** CME Program Director Compliance Agreement**

To maintain compliance with the Accreditation Council for Continuing Medical Education (ACCME) requirements and policies, activity Directors must agree that each activity will:

* Conform to the AMA’s definition of CME***, “CME consists of educational activities that serve to maintain, develop, or increase the knowledge, skills and professional performance and relationships a physician uses to provide services for patients, the public, or the profession*.”**
* Consist of linking identified needs, objectives, and educational format to desired results. **Documentation** **of needs assessment and professional practice gaps must be part of the planning process and attached to the** **CME Application**. Learning objectives must be stated in measurable terms and relate to the gaps/needs. They should tell the participants what they will learn by attending the program.
* Contain **content** and use a format that promotes improvements or quality in healthcare and not a specific proprietary business interest of a commercial entity. Presentations and activity materials must give a balanced view of therapeutic options. Use of generic names will contribute to impartiality. If the CME educational materials or content includes trade names, where available, trade names from several companies should be used, not just trade names from a single company.
* Conform to the ACCME's Standards for Commercial Support. <http://www.accme.org/requirements/accreditation-requirements-cme-providers/standards-for-commercial-support>
* Provide a **Letter of Agreement** from all commercial organizations that provide funding for any part of the activity. The form must be signed by the company representative and a representative of the Office of Continuing Medical Education (OCME). All commercial support funds may be paid directly to the Department/Organization presenting the activity with OCME‘s approval. A copy of any check received directly by the Department/Organization must be submitted to the OCME along with an accounting of how all received funds were spent.
* Provide disclosures, **prior to the start of the activity**, from all planners, speakers, and individuals who are in a position to control content of the educational activity for **all relevant financial** **relationships (or lack of)** with any commercial interest within the **last 12 months.** Any individual who refuses to disclose relevant financial relationships will be disqualified from being a planning committee member or speaker of a CME program, and cannot have control of, or responsibility for, the development, management, presentation or evaluation of the activity. ***ALL PLANNERS MUST SUBMIT A DISCLOSURE BEFORE THE APPLICATION CAN BE REVIEWED OR ACTIVITY CERTIFIED OR RE-CERTIFIED.***
* Confirm that anyone in control of content is not an employee of a commercial interest (except as outlined by the ACCME on their website: <http://www.accme.org/education-and-support/video/faq/what-do-i-need-know-about-role-employees-commercial-interests>
* Provide the OCME with announcements, schedules, and attendance to meet deadlines as determined by the OCME as well as a **final budget** and outcome summary at the conclusion of the activity.
* Be HIPAA Compliant and agree to obtain all necessary copyright permission(s) for any portion of the CME activity materials that is not their original work.

I have read, understand, and agree to abide by the requirements listed above. I understand **certification of the activity depends** **on providing required documentation**. I understand that, once certified, **credit will be awarded only for the individual meetings that are fully compliant.**

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| **Printed Name** of Program Director: |
| **Signature** of Program Director: |
| **Date signed:**        -       - |