



## Southern Alliance for Physician Specialties CME CONFLICT OF INTEREST RESOLUTION POLICY

The Accreditation Council for Continuing Medical Education (ACCME) requests all accredited providers of accredited continuing education (Southern Alliance for Physician Specialties CME) to have a mechanism in place for identifying ([Financial Disclosure Form](#)) and resolving potential conflicts of financial relationship interest prior to an educational activity.

### POLICY:

1. Activity directors, planning Committee members, teachers/authors, and any others planning or participating in CME activities (contributors) shall disclose to the SAPS CME Committee any relevant financial relationships between themselves and commercial organizations. This disclosure will be accomplished by the completion of a [Financial Disclosure Form](#), the contents of which will be shared with the audience, prior to educational activity.
2. Financial Disclosure Forms will be reviewed prior to the accredited CE activity by the SAPS CME Committee or its designee, in cases of joint providership, and if a conflict exists, an appropriate course of action will be determined and taken.
3. An individual who refuses to disclose relevant financial relationships will be disqualified from being an activity director, planning committee member, or teacher/author of a CE activity and cannot have control of, or responsibility for, the development, management, presentation, or evaluation of the activity.
4. The SAPS CME Committee will document in writing how the identified, perceived conflicts of interest were resolved.
5. The following mechanisms for resolving conflicts of interest may be used to reach a successful conclusion:
  - A. **Signed Disclosure:** By completing and signing the Disclosure Form, the contributor agrees that conflicts or relationships will not bias or otherwise influence their involvement in the accredited CE activity. Practice recommendations will be limited to those based on the best available evidence (or absence of evidence), and recommendations will be consistent with accepted medical practice. They also agree to all other mandatory ACCME disclosure guidelines – [Standard 3](#).
  - B. **Audience Evaluation: Attendees** will be advised of their right to expect non-biased presentations and queried regarding their impressions concerning bias (or the absence of bias) within the activity. Activity Directors and teachers/authors will receive copies of the evaluation summaries and comments.

- C. **Prior Speaker Evaluations:** Historical data, relating to a particular faculty from previous evaluations, can be used to document the status of relevant financial interest.
- D. **Altering Control Over Content:** An individual's control of accredited CE content may be altered to remove the opportunity to affect content related to the products/services of a commercial interest. For example:
- ❖ **Select another person to control that part of the content** - If a proposed presenter/author has a relevant financial relationship linked to the content, select another person who does not have a relationship with ineligible companies related to the content.
  - ❖ **Change the content of the person's assignment** - The role of a person with a relevant financial interest can be changed within the activity so that he/she is no longer teaching about issues relevant to the products/services of an ineligible company. For example, an individual with a relevant interest regarding products for treatment of a disease state could address the pathophysiology or diagnosis of the disease rather than the therapeutics.
  - ❖ **Limit the content to a report without recommendations** - If an individual has been funded by an ineligible company to perform research, the individual(s) presentation may be limited to the data and results of the research. Someone else can be assigned to address broader implications and recommendations.
  - ❖ **Limit the sources for recommendations to those based on best available evidence** - Rather than having a person with a financial interest present, personal recommendations, or personally select the evidence to be presented, limit the role of the person to reporting recommendations based on formal structured reviews of the literature with the inclusion and exclusion criteria stated (evidence-based). For example, the individual could present summaries from the systematic reviews of a peer reviewed source, e.g., the Cochrane Collaboration ([www.cochrane.org](http://www.cochrane.org))
- E. **Peer Review/Independent Content Validation** - An informed learner or peer will review content. The extent of review depends on the circumstance. If the person performing the review knows the individual and the individual's past views and presentations, a brief conversation may be adequate for the person performing the review to be confident that the presentation will be independent and balanced. If the person performing the reviews is not familiar with an individual's views, a more extensive review (e.g., longer discussion, review of slides or handouts) may be necessary for the person performing the review to be confident of the presentation's independence and balance.
- F. **Altering Financial Relationships:** Contributor's relationship with ineligible company has changed or discontinued, and in doing so, no duty remains to introduce bias into the content. Although not relevant to content, the relationship must be disclosed to learners for 24 months prior.
- G. **Elimination:** Contributors who are perceived as either manifesting conflicts of interest or being biased may be eliminated from consideration as resources (Committee members, teachers, authors, etc.) for subsequent certified accredited CE activities.

In the rare event that SAPS CME are unable to resolve conflict, then SAPS CME will not provide *AMA PRA Category 1 Credit(s)*<sup>TM</sup>.