



Illinois Chapter, American Academy of Pediatrics

Disclosure of Financial Relationships and Resolution of Conflicts of Interest for Continuing Medical Education (CME) Activities Policy

Background

The ultimate goal of the Illinois Chapter of the American Academy of Pediatrics (ICAAP's) CME program is to support life-long learning of participants so they may better identify their personal educational needs and design appropriate self-directed learning activities to meet those needs while implementing new skills in clinical practice. ICAAP's CME program aims to provide relevant education for pediatric care providers to develop, maintain, and improve the necessary competencies, skills, and professional performance needed to provide high quality care for children. ICAAP establishes forums for the dissemination of information on current issues facing the specialty as a means for transmitting research and scholarly findings that affect the practice of pediatrics. ICAAP seeks to provide quality education that is relevant, accessible, and effective in addressing gaps in learning related to pediatric practice.

This policy is designed to ensure all ICAAP CME activities are objective, balanced, and free of bias by identifying and resolving all potential conflicts of interest prior to an activity.

All ICAAP CME activities will adhere to the *Accreditation Council for Continuing Medical Education (ACCME) Standards for Commercial Support* and *Accreditation Requirements and Descriptions for Illinois State Medical Society (ISMS) Providers of Continuing Medical Education*. In accordance with these standards, the following decisions will be made free of the control of a commercial interest: identification of CME needs, determination of educational objectives, selection and presentation of content, selection of all persons and organizations that will be in a position to control the content, selection of educational methods, and evaluation of the CME activity (ACCME Standard 1.1).

The purpose of this policy and its associated procedures is to ensure all potential conflicts of interest are identified and mechanisms to resolve them prior to the CME activity are implemented in ways that are consistent with the public good.

Policy

The ACCME and ISMS require accredited CME providers to identify and resolve all potential conflicts of interest with any individual in a position to influence and/or control the content of CME activities. **Any planning committee member, faculty, author, or his/her spouse/partner that has a relevant financial relationship with a commercial interest and is in a position to influence content of the CME activity is considered to have a conflict of interest.** In addition, it is expected that the content or format of all ICAAP CME activities must promote improvements or quality and not a specific proprietary business interest of a commercial interest. Disclosure information and questions regarding bias are included on ICAAP's CME evaluation form as a way to monitor and prevent bias. It is required that the ICAAP evaluation form be used in addition to any other evaluation tool the planning committees developing the CME activities may wish to use.

The ICAAP requires completion of the ICAAP CME Disclosure Form by individuals involved in the planning, presentation, or evaluation of content for a CME activity. Disclosure information must be made known to participants prior to the start of the activity. CME activity managers (ICAAP staff) are responsible

for reviewing all completed disclosure forms, identifying potential conflicts, and resolving conflicts of interest. The resolution process and outcomes must be documented on the disclosure forms and in the CME activity file.

Individuals are required to disclose the following information:

- Name of the individual or spouse/partner with the financial relationship
- Name of the commercial interest(s)
 - The ACCME defines a “commercial interest” as any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.
- Nature of the financial relationship the individual has with each commercial interest
 - Examples: Recipient of grants/research support, honorarium, royalty; employee, consultant, speakers’ bureau, board member, advisor or review panel member; independent contractor, stock shareholder (excluding mutual funds); or holder of intellectual property rights

If a potential conflict is identified, ICAAP staff will review it and make a determination as to whether there is a perceived conflict of interest. If no conflict exists, this will be so indicated on the disclosure grid and the activity file, and the participant will be eligible to participate. If a perceived conflict exists, it will be brought to the attention of the non-conflicted lead pediatrician responsible for planning the CME activity to determine how to address the conflict and if the individual will be able to participate in the activity. For cases that are not clear, the potential conflict will be brought to ICAAP’s CME manager and ICAAP’s Associate Executive Director for review and disposition. These lead ICAAP CME staff will determine if the conflict should be brought to the overarching ICAAP CME Planning group for final disposition.

The ICAAP requires that the content of CME activities provide balance, independence, objectivity, and scientific rigor. Planning must be free of the influence or control of a commercial entity, and promote improvements or quality in healthcare. All recommendations in CME activities involving clinical medicine must be based on evidence accepted within the medical profession. The content or format of a CME activity and its related materials must promote improvements or quality in healthcare and not a specific proprietary commercial interest (ACCME Standard 5.1). All ICAAP CME activities must be compliant with the ACCME content validation statements (ACCME policy 2002-B-09):

- All the recommendations involving clinical medicine in a CME activity must be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients.
- All scientific research referred to, reported or used in CME in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection and analysis.

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, trade names from several companies should be used and not just trade names from a single company (ACCME Standard 5.2).

Educational materials that are part of a CME activity such as slides, abstracts, and handouts cannot contain any advertising, trade names without generic names (but listing of trade names from several companies is permissible), or product-group advertising (ACCME Standard 4.3). Any individual refusing to comply with the *AAP Policy on Disclosure of Financial Relationships and Resolution of Conflicts of Interest for AAP CME Activities* and/or not disclosing relevant financial relationships on a timely basis (defined by the Committee on CME as the initial invitation and two reminders) will not participate in, have control of, or responsibility for, the development, management, presentation, or evaluation of ICAAP CME activities.