Program Director Compliance Agreement for Accredited CE

**The following have been drawn from Standard 1 of the ACCME Standards for Integrity & Independence:**

ü All recommendations for patient care in accredited continuing education must be based on current science, evidence, and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options.

ü All scientific research referred to, reported, or used in accredited education in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation.

ü Although accredited continuing education is an appropriate place to discuss, debate, and explore new and evolving topics, these areas need to be clearly identified as such within the program and individual presentations. It is the responsibility of accredited providers to facilitate engagement with these topics without advocating for, or promoting,

practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning.

ü Content cannot be included in accredited education if it advocates for unscientific approaches to diagnosis or therapy, or if the education promotes recommendations, treatment, or manners of practicing healthcare that are determined to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients.

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| **The following have been drawn from Standard 2 of the ACCME Standards for Integrity & Independence:**   * Communicate to faculty that they cannot promote or sell products or services during accredited CE * If you intend to share learner names/contact information with an ineligible company you must obtain the explicit consent of the individual learner. This consent must be clearly visible, not hidden in a long list of terms and conditions and the learner must have the ability to opt out. |

**Although accredited CE is an appropriate place to discuss, debate, and explore new and evolving topics, presenting topics or treatments with a lower (or absent) evidence base should include the following strategies:**

v Facilitate engagement with these topics without advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning

v Construct the activity as a debate or dialogue. Identify other faculty who represent a range of opinions and perspectives; presentations should include a balanced, objective view of research and treatment options.

v Teach about the merits and limitations of a therapeutic or diagnostic approach rather than how to use it.

v Identify content that has not been accepted as scientifically meritorious by regulatory and other authorities, or when the material has not been included in scientifically accepted guidelines or published in journals with national or international stature.

v Clearly communicate the learning goals for the activity to learners (e.g., “This activity will teach you about how your patients may be using XX therapy and how to answer their questions. It will not teach you how to administer XX therapy”).

**Consider using the following best practices when presenting clinical content in accredited CE:**

ü Clearly describe the level of evidence on which the presentation is based and provide enough information about data (study dates, design, etc.) to enable learners to assess research validity.

ü Ensure that, if there is a range of evidence, that the credible sources cited present a balanced view of the evidence.

ü If clinical recommendations will be made, include balanced information on all available therapeutic options.

ü Address any potential risks or adverse effects that could be caused with any clinical

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| I have reviewed the above expectations and agree to apply these strategies to accredited continuing education. I understand credit may be withdrawn from individual sessions or the activity as a whole if found to be non-compliant at any point in the accreditation process, even after formal approval. | |
| Director: | Date: |