

Policy & Procedures Regarding Co-Development of Educational Programs

1. Introduction

The CTS occasionally co-develops educational programs with physician and non-physician organizations in view of benefiting from the expertise of other organizations and developing programs aimed at a broader target audience.

This policy & procedures document aims to ensure that the CTS develops those programs in accordance with the highest ethical standards and consistently complies with the requirements of the Royal College of Physicians and Surgeons of Canada (RCPSC) Maintenance of Certification (MAINCERT) program.

2. Policy

As an accredited provider of the RCPSC MAINCERT program, the CTS assumes responsibility for the content of any/all programs it co-sponsors with physician or non-physician organizations and ensures the adherence to RCPSC standards. This translates into the CTS being involved in the program planning and design from an early point in the development process as opposed to simply approving programs that have already been developed. The CTS assumes responsibility for ensuring the scientific validity and objectivity of the content of any program.

Consistent with the RCPSC's principles of accreditation, co-sponsored CME/CPD activities must adhere to the following:

- 2.1 The program is based on a needs assessment that identifies the perceived and unperceived needs of the target audience;
- 2.2 The program committee includes members of the target audience;
- 2.3 The program includes learning objectives describing the intended outcome of the activity in terms of knowledge, skills and/or attitudes, i.e. they must describe what the learner will be able to do differently after participating in the activity;
- 2.4 At least 25 per cent of the total education time is devoted to interactive learning;

- 2.5 A program evaluation has been developed and specifically addresses the question of whether or not the program and individual session objectives were met. The evaluation also provides opportunities for participants to identify what they have learned and its potential impact for their practice. It also asks whether or not any bias was perceived in the program;
- 2.6 Faculty disclose to participants all financial affiliations of faculty, moderators or members of the planning committee (within the past two years) with any commercial organization(s), regardless of its connection to the topics discussed or mentioned during this event (conflict of interest declarations);
- 2.7 The program offers a balanced presentation of the prevailing body of scientific information and lack bias;
- 2.8 No drug or product advertisements appear on, or with, any of the written materials (preliminary or final programs, brochures, or advanced notifications) for the event;
- 2.9 Generic names are used rather than trade names on all presentations and written materials;
- 2.10 “Unapproved” or “off-label” uses of medication and devices are disclosed;
- 2.11 There is full budgetary disclosure. Funding arrangements are consistent with the most recent CMA guidelines;
- 2.12 All financial sponsorship for a specific CME/CPD program is submitted in the form of educational grants. A written agreement (MOU) between the CTS and the co-developer outlines how funds will be disbursed, in accordance with the program plans. All honoraria paid to faculty are paid by the CTS (the accredited provider).

In addition, the following requirements must be met following program delivery:

- 2.13 A copy of the completed program evaluation forms and/or a summary of those evaluations is provided to the CTS Secretariat;
- 2.14 A list of the people who attended the CME program is provided to the CTS Secretariat; the list should identify the profession of each attendee;
- 2.15 Attendees are provided with a certificate of attendance that includes the following statement:

“This event is an Accredited Group Learning Activity (Section 1) as defined by the Maintenance of Certification program of The Royal College of Physicians and Surgeons of Canada, and approved by the

Canadian Thoracic Society. Delegates completing this program are eligible to claim one credit per hour of the program, to a maximum X (insert the number of hours that reflects the duration of your program) hours."

3. Procedures

- 3.1 A physician or non-physician organization submits a co-sponsorship proposal that includes a general outline of the proposed program and budget, as well as suggestions for potential faculty, etc.;
- 3.2 The proposal is reviewed by the CTS Professional Development Committee (or its successor), and by any other CTS Committee directly affected (ex: disease-specific committee);
- 3.3 If accepted, the CTS Secretariat and the co-developer develop a Memorandum of Understanding (MOU) outlining mutual responsibilities for the successful development and delivery of the program, CTS accreditation and administrative fees (including a non-refundable deposit) and how funds will be managed;
- 3.4 Once the MOU has been signed by both parties, the CTS appoints a member to sit on the program planning committee of the co-developed program. This member participates in developing and/or planning the needs assessment, program materials, and evaluation strategies in accordance with the RCPSC standards;
- 3.5 The program planning committee develops the program content, materials (including slides, overheads, hand-outs) etc. and submits the entire program to the CTS for review;
- 3.6 An expert review panel is then assigned by the CTS to ensure that the program is appropriate and in compliance with RCPSC standards. (In many cases, this step may be by-passed, when the program planning committee are both content experts and active CTS members.) Based on the expert review, changes to the program may be required before the program is submitted to the CTS Professional Development Committee for final approval;
- 3.7 Once the program is deemed ready for accreditation, it is submitted to the CTS PD Committee. The submission must include:
 - 3.7.1 Application Form for RCPSC (Section 1) MAINCERT accreditation;
 - 3.7.2 Summary of the Needs Assessment;
 - 3.7.3 Documentation of the Program Development (minutes, reports, copy of correspondence between planning committee members);

- 3.7.4 Draft Program Brochure featuring:
 - Agenda indicating interactivity time
 - Learning objectives describing what the participants will be able to do differently after attending the activity
 - Planning committee members' names and credentials
 - 3.7.5 Program Evaluation Form;
 - 3.7.6 Disclosure Statements (planning committee, faculty, speakers, moderators);
 - 3.7.7 Budget and list of sponsors;
 - 3.7.8 Presentation Material (copies of slides, overheads, hand-outs).
- 3.8 Should the Professional Development Committee not approve the program, it can be re-submitted following recommended modifications;
- 3.9 If the program is approved, co-development of the continuing professional development event by the CTS (accredited provider) must be recognized on program materials. Program materials must state that the program has been accredited by CTS for Section 1 credits under the RCPSC MAINCERT Program.;
- 3.10 If the content of a program is changed, it must be re-submitted for accreditation.ⁱ

4. Administration

This policy will be reviewed every five years by the CTS Board.

ⁱ CMA Guidelines for Physicians in Interactions with Industry (2007) No. 40 " If the content of eCPD modules is changed, re-accreditation is required.