emergency Department team huddle; Leadership in a time of crisis; Well-being check-In			
What practice-based problem (gap) will this education address?	Practice-based problem (gap):		
Examples: Improve care coordination; Better communication with patients and families; Want to give better feedback to students			
What is/are the reason(s) for the gap? How are your learners involved?	Reason(s) for the gap:		
Examples: We need strategies to discuss difficult topics with family members; Don't know best ways to improve team collaboration			
Review the three statements to the right.	The education will (check all that apply)		
If you can check <u>any</u> of these boxes, you do not need to identify, mitigate, and disclose relevant financial relationships.	 only address a non-clinical topic (e.g., leadership or communication skills training). 		
If you unable to check any boxes, please contact your CE program administrator to implement processes for ensuring the integrity and independence of this education.	 be for a learner group that is in control of the content (e.g., spontaneous case conversation among peers). 		
	 be a self-directed educational activity where the learner will control their educational goals and report on changes that resulted (e.g., learning from teaching, remediation, or a personal development plan). 		
What change(s) in strategy, performance, or patient care would you like this education to help learners accomplish?	Desired change(s) in strategy, performance, or patient care:		
Examples: Eliminate stigmatizing language from communications with patients; Improve my management skills			
In order to award CME/CE credit, please indicate the duration of the education.	Education duration:hours and minutes Please report time in 15-minute increments.		
Discuss with learners the changes they intend to make to their strategies, performance, or patient care that will result from this activity and list that information to the right.	Changes learners intend to make to strategies, performance, or patient care:		
Example: I will use the evidence-based checklist we discussed to improve screening my patients for past military service.			

After the activity, please collect attendance and learner change information for the activity and send it to the continuing education department in order for credit to be awarded. You can also list the attendees on the back of this form.



This completed form provides the necessary information to demonstrate the professional practice gap and underlying needs, expected results, appropriate format, changes in learners, independence, and administrative information needed to award credit to learners. Please enter this activity in ACCME PARS following your usual process, and provide to learners your accreditation statement, the credit designation statement, and any applicable MOC statements. If you have awarded MOC credit, please report learners in PARS within 30 days of the education. For questions or assistance, contact ACCME at info@accme.org.

The ACCME's new **Quick Tool** provides a good framework for planning both of these types of learning opportunities





Toolkit for the Standards for Integrity and Independence in Accredited Continuing Education

The ACCME is pleased to provide this toolkit of resources to assist accredited providers in transitioning to the new Standards for Integrity and Independence. For this initial collection of tools, we have focused on Standard 1: Ensure Content is Valid and Standard 3: Identify, Mitigate, and Disclose Relevant Financial Relationships. These two standards are applicable to all accredited providers. Use of these resources is completely optional. Many accredited providers have their own policies, procedures, forms, and mechanisms to facilitate the planning and delivery of accredited education—as you review your own practices, you may wish to check them against these resources to ensure you are positioned to meet expectations.

We look forward to working with the continuing education community to create and refine additional tools, as necessary. As always, we remain available for questions and assistance! Contact us at info@accme.org.



Key Steps

Overview of the 3-step process to identify, mitigate, and disclose relevant financial relationships.



Sample Letter

Language you can use to explain to prospective planners and faculty why financial relationship information is collected.



Template

Compare your process or forms to this sample template to collect the right information about financial relationships.



Worksheet

Step-by-step process for identifying and mitigating relevant financial relationships.



Examples

Sample language that shows you how to communicate disclosure to learners.



Guidance

An example of how to enlist help from planners and faculty to ensure that clinical content is valid.



Template

An example of a tool to facilitate peer review to ensure that clinical content is valid.



Quick Tool

Use this sample tool to simplify educational planning when identification, mitigation, and disclosure are not required.

Toolkit for the Standards for Integrity and Independence in Accredited Continuing Education © 2020 by the Accreditation Council for Continuing Medical Education (ACCME®)

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The Quick Tool is Part of ACCME's new Toolkit

https://www.accme.org/st andards-resources



Tools and Forms



Toolkit for the Standards for Integrity and Independence in Accredited Continuing Education

The ACCME 's new Toolkit contains resources to assist providers in transitioning to the new Standards.

The initial collection of tools focuses on:

- Standard 1: Ensuring Content is Valid
- Standard 3: Identifying, Mitigating, and Disclosing Relevant Financial Relationships.

These 2 standards are applicable to all accredited providers, whether or not commercial support is received.

Use of these resources is completely **optional**.



NON-CLINICAL DISCLOSURE STATEMENT?

Is there a financial disclosure statement that should be provided to learners for **non-clinical** program topics?

 No, accredited providers do not need to identify, mitigate, or disclose relevant financial relationships for non-clinical topics.

However, ISMA has begun including the following statement:

"There are no relevant financial relationships with an ineligible company to identify, mitigate or disclose because the content of this activity is non-clinical in nature."



STANDARD DISCLOSURE TO LEARNERS TO INCLUDE:

(either individually or as a group)

- The names of the individuals with relevant financial relationships
- The names of the ineligible companies with which they have relationships
- The nature of the relationships
- A statement that all relevant financial relationships have been mitigated
- The absence of relevant financial relationships (if applicable)



METHODS OF DISCLOSURE

You may use a variety of these:

- Disclosure Grid
- Disclosure Slide @ beginning of presentation
- Disclosure Statement on flyer and/or other advertisement materials
- Verbal Disclosure to audience during presentation



VERBAL DISCLOSURE

The Nuance

While disclosure may be given **verbally** to participants, CME providers must be able to supply the ISMA with written verification that appropriate verbal disclosure occurred (especially if this is the only method you use).

A representative of the provider who was in attendance at the time of the education must attest in writing:

- That verbal disclosure did occur, and
- Itemize the content of the disclosed information, or that there was nothing to disclose



OTHER USEFUL TOOLS IN ACCME'S NEW TOOLKIT







Questions? E-mail info@accme.org



Note for Continuing Education Staff

If any of the following statements apply to the education, you do not need to identify, mitigate, or disclose relevant financial relationships for this accredited continuing education:

- ✓ It will only address a non-clinical topic (e.g., leadership or communication skills training).
- ✓ It is for a learner group that is in control of the content entirely (e.g., spontaneous case conversation among peers)
- ✓ It is a self-directed educational activity where the learner will control their educational goals and report on changes that resulted (e.g., learning from teaching, remediation, or a personal development plan). When accredited providers serve as a source of information for the self-directed learner, they should direct learners only to resources and methods for learning that are not controlled by ineligible companies.

STEP 1: Before you begin planning your education, collect information from all planners, faculty, and others who would be in positions to control content. Ask them to provide information about all their financial relationships with ineligible companies over the previous 24 months.

Ensure you use this definition: Ineligible companies are those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

Hint: Use the Template for Collecting Information about All Financial Relationships from Planners, Faculty, and Others. There is no minimum financial threshold; individuals must disclose all financial relationships, regardless of the amount, with ineligible companies.

STEP 2: Review the disclosed relationships and exclude owners and employees of ineligible companies from participating as planners, faculty, or other roles unless the educational activity meets one of the exceptions listed below.

There are only three exceptions that allow for owners and/or employees of ineligible companies to participate as planners or faculty in accredited continuing education.

- When the content of the activity is not related to the business lines or products of their employer/company.
- When the content of the accredited activity is limited to basic science research, such as pre-clinical research and drug discovery, or the methodologies of research, and they do not make care recommendations.
- When they are participating as technicians to teach the safe and proper use of medical devices, and do not recommend

STEP 3: Determine which financial relationships are relevant to the content of the continuing education activity, mitigate those relevant financial relationships to prevent commercial bias, and disclose the presence or absence of all relevant financial relationships to learners prior to the activity.



Determine relevant financial relationships for all who will be in control of educational content.

Financial relationships are relevant if the following three conditions are met for the individual who will control content of the

- ✓ A financial relationship, in any amount, exists between the person in control of content and an ineligible company.
- ✓ The financial relationship existed during the past 24 months.
- √ The content of the education is related to the products of an ineligible company with whom the person has a financial relationship.



Mitigate relevant financial relationships prior to individuals assuming their roles in the education.

Hint: Use the Worksheet for the Identification and Mitigation of Relevant Financial Relationships of Planners, Faculty, and Others to implement mitigation strategies appropriate to their role(s) in the educational activity.



Before the learner engages in the education, disclose to learners the presence or absence of relevant financial relationship for all persons in control of content.

Hint: Use the Examples of Communicating Disclosure to Learners to share all of the appropriate information before the activity.

Key Steps for the Identification, Mitigation, and Disclosure of Relevant **Financial Relationships**

A Checklist for CMF Staff providing an overview of the 3-step process and things that are important to consider.

STEP 1: Before you begin planning

STEP 2: Reviewing disclosures and excluding owners/employees of ineligible companies

STEP 3: Determining which relationships are relevant







Note for Continuing Education Staff

If any of the following statements apply to the education, you **do not** need to identify, mitigate, or disclose relevant financial relationships for this accredited continuing education:

- ✓ It will only address a non-clinical topic (e.g., leadership or communication skills training).
- ✓ It is for a learner group that is in control of the content entirely (e.g., spontaneous case conversation among peers).
- It is a self-directed educational activity where the learner will control their educational goals and report on changes that resulted (e.g., learning from teaching, remediation, or a personal development plan). When accredited providers serve as a source of information for the self-directed learner, they should direct learners only to resources and methods for learning that are not controlled by ineligible companies.

At the beginning of your planning process, use the sample language below to communicate with prospective planners, faculty, and others who may be in control of content for the education. It is important to identify financial relationships before activity planning begins so that relevant financial relationships can be mitigated in a manner that is appropriate to each person's role.

Dear Prospective Planner/Faculty Member:

We are looking forward to having the opportunity to include you as a roposed role for person—e.g.
planner, faculty, reviewer, etc...> in the accredited continuing education, <nsert activity title or working title and date/location information, if appropriate>.

Why am I receiving this communication?

Insert Accredited Provider Name> is accredited by the Accredited Provider Name>" is accredited by the Accreditor. we appreciate your help in partnering with us to follow accreditation guidelines and help us create high-quality education that is independent of industry influence. In order to participate as a person who will be able to control the educational content of this accredited CE activity, we ask that you disclose all financial relationships with any ineligible companies that you have had over the past 24 months. We define ineligible companies as those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. There is no minimum financial threshold; you must disclose all financial relationships, regardless of the amount, with ineligible companies. We ask you to disclose regardless of whether you view the financial relationships as relevant to the education. For more information on the Standards for Integrity and Independence in Accredited Continuing Education, please visit accme.org/standards.

Why do we collect this information?

Since healthcare professionals serve as the trusted authorities when advising patients, they must protect their learning environment from industry influence to ensure they remain true to their ethical commitments. Many healthcare professionals have financial relationships with ineligible companies. By identifying and mitigating relevant financial relationships, we work together to create a protected space to learn, teach, and engage in scientific discourse free from influence from organizations that may have an incentive to insert commercial bias into education.

What are the next steps in this process?

After we receive your disclosure information, we will review it to determine whether your financial relationships are relevant to the education. Please note: the identification of relevant financial relationships does not necessarily mean that you are unable to participate in the planning and implementation of this educational activity. Rather, the accreditation standards require that relevant financial relationships are mitigated before you assume your role in this activity.

To help us meet these expectations, please use the form we have provided to share all financial relationships you have had with ineligible companies during the past 24 months. This information is necessary in order for us to be able to move to the next steps in planning this continuing education activity.

If you have questions about these expectations please contact us at rovider contact information>.

Sample Letter to Explain Why Financial Relationship Information is Collected

At beginning of planning process, sample language CME providers can use to communicate with prospective planners, faculty and reviewers.

- Why they are receiving the communication
- Why the CME Office is collecting this information
- What the next steps are in the process of mitigation





To be completed by education staff.		_	, Individual's prospective r	ole(s) in education
Name of Individual:		©	Identify the prospective role	of(s) that this person may have in f this education (choose all that
Title of Continuing Education:			Planner Examples: planning committee, staff involv Teacher, Instructor, Faculty	ed in choosing topics, faculty, or content
Date and location of Education:			Author, Writer Reviewer Other	
As a prospective planner or faculty membe influence. Please complete the form below		ask for	our help in protecting our lea	
The ACCME Standards for Integrity and Infrom involvement in the planning and imple assistance. If you have questions, please of	mentation of accre			
To be Completed by Planner, Faculty, or O	thers Who May Co	ntrol Ed	ucational Content	
Please disclose all financial relationships th For each financial relationship, enter the name financial threshold; we ask that you disclose al disclose all financial relationships regardless o	of the ineligible con I financial relationshi	npany ar ips, rega	nd the nature of the financial related relates of the amount, with inelig	ationship(s). There is no minimum gible companies. You should
Enter the Name of Ineligible Company	Enter the Nature	of Fina	ancial Relationship	Has the Relationship Ended?
An ineligible company is any entity whose primary business is producing, marketing, selling, or distributing healthcare products used by or on patients. For specific examples of ineligible companies visit accme.org/standards.	researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or n patent beneficiary, executive role, and ownership interest. Individual stocks and stock options should be disclosed;		If the financial relationship existeduring the last 24 months, but han now ended, please check the box in this column. This will help the education staff determine if any mitigation steps need to be taken	
Example: ABC Company	Consultant			X
In the past 24 months, I have not have	d any financial rela	tionship	s with any ineligible companie	es.
attest that the above information is co	orrect as of this d	late of	submission.	
Note for Continuing Educat Use this template to collect all relevant fina educational content before they assume the activity, if your planners and faculty are a periodic basis and ask the individuals to up	ncial relationships of eir role in the educa et group of individu	ation. As	an alternative to collecting d might choose to collect this i	isclosure information for each

Template for Collecting Information about All Financial Relationships from Planners, Faculty and Others

Basically a sample Financial Disclosure Form that you may adopt, if desired.

Compare your process or forms to this sample template to collect the right information about financial relationships.



ISMA Financial Disclosure Form

ISMA did not adopt this form but did update ours to reflect changes in the new Standards.

- Did <u>not</u> change to term CE, but left CME (Continuing Medical Education)
- Removed mention of and request for disclosure of spouse/partner
- Removed columns in grid for Self vs. Spouse/Partner and added "Has relationship ended?"
- Changed look-back on relationships from 12 to 24 months
- Changed section on Relevant Financial Relationships to All Financial Relationships
- Changed term "commercial interest" to "ineligible company"
- Changed term "resolved" to "mitigated"
- Updated Statements/Rules of ISMA Content Validation on form to include:
 - Although accredited continuing education is an appropriate place to discuss, debate, and explore new and evolving topics, these areas need to be clearly identified as such within the program and individual presentations. It is the responsibility of the accredited provider to facilitate engagement with these topics without advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence and clinical reasoning.
- Within Glossary of Terms, updated:
 - Definition of "Commercial Interest," now called "Ineligible Entity"
 - Definition of "Relevant Financial Relationships"



ISMA Financial Disclosure Form

ISMA NDANA STATE MEDICAL ASSOCIATION					
	DISCLOSURE	OF FINANCIAL I	RELATIONSHIP FO	RM	
Name/Credentials	Click here to enter text.				
Telephone Number:	Click here to enter text.	E-Mail Address:	Click here to enter	text.	
Activity Name:	Click here to enter text.		Date:	Click here to enter text.	
Please indicate your role in this CME activity: Presenter/Faculty Course Director Moderator Planning Committee (Please check all that apply)					

Purpose: It is the policy of the Indiana State Medical Association (ISMA) to ensure balance, independence, objectivity and scientific rigor in all of its sponsored educational activities. All participating faculty, course directors, and planning committee members are required to disclose to the program audience any financial relationships related to the subject matter of continuing medical education (CME) activities/programs. Disclosure information is reviewed in advance in order, to manage and resolve any possible conflicts of interest. This information is necessary in order, for us to be able to move to the next steps in planning this CME activity.

Persons who fail to provide this information in advance of the course (allowing for adequate time for review) are not eligible to be involved in this CME activity.

<u>Participation</u>: We are pleased that you are willing and able to participate in this CME activity, which is accredited by the ISMA. The ISMA is accredited by the Accreditation Council for Continuing Medical Education (ACCME). As such, we are required to meet the ACCME's expectations for our practice of continuing medical education.

Step 1: Disclosure of All Financial Relationships

Please disclose all financial relationships that you have had in the past 24 months with ineligible companies (see definition in Glossary of Terms). For each financial relationship, enter the name of the ineligible company and the nature of the financial relationship(s). There is no minimum financial threshold; we ask that you disclose all financial relationships, in any amount, with ineligible companies. You should disclose relationships regardless of the potential relevance of each relationship to the education.

Regarding your role in this CME activity (check one):

□ No	In the nact 24 months	I have not had any financial	relationships with an ineligible company.

Yes, I do have a personal financial relationship with an ineligible company (Provide information below)

Nature of Financial Relationship	Name of Ineligible Company(s)	Has the relationship ended?
☐ Consultant	Click here to enter text.	
☐ Speaker's Bureau	Click here to enter text.	
☐ Grant/Research Support ☐ Principal Investigator	Click here to enter text.	
☐ Board Member	Click here to enter text.	
☐ Stock Shareholder (self-managed)	Click here to enter text.	
☐ Full-time/part-time Employee/Owner*	Click here to enter text.	
☐ Other (Describe):	Click here to enter text.	

^{*} The ISMA PROHIBITS <u>employees and owners</u> of <u>Ineligible Companies</u> from participating on any CME PLANNING COMMITTEE and serving as presenters.

Additional information may be requested to address any perceived conflict of interest. All identified conflicts of interest must be mitigated in advance of the activity and disclosure information will be shared with activity participants.



1 Step 2: Speaker Disclosure of Off-Label and/or Investigational Uses

If at any time during my educational activity, I discuss an off-label/investigative use of a commercial product/device, I understand that I must provide disclosure of that intent.

■ No, I do not intend to discuss an off-label/investigative use of a commercial product/device.

☐ Yes, I do intend to discuss off-label/investigative use(s) of the following commercial product(s)/device(s).

Click here to enter text.

Step 3: ISMA Statements & Rules to Ensure Content Validation

We would like to enlist your help to ensure that educational content is fair and balanced and that any clinical content presented supports safe, effective patient care. This includes the expectations that:

- All recommendations for patient care in accredited continuing education must be based on current science, evidence and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options.
- All scientific research referred to, reported, or used in accredited education in support or justification of a patient care
 recommendation must conform to the generally accepted standards of experimental design, data collection, analysis, and
 interpretation. Citations of the work are recommended.
- The content and/or presentation of the information with which I am involved will promote quality or improvements in healthcare and will not promote a specific business interest of a commercial interest.
- Recommendations involving diagnosis and treatment discussed in the presentation are based on evidence which is accepted within
 the profession of medicine as adequate justification for their indications and contraindication in the care of patient.
- Although accredited continuing education is an appropriate place to discuss, debate, and explore new and evolving topics, these
 areas need to be clearly identified as such within the program and individual presentations. It is the responsibility of the
 accredited provider to facilitate engagement with these topics without advocating for, or promoting, practices that are not, or not
 well adequately based on current science, evidence and clinical reasoning.
- Content cannot be included in accredited education if it advocates for unscientific approaches to diagnosis or therapy, or if the
 education promotes recommendations, treatment, or manners or practicing healthcare that are determined to have risks or
 dangers that outweigh the benefits or are known to be ineffective in the treatment of patients.
- a lunderstand that ISMA CME staff will need to review my presentation and/or content prior to the activity, and I will provide educational content and resources in advance, as requested.
- I understand that commercial entity corporate names or logos should not appear on my slides or handouts.
- I understand that ISMA CME staff may be attending the event to ensure that my presentation is educational, and not promotional in pature
- If I am discussing specific health care products or services, I will use generic names to the extent possible. If I need to use trade names, I will use trade names from several companies when available, and not just trade names from any individual company.
- If I have been trained or utilized by a commercial entity or its agent as a speaker (e.g., speaker's bureau for any ineligible
- company, the promotional aspects of the presentation will not be included in any way with this activity.

 If I am presenting research funded by a commercial company, the information presented will be based on generally accepted
- scientific principles and methods and will not promote the commercial interest of the funding company.

 If I am presenting research studies, I will include weaknesses and strengths of each study, in addition to harms and benefits of specific products. I will also discuss studies presenting different conclusions about the product, if available.

If you have any questions regarding your ability to comply, please contact Jessica Davis, CME Coordinator, at 317-261-2060, or by e-mail at jdavis@ismanet.org.

Step 4: Declaration

I will uphold the ISMA CME standards to ensure balance, independence, objectivity, and scientific rigor in my role in the planning, development or presentation of this continuing education activity. I understand that CME accreditation guidelines prohibit me from accepting any reimbursement (financial, gifts, or in-kind exchange) for this presentation from any source other than the accredited CME provider or its educational partner (or fiscal agent).

Signature/Printed Name:	Click here to enter text.	Date:	Click here to enter text.

If sending this completed document electronically, please type your name above and check this box:

By checking this box, I attest that the completed information is accurate. Please accept this as my signature.

Thank you for providing us with this information.

RETURN TO: Jessica Davis, CME Coordinator, at jdavis@jsmanet.org

ISMA Financial Disclosure Form



Glossary of Terms as Defined by the American Council on Continuing Medical Education (ACCME)

Ineligible Company (formerly known as "Commercial Interest")

The ACCME defines an "ineligible company" as those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

Financial Relationships

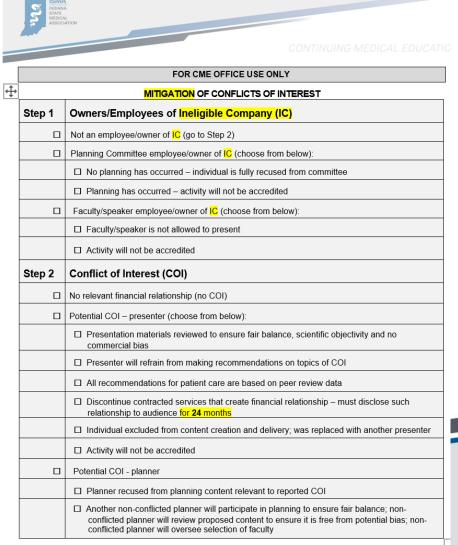
Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected.

Relevant Financial Relationships

ACCME focuses on collecting information about all financial relationships with ineligible companies within the prior 24 months. There is no minimum financial threshold; individuals must disclose all financial relationships, regardless of the amount, with ineligible companies. Individuals must disclose regardless of their view of the relevance of the relationship to the education. Inherent in any amount is the incentive to maintain or increase the value of the relationship. The ACCME classifies financial relationships as "relevant" if the educational content an individual can control is related to the business lines or products of the ineligible company.

Conflict of Interest

Circumstances create a conflict of interest when an individual has an opportunity to affect CME content about products or services of an ineligible company with which he/she has a financial relationship. The ACCME considers "content of CME about the products or services of that commercial interest" to include content about specific agents/devices, but not necessarily about the class of agents/devices, and not necessarily content about the whole disease class in which those agents/devices are used.



Reviewed/Signed by: Date: Updated: May 2021



Note for Continuing Education Staff

Use this sample worksheet to identify and mitigate relevant financial relationships that you have identified for planners, faculty, and others who will control educational content for your education activity. Please make sure that (1) the mitigation strategy is appropriate to the person's role in the activity, and (2) that mitigation is implemented before each person takes on their role.

STEP 1: Review collected information about financial relationships and exclude owners or employees of ineligible companies from participating as planners or faculty.

After collecting all financial relationships from prospective planners, faculty, and others, exclude any persons who are owners or employees of ineligible companies. Ineligible companies are those whose primary business is producing, marketing, selling, reselling, or distributing healthcare products used by or on patients. For information about exceptions to this exclusion, see accme.org/standards.

STEP 2: Determine relevant financial relationships

Review the information for all persons whom you did not exclude in Step 1 and determine whether each person's financial relationships with ineligible companies are relevant to the content of the education you are planning. Financial relationships are relevant if the following three conditions are met for the prospective person who will control content of the education:

- √ A financial relationship, in any amount, exists between the person in control of content and an ineligible company.
- ✓ The financial relationship existed during the past 24 months.
- ✓ The content of the education is related to the products of an ineligible company with whom the person has a financial relationship.

STEP 3: Choose a **mitigation strategy** for each person who has a relevant financial relationship and **implement** that strategy before the person assumes their role.

Using the lists below, identify which mitigation strategy(ies) will be used for all persons with relevant financial relationships who control the educational content of the educational activity. You may select multiple strategies but be sure to use strategies appropriate to the role(s) that each person has. You can also identify your own strategies for mitigation.

Mitigation steps for planners (choose at least one)

- ✓ Divest the financial relationship
- √ Recusal from controlling aspects of planning and content
 with which there is a financial relationship
- √ Peer review of planning decisions by persons without relevant financial relationships
- ✓ Use other methods (please describe):

Mitigation steps for faculty and others (choose at least one)

- ✓ Divest the financial relationship
- √ Peer review of content by persons without relevant financial relationships
- √ Attest that clinical recommendations are evidence-based and free of commercial bias (e.g., peer-reviewed literature, adhering to evidence-based practice guidelines)
- ✓ Use other methods (please describe):

Step 4: Document the mitigation strategy(ies) you used for each person with a relevant financial relationship.

Α	В	С	D
NAME OF PERSON	ROLE(S) IN ACTIVITY	STEP(S) TAKEN TO MITIGATE RELEVANT FINANCIAL RELATIONSHIP	DATE IMPLEMENTED
Example: Dr. Jones	Planner	Recusal from topic/faculty selection	10/28/21

Worksheet for the Identification and Mitigation of Relevant Financial Relationships of Planners, Faculty and Others

Takes the place of the Flowchart for Resolution of Personal Conflicts of Interest

You may adopt this form to record/document how you mitigated individual relationships, if you desire.



What did that Flowchart for Resolution of Personal Conflicts of Interest look like?

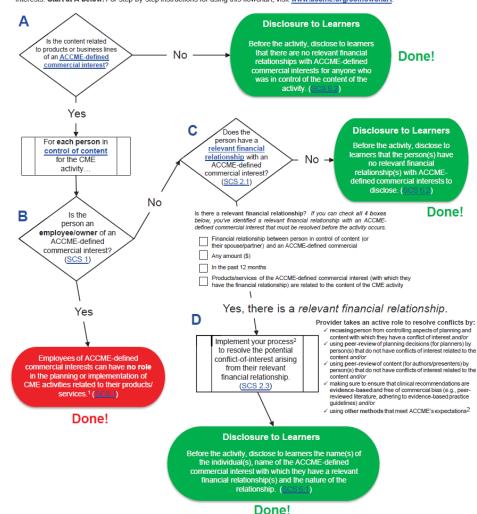
(established in 2017)



Flowchart for the Identification and Resolution of Personal Conflicts of Interest Meeting the Expectations of ACCME's Criterion 7

(Last updated : February 1, 2017)

Use this flowchart at the beginning of your planning process for CME activities to ensure independence from ACCME-defined commercial interests. **Start at A below.** For step-by-step instructions for using this flowchart, visit www.accme.org/coiflowchart.



Footnotes

- The use of employees of ACCME-defined commercial interests as faculty and planners or in other roles where they are in a position to control the content
 of accredited CME is prohibited, except in specific situations. For more information, visit this Ask ACCME frequently-asked-question regarding commercial
 employees.
- There are a range of approaches providers can use to resolve potential conflicts of interests. For more information, visit ACCME's Provider Examples of Compliance and Noncompliance for Criterion 7 on www.accme.org.





Note for Continuing Education Staff

If any of the following statements apply to the education, you **do not** need to identify, mitigate, or disclose relevant financial relationships for this accredited continuing education:

- ✓ It will only address a non-clinical topic (e.g., leadership or communication skills training).
- ✓ It is for a learner group that is in control of the content entirely (e.g., spontaneous case conversation among peers).
- It is a self-directed educational activity where the learner will control their educational goals and report on changes that resulted (e.g., learning from teaching, remediation, or a personal development plan). When accredited providers serve as a source of information for the self-directed learner, they should direct learners only to resources and methods for learning that are not controlled by ineligible companies.

Use the sample language below to provide disclosure to learners in a format that can be verified at the time of accreditation. Disclosure must be provided to learners **before** engaging with the accredited education.

What gets disclosed to learners before the education?

If there are NO relevant financial relationships:

Inform learners that planners, faculty, and others in control of content (either individually or as a group) have no relevant financial relationships with ineligible companies.

EXAMPLES:

"Dr. Xin Lee, faculty for this educational event, has no relevant financial relationship(s) with ineligible companies to disclose."

"Ruth Hopkins, Dr. Maryam Elbaz, and Ken Sanders, authors of this educational activity, have no relevant financial relationship(s) with ineligible companies to disclose."

"None of the planners for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients."

If there ARE relevant financial relationships:

Disclose name(s) of the individuals, name of the ineligible company(ies) with which they have a relevant financial relationship(s), the nature of the relationship(s), and a statement that all relevant financial relationships have been mitigated.

EXAMPLES:

Nicolas Garcia, faculty for this educational event, is on the speakers' bureau for XYZ Device Company.

Dr. Yvonne Gbeho, planner for this educational event, has received a research grant from ABC Pharmaceuticals.

All of the relevant financial relationships listed for these individuals have been mitigated.

NOTE:

- If commercial support is received, the accredited provider must also disclose to the learners the name(s) of the ineligible company(ies) that gave the commercial support, and the nature of the support if it was in-kind, prior to the learners engaging in the education.
- Disclosure to learners must not include ineligible companies' corporate or product logos, trade names, or product group messages.
- ✓ It may be helpful to include definitions of terms to learners to support their understanding of your processes (e.g., ineligible companies, relevant financial relationships, etc...)

Examples of Communicating Disclosure to Learners

Uses sample terminology for disclosure statements when there are <u>no</u> relevant relationships

AND

when there <u>are</u> relevant financial relationships, in a format that can be verified at the time of reaccreditation.

Remember that disclosure must be provided to learners **before** engaging with accredited education.





Note for Continuing Education Staff

Use this sample template to communicate expectations to planners, authors, and faculty about ensuring valid clinical content for accredited education. For more information about these expectations, see Standard 1 of the Standards for Integrity and Independence at accme.org/standards.

Dear Prospective Planner/Faculty Member:

As an important contributor to our accredited education, we would like to enlist your help to ensure that educational content is fair and balanced, and that any clinical content presented supports safe, effective patient care. This includes the expectations that:

- All recommendations for patient care in accredited continuing education must be based on current science, evidence, and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options.
- All scientific research referred to, reported, or used in accredited education in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation.
- Although accredited continuing education is an appropriate place to discuss, debate, and explore new and evolving topics, these areas need to be clearly identified as such within the program and individual presentations. It is the responsibility of accredited providers to facilitate engagement with these topics without advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning.
- Content cannot be included in accredited education if it advocates for unscientific approaches to diagnosis or therapy, or if the education promotes recommendations, treatment, or manners of practicing healthcare that are determined to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients.

These expectations are drawn from **Standard 1** of the ACCME Standards for Integrity and Independence in Accredited Continuing Education. For more information, see **accme.org/standards**. If we can help you to understand and/or apply these strategies to your education, please contact us at forwider-contact-information.



Please consider using these strategies to help us support the development of valid, high quality education.

Consider using the following best practices when presenting clinical content in accredited CE:

- Clearly describe the level of evidence on which the presentation is based and provide enough information about data (study dates, design, etc.) to enable learners to assess research validity.
- Ensure that, if there is a range of evidence, that the credible sources cited present a balanced view of the evidence.
- If clinical recommendations will be made, include balanced information on all available therapeutic options.
- Address any potential risks or adverse effects that could be caused with any clinical recommendations.

Although accredited CE is an appropriate place to discuss, debate, and explore new and evolving topics, presenting topics or treatments with a lower (or absent) evidence base should include the following strategies:

- Facilitate engagement with these topics without advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning
- Construct the activity as a debate or dialogue. Identify other faculty who represent a range of opinions and perspectives; presentations should include a balanced, objective view of research and treatment options.
- Teach about the merits and limitations of a therapeutic or diagnostic approach rather than how to use it.
- Identify content that has not been accepted as scientifically meritorious by regulatory and other authorities, or when the material has not been included in scientifically accepted guidelines or published in journals with national or international stature.
- Clearly communicate the learning goals for the activity to learners (e.g., "This activity will teach you about how your patients may be using XX therapy and how to answer their questions. It will not teach you how to administer XX therapy").

Guidance for Planners, Authors and Faculty: Ensuring Clinical Content is Valid

A sample template to communicate expectations to planners, authors and faculty in the planning stage to ensure valid clinical content for the accredited education they will be developing.

ISMA communicates the majority of this information within the Statements/Rules of ISMA Content Validation on pg. 2 of our Financial Disclosure Form.



Please answer the following questions regarding the clinical content of the education. Are recommendations for patient care based on current science, evidence, and clinical reasoning, while Yes giving a fair and balanced view of diagnostic and therapeutic options? [Standards for Integrity and O No Independence 1.11 Comments: Does all scientific research referred to, reported, or used in this educational activity in support or O Yes justification of a patient care recommendation conform to the generally accepted standards of O No experimental design, data collection, analysis, and interpretation? [Standards for Integrity and Independence 1.2] Comments: O Yes Are new and evolving topics for which there is a lower (or absent) evidence base, clearly identified as such within the education and individual presentations? [Standards for Integrity and Independence 1.3] O No Comments: Does the educational activity avoid advocating for, or promoting, practices that are not, or not yet, Yes adequately based on current science, evidence, and clinical reasoning? [Standards for Integrity and O No Independence 1.31 Comments: Does the activity exclude any advocacy for, or promotion of, unscientific approaches to diagnosis or Yes therapy, or recommendations, treatment, or manners of practicing healthcare that are determined to have O No risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients? [Standards for Integrity and Independence 1.4] Comments:

Note for Continuing Education Staff

One strategy to ensure the clinical content validity of accredited continuing education is to allow external (peer) review by persons with appropriate clinical expertise and no relevant financial relationships with ineligible companies, defined as those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. The questions above direct reviewers to share feedback about each of the requirements that comprise Standard 1 in the Standards for Integrity and Independence. For more information, see accme.org/standards.

Toolkit for the Standards for Integrity and Independence in Accredited Continuing Education © 2020 by the Accreditation Council for Continuing Medical Education (ACCME®)

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Template for Peer Review: Ensuring that Clinical Content is Valid

An example of a tool to facilitate peer review to ensure that clinical content is valid.

The questions direct reviewers to share feedback about each of the requirements that comprise Standard 1.

ISMA will continue to use our own existing Content Review Form.





learn well

Standards for Integrity and Independence in Accredited Continuing Education

Transition Checklist

We want to do everything we can to support the continuing education community's successful implementation of the new Standards. We encourage you to review the <u>Standards</u> and <u>resources</u> and begin working on your transition plan now, so that you are in compliance by January 1, 2022. Here's a checklist to help you get started.

Standard 1: Ensure Content is Valid

While there is nothing new in our approach to content validity, we suggest that you take the following steps to confirm that your processes meet our expectations.

- ✓ Check out the tips and strategies in the clinical content validation tool from the Standards Toolkit.
- Review your process for ensuring that education is fair and balanced, and supports safe, effective patient care.
- ✓ Review your process for communicating your expectations to planners, authors, and faculty.

Standard 2: Prevent Commercial Bias and Marketing in Accredited Continuing Education

- Communicate to faculty that they cannot actively promote or sell products or services during accredited education
- If you intend to share learners' names or contact information with an ineligible company, determine how you will obtain the explicit consent of individual learners.
 - If you ask for consent at registration, the learner must have the ability to opt out and still register for your activity.
 - The consent statement must be clearly visible—not hidden in a long list of terms and conditions.

Standard 3: Identify, Mitigate, and Disclose Relevant Financial Relationships

- ✓ Check out the <u>Tools for Identifying, Mitigating, and Disclosing Relevant Financial Relationships</u> from the Standards Toolkit.
- Change your process as needed to make sure that you collect information from all planners, faculty, and others in control of educational content about:
 - o all their financial relationships with ineligible companies
 - within the 24 months prior to their involvement with an accredited CE activity
- Use the correct and complete definition of ineligible company: Those whose primary business is producing, marketing, selling, reselling, or distributing healthcare products used by or on patients.

Transition Checklist

ACCME and ISMA encourage you to use this checklist to help you ensure nothing is forgotten.

https://accme.org/publications/standa rds-for-integrity-and-independencetransition-checklist-pdf

It contains all the factors for you to consider:

- Review your processes......
- Change your forms......
- Communicate to faculty......



Group Discussion



