



Spokane County MEDICAL SOCIETY

Orange Flag Building • 104 S. Freya St., Suite 114 • Spokane, WA 99202-4868 • (509) 325-5010 • Fax (509) 325-5409

Dear Colleagues:

Thank you for requesting that the Spokane County Medical Society be a joint sponsor of your meeting by approving it for Category I CME. We welcome you to the frustrating but very real world of documentation, which has become an integral part of the approval process. Our increased requirements reflect our commitment to achieving quality Continuing Medical Education.

The Needs Assessment part of the process seems to provide the most difficult hurdle. We need evidence Before the Fact that a program will be improving the knowledge, skills or attitudes of those expected to attend. Valid methods to assess the needs of a group are outlined on the Needs Assessment Form.

It is now essential that you link the process you use to create an education offering (your needs assessment) to your actual event as well as to utilize the results of your evaluation to give you information for planning future offerings. Please see linkage guidelines (essential area 2.1) for specific requirements.

However the need is determined, the key is documentation to the CME Committee that such needs have been ascertained. A valid needs assessment comes from the needs of the learner, the body of knowledge and the experts in the field. An adequate needs assessment must go beyond you or your organization's perceived need for this program and must be documented in your linkage statement.

Receiving Category I credit in no way certifies that a program is more excellent, more timely, or more needed than a Category II or other program. It does certify that all the steps in documenting need have been carried out by the joint sponsor(s). Denial of Category I status should in no way be interpreted as a judgment on the quality of your meeting in any of its aspects. There is a need in the emerging discipline of Category I CME to change the paradigm by which providers have come to see anything less than Category I as unworthy of their time and effort.

Please contact our CME Department at 325-5010, if you encounter difficulties with the enclosed guidelines. Application for Category I credit must be submitted prior to printing and distributing the brochure of a proposed meeting. With this in mind, the need for timely application becomes evident.

As you may know, the cost for application is \$550.00. We wish you well in your endeavor; thanks for being involved in Continuing Medical Education.

Sincerely,

Mary Noble, MD

Mary Noble, MD

CME Committee Chair

Spokane County Medical Society

**Policies,
Procedures,
Requirements, and
Instructions for Joint
Sponsorship with
the Spokane
County Medical
Society**



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Because application requirements change, please contact the Spokane County Medical Society CME office or check our web site (www.spcms.org) for the most current application and requirements.

Application Process for Category 1 CME Credit

The Spokane County Medical Society (SCMS) Continuing Medical Education (CME) Committee grants Category 1 CME credit through the following process:

Initially, discuss your proposed program with the SCMS staff if you are unfamiliar with the application process.

If you are familiar with the application process we recommend that you review the current application on our website for any new application requirements. Please read **ALL** policies and standards included with this packet.

Complete the entire application, including ALL required documentation. **Submit** it to the CME Department office at the SCMS **at least 90 days** in advance of the program date.

When an application for Category 1 CME Credit is received in the CME Department office, it is reviewed by the CME coordinator. Each application is also assigned to a CME Committee Reviewer, who is a member of the CME Committee, for review.

An application will NOT be sent to the CME Committee Reviewer unless it is complete. We will make an exception for the Disclosure Forms and Letters of Agreement for some extenuating circumstances. However, **ALL Disclosure Forms and Letters of Agreement are due in the CME Department prior to the date of your program. There are no exceptions for this deadline.** Credit can be rescinded for programs that do not comply with this requirement. Late documents from preceding programs will certainly be considered when applications are submitted for future program.

The CME Committee Reviewer will return a letter to the CME Department office within a maximum of three weeks upon their receiving a complete application, indicating whether approval will or will not be granted. The CME Coordinator will then contact you via a letter letting you know of the decision.

Please note: **You CANNOT start advertising** for your CME program until you have received approval from the CME Committee for Category 1 CME credit (see **Requirement #23** for brochure requirements).

We have included a list of all the requirements for this application. Please read it thoroughly so all elements are included in your application.

A pre-program and post-program checklist has also been included to aid you in the submission of your application and post-program documents.

Please feel free to contact the SCMS CME Coordinator with any questions you may have regarding this application process at (509) 325-5010.



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Joint Sponsor Application Requirements **for Category 1** **Continuing Medical Education Programs**

The following is an outline of the requirements for the application process for Joint Sponsors for Category 1 Continuing Medical Education (CME) programs for the Spokane County Medical Society:

1. **ALL applications** must be submitted to the SCMS CME office **at least 90 days prior** to the program date.
2. The application fee is \$750.00 per program. It must be included with the application.
3. **ALL elements** of this application are **required**. Any application received with any missing elements will not be considered for Category 1 CME credit until all elements have been received by the SCMS CME Department. The application will not be sent to the CME Committee Reviewer for review until all elements are submitted, which will slow the review process down, which in turn means advertising for your program may not begin. As stated previously, the only possible exceptions are the Disclosure Forms and Letters of Agreement under extenuating circumstances.
4. The SCMS CME Committee generally reviews community-based programs; however they will review programs outside our immediate locale on occasion. This area includes Eastern Washington, Northern Idaho, and Western Montana.
5. Applications will be rejected when commercial entities determine the need for, create the objectives for the program, or choose the speakers for a program. Please review the SCMS policies regarding commercial support included with the application.
6. If the application submitted does not meet ALL SCMS CME Committee requirements and policies, it will be rejected without refund.
7. For all Joint Sponsor applications, the **Program Coordinator needs to be local**. This will decrease correspondence problems, and increase response time between the Spokane County Medical Society and the Joint Sponsor organization.
8. The **Program Director** for the program is **required to be a physician**. The Program Director will take responsibility for ensuring that all elements of the program are included in the application.

The Program Director may be asked to attend a SCMS CME Committee meeting to discuss the content and merit of the program before credit is granted.

9. The program being planned must be targeted toward physicians. At least 50% of the target audience must be physicians or physician assistants (MD, DO, or PA-C). Other Allied Healthcare workers are welcome to attend, but Category 1 CME programs are designed to meet continuing medical education requirements for physicians. See the Definition of Category 1 Credit included in the application packet. Your program must meet this definition to be considered for credit.

Faculty for Category 1 CME programs need not all be physicians.

10. **ADA Accommodation:** Programs must make every effort to accommodate participants with disabilities. We recommend that the following statement be added to the program brochure: *“If any participant of the [Name of program] given by [sponsor name] is in need of accommodation, please do not hesitate to call and/or submit in writing two weeks prior to the event the needed accommodations. Please contact [name of contact and info].”*
11. **NEEDS ASSESSMENT** (pg 2 – 3 of application): A proper Needs Assessment must go beyond your organization’s perceived need for a program. **You must be able to identify the educational gaps in clinical practice and prove the need for the program.** Please answer the questions thoroughly. View “Linking Identified Needs to Desired Outcomes” document included in this packet for more information. For #5 on page 3 of the application, you must provide **documentation for each item checked.**
12. **OBJECTIVES FORM** (pg 4 – 5): The CME Committee requires identification of specific learning objectives that are derived from the Needs Assessment portion of the application. The identified **objectives should be clearly stated in measurable learner based terms.** The objectives will help potential participants understand the purpose of your CME program. They also serve to guide the sponsors of the program as they design this program to meet the needs of the target audience.

Objectives are required to be communicated to the speaker(s) (via the faculty letter included in this packet), **printed in the brochure announcing the program, and on the evaluation.** Many sponsors choose to also communicate the objectives in the syllabus.

Please provide at least one objective per contact hour.

Suggested steps for developing specific learning objectives for your CME program:

- A) Since behaviorally stated objectives usually complete the sentence, *“Upon completion of this program the participants will be able to...,”* you may want to start with that sentence.
- B) Connect the statement in the first step with a clear word or phrase that communicates the performance by the learner. Here are some examples: assess, compare, diagnose, differentiate, distinguish, establish, demonstrate, identify, interpret, translate, analyze, explain, integrate, formulate, etc.
- C) Finish the specifics of what the learner will be doing when demonstrating

achievement or mastery of the objective. The entire objective is the intended outcome or results of instruction.

Example objectives:

Upon completion of this program the participants will be able to:

- **Differentiate** myelodysplastic syndromes (MDS) from other disorders that mimic MDS.
- **Interpret** specific immunofluorescence patterns of viral infected cells.
- **Explain** maternal serum and amniotic fluid AFP testing for neural tube disorders.

13. **Educational Design** (pg 6): Please respond to the requested information thoroughly.
14. **Linkage Documentation** (pg 7): Please see the Linkage Policy in this packet. Include all five steps outlined in the policy.
15. **Program Evaluation**: A plan for evaluation must accompany all applications; see attached sample. It must assess how well each speaker's objectives were met.

The sample evaluation includes all the information that needs to be included on your evaluation. You may use the sample evaluation as your template. If you choose to use another format **make sure all elements of the sample evaluation are included on your evaluation.**

Following the program, there needs to be **two evaluation summaries**. The first must be a summary of the responses from all MDs and DOs. The second needs to summarize the responses of all "others" who attended the program (PA, ARNP, nurses, pharmacists, etc).

Complete evaluation summaries must be forwarded to the Program Director.

Each faculty member must receive an evaluation summary for their portion of the program only.

If you are conducting Grand Rounds, you will need to have the participants fill out evaluations for each session of the grand rounds. As the Joint Sponsor you will need to collate the results at the end of all activities and send a final evaluation summary for your entire program.

16. **Disclosure Forms**: **Anyone** who is in a position to control CME program content, which includes **ALL faculty and ALL Planning Committee Members**, shall sign a disclosure form and agree to comply with the standards (see CME Disclosure Policy).

ALL disclosure forms are REQUIRED to be in the CME Department office PRIOR to the DATE OF YOUR PROGRAM!!!

If a faculty member needs to be replaced at the last minute, have the new faculty member complete the disclosure form prior to the program and fax it to SCMS at (509) 325-5409.

17. **Documentation of Disclosures:** Disclosure statements are required to be disclosed to all participants of your program verbally and in writing. A sample written disclosure has been included in this packet.

The following three areas are required to be disclosed when applicable:

- A) **When a commercial product or service will be included in the presentation.**
- B) **When a significant relationship with commercial supporters is present.**
- C) **When any off-label or investigational use of a commercial product or service will be included in the presentation.**

If a faculty member does not have any commercial affiliations this also needs to be disclosed to the participants in writing.

Please see the following policies regarding commercial interests, which are included in the application packet:

- A) **Standards for Commercial Support of Continuing Medical Education**
- B) **CME Disclosure Policy**
- C) **Identifying and Resolving Conflicts of Interest**

If you have moderator notes indicating verbal disclosure, please submit a copy with your post-program paperwork.

18. **Faculty Letter:** The purpose of this letter is to communicate the objective(s) each faculty member will be presenting at the CME program. This letter also outlines the safeguards to follow to ensure there is not any bias in their presentation. Please note that any educational materials (i.e. syllabus, slides) may NOT contain any advertising, trade names, or product-group messages.

Place this letter on your letterhead, and then send it out to every faculty member.

19. **Income/Expense Documentation:** A rough pre-program income/expense summary needs to be submitted with the application. A final income/expense summary is also required to be turned in with the post-program paperwork. We have included a sample income/expense summary in this packet.

ALL sources of financial support, including registration fees, must be disclosed. Any commercial support money must be in the form of “unrestricted educational” grants or exhibit fees. A list of all anticipated unrestricted educational grants must be included with the application.

Speaker honorarium and expenses CANNOT be paid directly from any financial supporter. The funds must be received by the sponsor, and then given to the speaker.

20. **Certificate of Participation:** A certificate of attendance for participants is mandatory. **It must contain the wording “The Spokane County Medical Society Certifies that”** prior to the participants name. In addition, **the certificate must contain the accreditation statement, verbatim, that is on the sample certificate of participation included with this application.**

Please include a sample of your Certificate of Participation when you submit this application.

21. **Sign-In Sheet:** The Sign-In Sheet must include a column for each of the following: participants' signature, printed name, professional designation, city where participant is from, and the state where each participant is from. See sample included in this packet.

Professional status for each attendee must be documented on the Sign-In Sheet. We are required to document the specific number of physicians (MD/DO) who attend all Category 1 CME programs, and the specific number of non-physician attendees.

22. **Letters of Agreement:** A letter of agreement outlining the terms, conditions, and purposes of an educational grant must be signed by the commercial company representative and the course representative. Please use the Letter of Agreement included in this packet.
23. **Brochure:** A rough brochure is required with this application.

If your program is approved, the joint sponsor must use the words, "**Jointly Sponsored by _____** (the name of your organization) **and the Spokane County Medical Society**" on the **cover of your brochure**.

The word "sponsor" cannot be used in any other context; i.e. If you wish to acknowledge commercial entities, they should be referred to as "supporters" rather than sponsors.

The **objectives must be included** in your brochure.

The following **accreditation statement is required VERBATIM** on your brochure:

This activity has been planned and implemented in accordance with the Essential Elements, Criteria, and Standards of Accreditation of the Washington State Medical Association CME Accreditation Committee through the partnership of The Spokane County Medical Society accredited sponsor first and then insert the name of the **(non-accredited organization/institution.)** The Spokane County Medical Society a Washington State Medical Association accredited sponsor, designates this educational activity for a maximum of _____ hours in Category I to satisfy the re-licensure requirements of the Washington State Medical Quality Assurance Commission. The Spokane County Medical Society designates this educational activity for a maximum of ____ *AMA PRA Category 1 Credit(s)™*. Physicians should only claim credit commensurate with the extent of their participation in the activity

Brochures may NOT be distributed without the preceding accreditation statement. **Brochures may NOT be distributed for advertisement or pre-registration until confirmation of Category 1 CME credit is received from the CME Committee.**

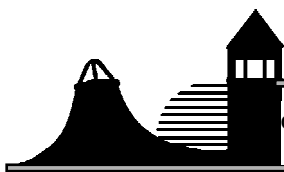
*****The words "applied for" or any other words indicating Category 1 CME credit is pending, CANNOT be used on your brochure, flyers, or registration forms.**

It is recommended that you do not print your brochures until you have gone through the approval process.

24. **Faculty List:** Please provide a list of all faculty with your application. Please notify the CME Department at the SCMS if any faculty changes are made between the time your application is submitted and the date of the program.
25. **Post-program paperwork is due no later than 30 days after the program, with the exception of the post-program evaluation summary. The post program evaluation summary will need to be submitted within 90 days of the actual event.**

Post-program paper work includes ALL of the following documents:

- A) Two Evaluation Summaries
 - B) Final Income/Expense Summary
 - Include a list of unrestricted educational grants received for the program
 - C) Sign-In Sheet
 - D) Copy of Final Program (brochure)
 - Including: Use of "Joint Sponsor"
 - Objectives
 - Accreditation Statement
 - E) Documentation that complete evaluation summaries were sent to the Program Director
 - F) Documentation of individual summaries sent to each faculty
 - G) Written Disclosure Documentation
 - H) Moderator notes with verbal disclosure information
 - I) Record of tests scores, when applicable
26. **Post-program evaluations:** After a Category I CME Program occurs, the Spokane County Medical Society and/or the joint sponsor organization will send a post-program evaluation to all participants that attended the Category I CME Program 60 days after the actual program took place. The post-program evaluation will analyze changes in the participants in the following categories; competence, performance, and patient outcomes. The Spokane County Medical Society Continuing Medical Education Committee will review the post-program evaluation forms to review any changes in physicians practice and improvement in patient care. Joint Sponsors must provide the results of the post-program evaluation to the Spokane County Medical Society within 90 days from the actual program (4 weeks after the post-program evaluation was initiated to all program participants). **Please see sample Post-program evaluation located in this paperwork.**



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MISSION STATEMENT OF THE SPOKANE COUNTY MEDICAL SOCIETY

The Spokane County Medical Society exists to promote and provide leadership in the art and science of medicine. Furthermore, the Society strives to improve and preserve the health of the citizens in our community.

The Spokane County Medical Society implements its mission through many different means. One of the methods we use is to implement a planned and comprehensive continuing medical education program for physicians.

MISSION STATEMENT OF THE SPOKANE COUNTY MEDICAL SOCIETY'S CONTINUING MEDICAL EDUCATION COMMITTEE

SETTING: The Spokane County Medical Society's CME Committee functions in a large tertiary care medical community. This community is generally self-sustaining in terms of expertise in specialty and subspecialty areas.

SCOPE: The scope of the Committee will be to initiate, evaluate and approve Category I CME programs suitable to the needs of the physicians and mid-level providers in our region. The needs of the medical community will determine the scope of our work.

PURPOSE: The purpose of our committee will be to initiate, evaluate and accredit high quality continuing medical education programs that reflect our local and regional physicians' and mid-level providers' educational needs both for primary care and specialty care. Our overriding principle is to improve healthcare quality by enhancing the medical knowledge, skills, and clinical performance of participants while insuring that the programs are never influenced by commercial interests.

CONTENT AREA: Every year the Spokane County Medical Society conducts a membership wide CME needs assessment survey. The results of the survey will determine the content area and identify appropriate methodologies for implementation. The Continuing Medical Education Department maintains oversight responsibility for the planning, implementation, evaluation, and documentation of all CME activities offered by Spokane County Medical Society in order to ensure that the requirements of the Washington State Medical Association, Accreditation Council for Continuing Medical Education and other applicable regulatory requirements are met. The Spokane County Medical Society also determines if jointly sponsored applications and programs meet regulatory requirements, and will approve only those that do.

CHARACTERISTICS OF POTENTIAL PARTICIPANTS: The target audience for our programs is the regional physicians and mid-level providers. We also invite allied health care professionals to participate in these programs. Additionally, the Committee wishes to address the regional needs of physicians and mid-level providers and intends to review for joint sponsorship programs offered in the entire Inland Northwest Region (this includes the contiguous WWAMI states).

ACTIVITIES AND SERVICES PROVIDED: Our purpose is to convene a variety of learning experiences to include seminars, symposia, case presentations, regularly scheduled conferences, jointly sponsored activities, and other effective educational events that meet the needs of our learners. The Spokane County Medical Society works with its members to determine need and to develop quality programs that will meet this need. We will also provide coordinating services to institutions, groups or individuals who seek to do the same. When requested, the Committee will serve as a joint sponsor for Category I programs in and around the entire Inland Northwest if the programs meet our predetermined needs, or an emergency need, and are submitted in an appropriate fashion and meet the essentials for continuing medical education.

EXPECTED RESULTS: Our intent is to provide continuing medical education programs for physicians so that they might gain new knowledge, exchange expertise, and increase competence to ultimately improve a physician's ability to provide the highest quality of patient care. The Spokane County Medical Society will accomplish this by:

- Promoting the practice of evidence-based medicine.
- Supporting patient-centered care outcomes strategies.
- Providing knowledge to promote practice improvements and behavior change in patient care
- Assisting in the dissemination of new medical knowledge.
- Assisting in the maintenance of professional certification and licensure.
- Collaborating across the continuum of medical education.
- Optimizing appropriate prescribing behaviors.

- Collaborating on the design of interdisciplinary educational strategies to improve patient safety and to facilitate patient-centered care.
- Contributing to the CME profession through service, education, and leadership training.
- Enhancing the quality of the educational process through consultation and documented compliance with accreditation standards/criteria.
- Expanding the use of technology in documentation of participation.



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POLICY FOR JOINT SPONSORSHIP

The Spokane County Medical Society (SCMS) is accredited by the Washington State Medical Association (WSMA) Medical Education committee to sponsor Category I Continuing Medical Education (CME) programs for physicians. As an accredited organization, the CME Committee is authorized to designate CME activities for Category 1 credit for joint sponsors. We are responsible for insuring that all programs jointly sponsored by the Society meet both the requirements (“Essentials”) outlined by the Accreditation Council for Continuing Medical Education (ACCME) for quality education programs and the requirements of the AMA Physicians Recognition Award for Category I activities.

It is important to note that the ACCME Essentials require that the accrediting organization (SCMS) be involved in the consulting, documenting and reviewing the planning, development, administration and evaluation of the program, and must assume responsibility for the educational quality of the program.

In addition, for a program to be considered for the designation of Category I Credit an activity must:

1. Be jointly sponsored by an accredited organization (SCMS is accredited).
2. Be part of a planned program for continuing medical education.
3. Be based on the documented needs of the group to whom it is addressed.
4. Have stated educational objectives.
5. Be evaluated in reference to the objectives and content.

The SCMS reviews for Category I continuing medical education activities. Our decision to do so is based on the willingness and ability of the organization seeking joint sponsorship to meet our general requirements. If you wish further information please contact SCMS.



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DEFINITION OF CATEGORY I CREDIT

Category I CME consists of educational activities **with appropriate documentation before the fact**, which serve to develop, maintain, or increase the knowledge, skills, professional performance and relationships a physician uses to provide services for patients, the public, and the profession. The content of CME is that body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and public health.

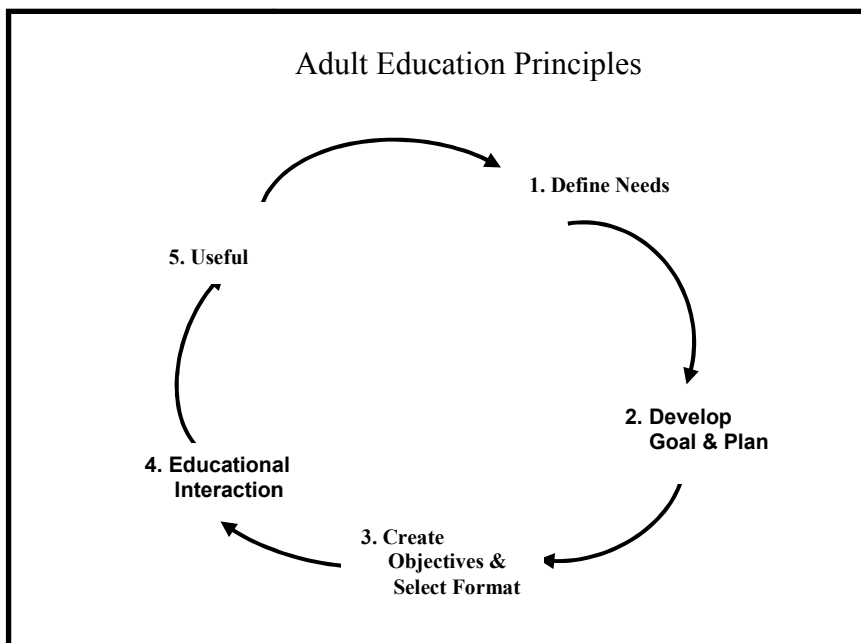


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LINKAGE GUIDELINES

It is essential that you link the process you use to create an educational offering (your needs assessment) to your actual event as well as to utilize the results of your evaluation to give you information for planning future offerings. Please provide us with date ordered documentation.



DEMONSTRATING LINKAGE: Please supply the committee with written documentation of your linkage process following the diagram above steps 1-5. Examples of supporting documentation include but are not limited to:

Planning Process- i.e.; email & Minutes	Accreditation Files
Speaker Elements	Evaluations
Commercial Support	Syllabus
Promotion	Registration Records
Arrangements	Summary and Impact Data
Financials	Reporting Data
Brochure Information	SCMS Annual CME Survey

In all cases you must demonstrate linkage by written materials that support your planning efforts, reference materials used in assessment and our Accreditation form. Additionally, you must show how you've utilized course evaluation results plus outcomes and impacts assessed from other data (if applicable) in planning this educational event.



Linking Identified Needs to Desired Results

Step 1: Identify Educational Gap / Need / Purpose

After analyzing the Needs Assessment data, list the educational gap identified in the healthcare professional population that supports the need for the particular program.

EXPLANATION:

Collect data from various sources such as target audience, expert faculty, previous evaluations, current literature research, health-system quality data, or national health guidelines/goals. After reviewing the various data sources, determine the needs of the particular group of physicians and whether an educational activity might lead to improvement.

EXAMPLE:

Current medical research states that the majority of physicians nationwide are often over-prescribing antibiotics, which could lead to an increase in resistant pathogens. Primary Care Physicians need to be able to analyze and differentiate therapeutic agents in order to make appropriate healthcare decisions.

Step 2: Develop Global Learning Objectives

List the global learning objectives for this activity.

EXPLANATION:

After determining the needs of a target audience, identify the learning objectives for this educational activity; (i.e., what should the learners be able to apply to their profession as a result of participating in the educational activity?). Usually the learning objectives are clear after the needs have been determined.

EXAMPLE:

At the end of this educational activity, participants will be able to:

- Identify scientific advances that are contributing to the progress of vaccine development.
- Define rational usage of antibiotics in the primary care setting.

Step 3: Determine the Educational Design / Methodology

List the educational format to be used to accomplish the stated objectives.

EXPLANATION:

After determining learning objectives for the participants, identify the best methodology for facilitating the needed learning and/or performance.

EXAMPLE:

Interactive didactic lecture including case studies presented by expert faculty, followed by Q&A session.

Step 4: Determine the Desired Results / Outcomes

List the expected outcomes in terms of changed physician knowledge, skills, performance within practice, and/or patient care.

EXPLANATION:

If the educational activity were successful, what results would you expect? In many respects, the desired results should be kept in mind during the entire CME planning process.

EXAMPLE:

- Increased awareness and sensitivity to antibiotic use
- Improved overall health of the practice's patients



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SPOKANE COUNTY MEDICAL SOCIETY CONTINUING MEDICAL EDUCATION PROGRAM COMMITTEE

STANDARDS FOR COMMERCIAL SUPPORT OF CONTINUING MEDICAL EDUCATION

STANDARD 1: Independence

1.1 A CME provider must ensure that the following decisions were made free of the control of a commercial interest. The SCMS defines a “commercial interest” as any proprietary entity producing health care goods or services, with the exemption of non-profit or government organizations and non-health care related companies.

- (a) Identification of CME needs;
- (b) Determination of educational objectives;
- (c) Selection and presentation of content;
- (d) Selection of all persons and organizations that will be in a position to control the content of the CME;
- (e) Selection of educational methods;
- (f) Evaluation of the activity.

1.2 A commercial interest cannot take the role of non-accredited partner in a joint-sponsorship relationship.

STANDARD 2: Resolution of Personal Conflicts of Interest

2.1 The provider must be able to show that everyone who is in a position to control the content of an educational activity has disclosed all relevant financial relationships with any commercial interest to the provider. The SCMS defines “relevant” financial relationships” as financial relationships in any amount occurring within the past 12 months that create a conflict of interest.

2.2 An individual who refuses to disclose relevant financial relationships will be disqualified from being a planning committee member, a teacher, or an author of CME, and cannot have control of, or responsibility for, the development, management, presentation or evaluation of the CME activity.

2.3 The provider must have implemented a mechanism to identify and resolve all conflicts of interest prior to the education activity being delivered to learners.

STANDARD 3: Appropriate Use of Commercial Support

3.1 The provider must make all decisions regarding the disposition and disbursement of commercial support.

3.2 A provider cannot be required by a commercial interest to accept advice or services concerning teachers, authors, or participants or other education matters, including content, from a commercial interest as conditions of contributing funds or services.

3.3 All commercial support associated with a CME activity must be given with the full knowledge and approval of the provider.

Written agreement documenting terms of support

3.4 The terms, conditions, and purposes of the commercial support must be documented in a written agreement between the commercial supporter that includes the provider and its educational partner(s). The agreement must include the provider, even if the support is given directly to the provider's educational partner or a joint sponsor.

3.5 The written agreement must specify the commercial interest that is the source of commercial support.

3.6 Both the commercial supporter and the provider must sign the written agreement between the commercial supporter and the provider.

Expenditures for an individual providing CME

3.7 The provider must have written policies and procedures governing honoraria and reimbursement of out-of-pocket expenses for planners, teachers, and authors.

3.8 The provider, the joint sponsor, or designated educational partner must pay directly any teacher or author honoraria or reimbursement of out-of-pocket expenses in compliance with the provider's written policies and procedures.

3.9 No other payment shall be given to the director of the activity, planning committee members, teachers or authors, joint sponsor, or any others involved with the supported activity.

3.10 If teachers or authors are listed on the agenda as facilitating or conducting a presentation or session, but participate in the remainder of an educational event as a learner, their expenses can be reimbursed and honoraria can be paid for their teacher or author role only.

Expenditures for learners

3.11 Social events or meals at CME activities cannot compete with or take precedence over the educational events.

3.12 The provider may not use commercial support to pay for travel, lodging, honoraria, or personal expenses for non-teacher or non-author participants of a CME activity. The provider may use commercial support to pay for travel, lodging, honoraria, or personal

expenses for bona fide employees and volunteers of the provider, joint sponsor, or educational partner.

Accountability

3.13 The provider must be able to produce accurate documentation detailing the receipt and expenditure of the commercial support.

STANDARD 4. Appropriate Management of Associated Commercial Promotion

4.1 Arrangements for commercial exhibits or advertisements cannot influence planning or interfere with the presentation, nor can they be a condition of the provision of commercial support for CME activities.

4.2 Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME.

- For **print**, advertisements and promotional materials will not be interleaved within the pages of the CME content. Advertisements and promotional materials may face the first or last pages of printed CME content as long as these materials are not related to the CME content they face **and** are not paid for by the commercial supporters of the CME activity.
- For **computer-based**, advertisements and promotional materials will not be visible on the screen at the same time as the CME content and not interleaved between computer 'windows' or screens of the CME content
- For **audio and video recording**, advertisements and promotional materials will not be included within the CME. There will be no 'commercial breaks.'
- For **live, face-to-face CME**, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during, or after a CME activity. Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or place of the CME activity.

4.3 Educational materials that are part of a CME activity, such as slides, abstracts and handouts, cannot contain any advertising, trade name or a product-group message.

4.4 Print or electronic information distributed about the non-CME elements of a CME activity that are not directly related to the transfer of education to the learner, such as schedules and content descriptions, may include product promotion material or product-specific advertisement.

4.5 A provider cannot use a commercial interest as the agent providing a CME activity to learners, e.g., distribution of self-study CME activities or arranging for electronic access to CME activities.

STANDARD 5. Content and Format without Commercial Bias

5.1 The content or format of a CME activity or its related materials must promote improvements or quality in healthcare and not a specific proprietary business interest of a commercial interest.

5.2 Presentations must give a balanced view of therapeutic options. Use of generic names will contribute to this impartiality. If the CME educational material or content includes trade names, where available trade names from several companies should be used, not just trade names from a single company.

STANDARD 6. Disclosures Relevant to Potential Commercial Bias

Relevant financial relationships of those with control over CME content

6.1 An individual must disclose to learners any relevant financial relationship(s), to include the following information:

- The name of the individual;
- The name of the commercial interest(s);
- The nature of the relationship the person has with each commercial interest.

6.2 For an individual with no relevant financial relationship(s) the learners must be informed that no relevant financial relationship(s) exist.

Commercial support for the CME activity.

6.3 The source of all support from commercial interests must be disclosed to learners. When commercial support is 'in-kind,' the nature of the support must be disclosed to learners.

6.4 'Disclosure' must never include the use of a trade name or a product-group message.

Timing of disclosure

6.5 A provider must disclose the above information to learners prior to the beginning of the educational activity.

STANDARD 7: Identifying Products, Reporting on Research, and Discussing Unlabeled Uses of Products

Generic and Trade Names

7.1 Presentations must give a balanced view of therapeutic options. Faculty use of generic names will contribute to this impartiality. If brand names are used, those of several companies should be used rather than only that of a single supporting company.

Reporting Scientific Research

7.2 Objective, rigorous, scientific research conducted by commercial companies is an essential part of the process of developing new pharmaceutical or other medical products or devices. It is desirable that direct reports of such research be communicated to the medical community. An offer by a commercial entity to provide a presentation reporting the results of scientific research shall be accompanied by a detailed outline of the presentation, which shall be used by the accredited provider to confirm the scientific objectivity of the presentation. Such information must conform to the generally accepted standards of experimental design, data collection, and analysis.

Unlabeled Uses of Products

7.3 When an unlabeled use of a commercial product, or an investigational use not yet approved for any purpose, is discussed during an educational activity, the accredited provider shall require the speaker to disclose that the product is not labeled for the use under discussion or that the product is still investigational.



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CME DISCLOSURE POLICY

All SCMS Continuing Medical Education (CME) activities must adhere to the Accreditation Council for Continuing Medical Education (ACCME) Essentials, Policies, and Standards for Commercial Support to ensure fair balance, independence, objectivity, and scientific rigor.

Anyone who is in a position to control the content of an education activity must disclose all relevant financial relationships with any commercial interest to the sponsor. This includes members of the CME Committee, the Activity Planning Committee, and Faculty.

From the ACCME Standards for Commercial Support:

The ACCME defines “relevant financial relationships” as financial relationships in any amount occurring within the past 12 months that create a conflict of interest. Individuals need to disclose relationships with a commercial interest if both (a) the relationship is financial and occurred within the past 12 months and (b) the individual has the opportunity to affect the content of CME about the products or services of that commercial interest.

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 for which remuneration is received or expected. ACCME considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.

The ACCME has not set a minimum dollar amount for relationships to be significant. Inherent in any amount is the incentive to maintain or increase the value of the relationship.

*The ACCME considers financial relationships to create actual conflicts of interest in CME when individuals have both a financial relationship with a commercial interest **and** the opportunity to affect the content of CME about the products or services of that commercial interest*

CME DISCLOSURE POLICY

The interests of the people controlling CME must always be aligned with what is in the best interests of the public. When the provider's interests are aligned with those of a commercial interest the interests of the provider are in 'conflict' with the interests of the public. Such circumstances create a conflict of interest because the potential for increasing the value of the financial relationship with the commercial interest creates an incentive to influence the content of the CME – an incentive to insert commercial bias. Commercial bias is prohibited in CME.

*An individual who refuses or fails to disclose relevant financial relationships will be disqualified from being a planning committee member, a teacher, or an author of CME and cannot have control of, or responsibility for, the development, management, presentation or evaluation of the CME activity. **This requirement applies to all circumstances, including the last minute replacement of a speaker.***

CONFLICT OF INTEREST

The SCMS Conflict of Interest Policy defines the mechanism to identify and resolve all conflicts of interest prior to the educational activity being delivered to learners.

CME COMMITTEE MEMBERS

All SCMS CME Committee members must complete a disclosure form annually in relationship to their involvement on the CME Committee overseeing courses, which will be considered for Category I credits. A CME Committee member must be recused when a course is discussed which has potential financial gain to the CME Committee Member is discussed.

CME ACTIVITY PLANNING COMMITTEE MEMBERS

All members of a specific CME activity, series, or enduring material must complete the Disclosure of Relevant Financial Relationships form. A member with a potential conflict of interest cannot participate until the conflict is resolved.

FACULTY

All faculty members participating in SCMS-sponsored or jointly sponsored CME activities must disclose to the audience any potential, apparent, or real conflicts of interest related to their involvement in the activity. This includes mention of any commercial service or product during their presentation, as well as any relationship with commercial supporters of the course.

I. Participants must receive this disclosure information whether or not the speaker has any disclosures to make related to products or services to be discussed during the presentation.

Method to obtain information: The Faculty Disclosure Form asks: Will your presentation include discussion of any commercial products or services?

II. Whether or not there is commercial support for the CME activity, it is still necessary to make all faculty disclosures, sponsor relationships, and unlabeled uses known to the audience. Method to obtain: The Faculty Disclosure Form asks: Do you have a significant relationship(s) with the commercial supporter(s) of this activity or of any related products?

CME DISCLOSURE POLICY

III. Faculty must clearly identify any discussion of off-label or investigational use of any commercial products or devices not approved for use in the United States.

Method to inform: The Faculty Disclosure Form asks: Do you intend to discuss any off-label or investigational use of any commercial product or device? This discussion must meet the criteria of peer-reviewed and evidence-based content.

TIMING

Any speakers failing to provide disclosure information are not allowed to present as part of a SCMS-accredited CME activity.

Conflicts of interest must be identified and resolved at the time of speaker confirmation.

INFORMING PARTICIPANTS

The above disclosures will usually be done in writing at the course, either in the Faculty Disclosure Summary in the syllabus, or on the evaluation form. In the occasional circumstance that the disclosure information is obtained after the printed materials are prepared, the course moderator or speaker may present the disclosure verbally. The moderator, SCMS staff person, or joint-sponsorship staff person will initial the faculty disclosure form to indicate that appropriate disclosure was made.



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CONTINUING MEDICAL EDUCATION PROGRAM COMMITTEE

IDENTIFYING AND RESOLVING CONFLICTS OF INTEREST POLICY

The SCMS CME Program must be able to show that everyone who is in a position to control the content of an education activity has disclosed all relevant financial relationships with any commercial interest to the provider. The ACCME defines “relevant financial relationships” as financial relationships in any amount occurring with the past 12 months that create a conflict of interest.

The SCMS CME Department adopts the following policy.

CME Committee Members: If a conflict of interest exists, a CME Committee member must recuse himself from planning and/or reviewing the application of an Activity being considered for SCMS sponsorship or joint-sponsorship of accreditation.

CME Activity Planning Committee Members: If a conflict of interest exists, the Planning Committee member must withdraw from the Planning Committee unless the conflict can be resolved. Resolution may be made by one of the following methods:

1. Peer review of CME content will be conducted at another oversight level to assure balance
2. Change in focus of course so the activity does not include information related to products or services about which the planning committee member has a conflict
3. Severing relationship(s) between the member and any related commercial interest
4. Others to be determined by SCMS CME Committee
5. Reject the application

CME Activity Presenter: When a conflict of interest exists, the Planning Committee must address the conflict by one of the following methods:

1. Review content to be presented by speaker in advance to assure content balance
2. Change topic so the presentation is not related to products or services where a conflict exists
3. Select a different presenter without any related commercial interest
4. Include presentations by other faculty to provide an overall balance to the content of the course
5. Reject the application

Each speaker is required to give a balanced, evidence-based presentation based on published research. No conclusions or recommendations without external validation may be made by a speaker with a conflict of interest. Any discussion of off-label use of products must be disclosed to the audience and must be supportable through peer-reviewed literature.



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SUMMARY OF THE THREE ESSENTIALS

ESSENTIAL AREA 1: PURPOSE AND MISSION

The provider must,

Elements

- 1.1 Have a written statement of its CME mission, which includes the CME purpose, content areas, target audience, type of activities provided, and expected results of the program.
- 1.2 Demonstrate how the CME mission is congruent with and supported by the mission of the parent organization, if a parent organization exists.

ESSENTIAL AREA 2: EDUCATIONAL PLANNING AND EVALUATION

Elements

- 2.1 Use a planning process (es) that links identified educational needs with a desired result in its provision of all CME activities.
- 2.2 Use needs assessment data to plan CME activities.
- 2.3 Communicate the purpose or objectives of the activity so the learner is informed before participating in the activity.
- 2.4 Evaluate the effectiveness of its CME activities in meeting identified educational needs.
- 2.5 Evaluate the effectiveness of its overall CME program and make improvements to the program.

ESSENTIAL AREA 3: ADMINISTRATION

Elements

- 3.1 Have an organizational framework for the CME unit that provides the necessary resources to support its mission including support by the parent organization, if a parent organization exists.
- 3.2 Operate the business and management policies and procedures of its CME program (as they relate to human resources, financial affairs, and legal obligations), so that its obligations and commitments are met.
- 3.3 Present CME activities in compliance with the WSMA's policies for disclosure and commercial support.



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ENDURING MATERIALS

CME enduring materials are printed, recorded, or computer-assisted instructional materials which may be used over time at various locations. Examples of such materials include programmed tests, audiotapes, videotapes, and computer-assisted instructional materials. Not included are "reference materials" such as books, journals, or manuals.

Guidelines:

1. The use of enduring materials must be consistent with the SCMS's overall CME mission statement and must be described as within the scope of the SCMS's CME efforts.
2. Enduring materials must be based upon identified CME needs of given target groups of physicians.
3. The joint sponsor must develop explicit objectives for each enduring material and communicate these objectives to prospective participants.
4. The medium, or combination of media, chosen by the joint sponsor must be consistent in content and method with the stated objectives. The overall length of the recorded materials and estimated study time for completing the activity should be specified.

A statement should be displayed that the CME activity was planned and produced in accordance with the ACCME Essentials.

5. Every joint sponsor must evaluate each unit of enduring material at least once every year, or more frequently if indicated by new scientific developments. The joint sponsor must demonstrate that findings from the evaluation process are used to revise, update or plan future versions of the enduring materials.

The date of original release must be prominently displayed in Arabic numerals after the title, along with the most recent date of review and revision or approval, if applicable.

6. Joint sponsors of enduring materials must have a mechanism to record and, when authorized by the participating physician, to verify physician participation.
7. **IN INSTANCES OF JOINT SPONSORSHIP, THE SCMS MUST ASSUME ONGOING RESPONSIBILITY FOR THE PLANNING, PROPER USE, AND EVALUATION OF THE CME ACTIVITY. THE JOINT SPONSOR MUST SUBMIT A SEPARATE PLAN THAT DOCUMENTS IDENTIFICATION OF THE TARGET PHYSICIAN-LEARNERS, THE EDUCATIONAL NEEDS TO BE ADDRESSED, THE APPROPRIATE OBJECTIVES, EDUCATIONAL CONTENT, QUALITY, SELECTION OF MEDIA AND FACULTY. PROPER USE INCLUDES MARKETING, DISTRIBUTION, AND ESTABLISHING THE CONDITIONS FOR EFFECTIVE PARTICIPATION.**

Enduring Materials Cont:

8. Enduring materials will not be considered for Category I CME when they are the only source of instruction.

Joint Sponsors of enduring materials should communicate the following information to prospective participants:

- Target audience of physician-learners;
- Needs addressed and specific learning objectives;
- Topics and educational content;
- Principal faculty and their credentials;
- Medium or combination of media used;
- Method of physician participation in the learning process;
- Estimated time to complete the educational activity;
- Date of original release;
- Date of most recent review and update or approval;
- Evaluation methods.



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SCMS CME HONORARIA POLICY

The Spokane County Medical Society CME Committee and its Joint Sponsors may supply faculty with a reasonable financial honorarium for participating in the CME program. Such honoraria must reflect the standard rate for these endeavors.

Additionally reasonable reimbursement is given to faculty for travel and overnight accommodations/meals. Out of pocket expenses for planners, teachers, authors, and employees and or volunteers of SCMS and its Joint Sponsors may also be considered. Valid documentation detailing the receipt and expenditure is required.

Additional Guidelines

1. SCMS or its joint sponsor must receive and distribute any faculty honoraria or reimbursement. The amount of honoraria should not be influenced by representatives of industry or other financial contributors to the activity.
2. SCMS and/or its Joint Sponsor will determine the amount of honoraria using the following criteria:
 - Expertise of proposed faculty
 - Market value (what faculty request)
 - Status of proposed faculty – SCMS staff, professional consultant, SCMS member
 - Amount of confirmed grant money
 - Amount of registration fee that could be charged
 - Number of expected participants
3. No commercial entity may pay ANY direct expenses.
4. No other payment shall be given to course directors or planners.
5. Faculty will only be reimbursed for their teacher or author role during the CME activity and not for expenses related to course attendance.

The range of honoraria should fall between \$0 and \$15,000. The planning committee for each activity should determine specific guidelines for implementing this policy.



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Policy for Unrestricted Educational Grants

A list of all anticipated unrestricted educational grants needs to accompany the initial Income/Expense Summary included with each application submitted for Category 1 CME credit.

A list of all received unrestricted educational grants must be included with the final Income/Expense Summary turned in post-program.



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POLICY FOR ONLINE GRANT SUBMISSION FOR JOINT SPONSORS

The Spokane County Medical Society is a non-profit organization. Due to IRS tax regulations and policies related to non-profit organizations, the Spokane County Medical Society is not able to accept grant funding that is directed to our organization for jointly sponsored CME programs.

If a joint sponsor wishes to apply for an online unrestricted educational grant, the following are the Spokane County Medical Society's (SCMS) guidelines as they relate to using SCMS' name as the accredited sponsor and rules regarding the use of Tax Identification Numbers.

1. Both the accredited sponsor (Spokane County Medical Society) and joint sponsor's name may be on the application. However, only online applications that allow the joint sponsor to place their personal Tax Identification (ID) number and list the applicant's company as the primary supporter on the application can be completed.
2. The Spokane County Medical Society's Tax ID number cannot be used for any joint sponsored programs. Grant applications can only be made if it is possible for the joint sponsor's Tax ID number to be entered on the application form. In addition, SCMS is unable to accept grant funds directed to our organization, and then forward or sign off on these payments. All grant funding must be directed to the joint sponsor organization under their Tax ID number.
3. The Spokane County Medical Society will only sign Letters of Agreement that are made out to the joint sponsor's organization and use the joint sponsor's Tax ID number. Letters of Agreement need to be between the company putting on the program (joint sponsor) and the commercial company. If a commercial company will only provide a Letter of Agreement between the accrediting sponsor (SCMS) and the commercial company, this is not acceptable and the Spokane County Medical Society will not be able to sign for the grant funding.



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Sample: Urology Update 2008 CME Conference Post-Program Survey

Overview of Survey and Urology Program

As a healthcare professional who attended the Spokane County Medical Society Urology Update 2008 CME conference held on September 17, 2008 at Deaconess Medical Center in Spokane, Washington, we are asking you to complete a brief online survey as a follow-up to the conference.

As a reminder, here is a list of the three topics that were covered in this three-hour Category 1 CME program:

- 1) Female Incontinence and Procedures
- 2) Assessment and Management of Hematuria and Renal Masses
- 3) What is New in Robotic Surgery

At the conclusion of this program the participants should have been able to:

- 1) Outline medical and surgical treatment for female incontinence
- 2) Define methodologies to assess and manage patients with hematuria and renal masses
- 3) Summarize the most recent advances in robotic surgery

Completing this survey should take you no more than five minutes. Survey responses are anonymous and will help us plan better conferences in the future.

Professional Affiliation

1. What is your profession?

- Physician (MD / DO)
 Other (i.e. PA-C, ARNP, RN, etc.)

Changes in Practice

1. Have you made any changes to your practice based on information you learned at the 2008 Urology Update?

- Yes
 No
 Not Applicable

2. If yes, what specific changes to your practice have you made?



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3. Did the information gained at the 2008 Urology Update CME cause you to make changes to provide better patient care / outcomes?

- Yes
- No
- Not Applicable

4. If yes, please describe or give an example.

5. Did the information gained from this CME program help you to become more competent in treating urological conditions?

- Yes
- No
- Not Applicable

Thank You

Thank you for taking the time to complete this survey. For information on upcoming conferences for healthcare professionals sponsored by the Spokane County Medical Society, go to: www.spcms.org.