

# CONSULT

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## Practical Matters



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## Resolving Conflicts of Interest for Planners

EMPHASIZE COI RESOLUTION FROM THE BEGINNING OF THE PLANNING PROCESS. BY STEVE PASSIN, FACME, CCMPE, AND SUSAN O'BRIEN, CCMEP

**M**OST OF US DO A GOOD JOB of identifying financial relationships of faculty involved in a continuing medical education activity, and of resolving conflicts by reviewing presentations to ensure they are free from commercial bias, fair and balanced, and scientifically objective. But sometimes we forget to pay attention to the planners of the activity in advance, and end up resolving their conflicts with content review at the end of the planning process, rather than prior to the development of the activity.

Accreditation Council for CME requirements state that all individuals who influence content must participate in the provider's process to identify and resolve relevant conflicts of interest. Recently, we have noticed more attention being paid to planner resolution during ACCME site surveys. Some instances of noncompliance for ACCME **Criterion 7** we've seen arise out of the lack of satisfactory planner resolution early in the planning process (see sidebar on page 11). The selection of the lead planner, the course chair, should be made with eyes wide open relative to his or her financial relationships. Because the planning team usually shapes the activity content—they select the topics, faculty, venue, formats, etc.—making the right choices early on in the planning process is critical. Since the planners are the content experts, it's not really an option to exclude them from participating. What can you do to ensure potential conflicts are resolved and the planners' relationships do not unduly

affect the content of the course?

### Practical Tips for Identifying and Resolving Planner COI

Here are a few suggestions that can be implemented right away and documented in your activity file:


- Let the course directors/planners **know the requirements** for disclosing relevant conflicts of interest and for their participation in the process; consider a planner/faculty agreement form that requires independence from relevant COI (see **Figure 1** for an excerpt from this suggested form).
- **Inform senior management** about the need to ensure the content is based on valid needs assessment data and not driven by faculty/planner selection. As a starting point, consider revising your policy on the identification of financial relationships and resolution of COI to include clear direction on PLANNER issues and processes; an example of this Policy's section on planner COI is shown in **Figure 2**.
- **Think about the issue** of planner conflicts the minute you start planning an activity. Choose a course chair and other planners who don't have conflicts in the first place, or who have minimal conflicts. If this is not possible, consider adding a non-conflicted planner to the committee so serve as a check-and-balance for the conflicted planner.
- **Collect financial relationship information** from planners early enough so that their relevant COI can be resolved, or if resolution is not possible, they can be replaced.

“THE SELECTION OF THE LEAD PLANNER, THE COURSE CHAIR, SHOULD BE MADE WITH EYES WIDE OPEN.”

If you work in a hospital or academic center, ask the CME committee to review the activity to ensure that content is not influenced by planners' relationships and that it is driven by the physicians' need for further education on the specific topic.

- **Limit** the conflicted planners' involvement to aspects of planning that are not related to the reported conflict.
- **Partner** the conflicted planner with a non-conflicted planner to ensure reported relationships do not influence the selection of content, formats, faculty, or any other aspect of the course.
- **Document**, document, document! Consider using a COI management documentation form, which you maintain in the activity's file. The form provides evidence of how you resolved planner COI.

It is important that you clearly identify planners (and all other persons who affect the content of CME) by type of participant (i.e., planner, faculty, reviewer, writer, etc.). In addition, be sure to provide this information to the learners prior to the commencement of the activity in course materials or in the opening slides.


We have developed samples of documents to assist you in maintaining compliance with these rules, including a sample faculty/planner agreement, a sample policy, and a documentation of resolution of COI form, which you can download from [www.passinassociates.com/mmm\\_downloads](http://www.passinassociates.com/mmm_downloads). 

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**FIGURE 1**

Agree	Disagree	N/A	Value Statement
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have disclosed all relevant financial relationships and I will disclose this information to learners.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The content and/or presentation of the information with which I am involved will promote quality or improvements in health care and will not promote a specific proprietary business interest of a commercial interest. Content for this activity, including any presentation of therapeutic options, will be balanced, evidence-based and commercially unbiased.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I have not and will not accept any honoraria, additional payments or reimbursements directly from a commercial entity for my participation in this activity.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I understand that <name of provider> may need to review my presentation and/or content prior to this activity, and I will provide educational content and resources in advance as requested.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If I am providing recommendations involving clinical medicine, they will 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 will conform to the generally accepted standard of experimental design, data collection and analysis.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If I am discussing specific healthcare products or services, I will use generic names to 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 single company.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If I am discussing any product use that is off label, I will disclose that the use or indication in question is not currently approved by the FDA.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If I have been trained or utilized by a commercial entity or its agent as a speaker (e.g. speaker's bureau) for any commercial interest, the promotional aspects of that presentation will not be included in any way with this activity.

**FIGURE 2**



### Policy on Collection of Financial Relationships and Resolution of Conflicts of Interest

Yellow-highlighted phrases require client modifications and once made removal of the highlighting.

**Purpose**

In accordance with the ACCME's Standards for Commercial Support of Continuing Medical Education, the Policy on Collection of Financial Relationships and Resolution of Conflicts of Interest (COI) exists to provide guidance for staff, instructors, planners, reviewers and managers of CME activities sponsored by **CLIENT NAME**, **CLIENT ACRONYM**, (and applicable educational partners). This policy addresses the underlying philosophy of disclosure to learners, mechanisms to collect disclosure information and the parties from whom financial disclosure shall be collected, the mechanisms to resolve COI, and requirements to make disclosure to learners prior to the start of an activity.

**For Planners . . .**

- Staff and/or the **SCME COMMITTEE** <=> **ADVISORY BOARDS** will take cognizance of planners from whom disclosure forms indicate a COI
- Mechanisms to resolve COI for planners are as follows:
  - Replace planners with significant COI with other experts that are not conflicted, if possible
  - When replacing planners is not feasible, staff and/or the **SCME COMMITTEE** <=> **ADVISORY BOARD** must provide stringent oversight of the planning process to ensure objectivity, fair balance and absence of commercial bias
  - Faculty/Planner Agreements—on which the Planner attests that he or she will plan the activity objectively, with fair balance and without commercial bias—must be provided, signed by the planner, and received by **CLIENT NAME** prior to the commencement of planning; should new planners be added after the planning process begins, those persons shall not commence their work until their financial relationships disclosure has been received and there is resolution of any relevant COI
  - When significant COI is present, final presentation content must be reviewed prior to the execution of the activity and documentation provided that demonstrates objectivity, fair balance and absence of commercial bias

**CRITERION 7** The provider develops activities/educational interventions independent of commercial interests. (SCS 1, 2, and 6)

ACCME NOTE ABOUT CRITERION 7: Accredited continuing medical education is always designed and presented in a manner whereby the accredited provider retains control of the content of CME. Providers are

expected to ensure that activity planning and implementation is in the hands of the provider. The provider must obtain information from all those in control of content (e.g., planners, teachers, and authors) so as to allow for the management and resolution of potential conflicts of interest. The provider must disclose to learners the relevant financial relationships of all those who control the content of CME.