



INDEPENDENCE FROM COMMERCIAL INTERESTS

ACCME'S STANDARDS FOR COMMERCIAL
SUPPORTSM: STANDARDS TO ENSURE THE
INDEPENDENCE OF CME ACTIVITIES

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CONTINUING MEDICAL EDUCATION (ACCME)
CHICAGO

Accredited CME

- Is about your professional practice
- Is content valid
- Is independent of the control of ACCME-defined commercial interests



ACCREDITED CME

ASA

STRATEGIC ASSET

ASA

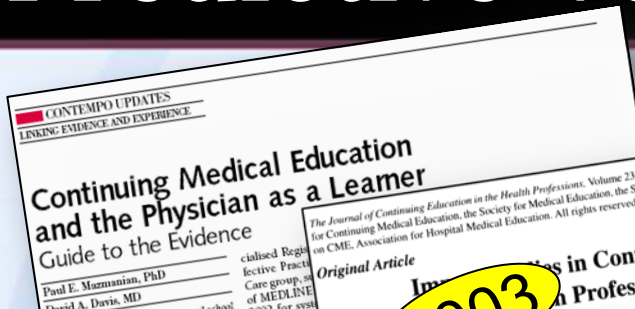
"BRIDGE TO QUALITY™"

Expectations



"To meet the needs of the 21st century physician, CME will provide support for the physicians' professional development that is based on continuous improvement in the **knowledge, strategies and performance-in-practice** necessary to provide **optimal patient care.**"

Predictive Validity



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Original Article
Improvements in Continuing Education for Health Professions: Update
Robertson, MS, PhD (Cand), Karl E. Umble, PhD, MPH

2003

Evidence Report/Technology Assessment
Number 149

Continuing education meetings and workshops: effects on professional practice and health care outcomes (Review)
Forsyth L, Bjorndal A, Rashidian A, Jamvedt G, O'Brien MA, Wolf F, Davis D, Odgaard-Jensen J, Oxman AD

2009

Effectiveness of C

2007

American Board of Medical Specialties
Higher standards. Better care.®

ABMS EVIDENCE LIBRARY

2013

Continuing professional education is effective in assisting professionals to modify and improve their practice

AHRQ Publication
January 2007



Evidence-Based



CONFLICT OF INTEREST OCCURS IN ACCREDITED CME WHEN...

A person has a
financial
relationship **and**
with an
ACCME-defined
commercial interest

...and has an
opportunity to
control the
content of CME
relevant to that
relationship

ACCME DEFINITION



*A **commercial interest** is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.*

The ACCME does not consider providers of clinical service directly to patients to be commercial interests.

A commercial interest is not eligible for ACCME accreditation. Commercial interests cannot be accredited providers and cannot be joint sponsors. Within the context of this definition and limitation, the ACCME considers the following types of organizations to be eligible for accreditation and free to control the content of CME:

501-C Non-profit organizations (Note, ACCME screens 501c organizations for eligibility. Those that advocate for commercial interests as a 501c organization are not eligible for accreditation in the ACCME system. They cannot serve in the role of joint sponsor, but they can be a commercial supporter.)

- Government organizations
- Non-health care related companies
- Liability insurance providers
- Health insurance providers
- Group medical practices
- For-profit hospitals
- For profit rehabilitation centers
- For-profit nursing homes
- Blood banks
- Diagnostic laboratories



THE THOUGHT IS THAT...

There is an incentive
to maintain, or
increase, the value of
that relationship.



THE UNDESIRABLE OUTCOME ...

...would be for learners to go off and do more than is necessary and/or is appropriate



“ ...when the favorable message is delivered in the context of education—even if corporate sponsorship is disclosed—there is an imprimatur of credibility and independence.”

“ There is a risk that physicians will allow favorable drug messages learned in an educational context to change their clinical practices to favor use of those drugs, without critically appraising the evidence or fully assessing information from other sources.”

The Undesirable Outcome



“Through their implicit or explicit, control of, or influence on, CME content, commercial interests could create commercial bias in CME (favoritism) that could result in a learner’s inclination towards, or actual, **use of a product or service that is more than is necessary.**”





LAW OF EVER EXPANDING CONTROL

“The quantity and detail of reporting required by monitoring bureaus tends to rise steadily over time, regardless of the amount or nature of the activity being monitored.”



Independence

Disclosure

Resolve
COI

2⁰ Prevention

Truthful, Evidence,
By the Profession

3⁰ Prevention

Resolve and Reveal
Relationships with
Industry

No
Commercial
Bias

Content
Validity

No
Guidance

Needs
from
Gaps

Based
on
Practice
Gaps

Mx of
Funds

1⁰ Prevention

Professional need,
not funding drives
content

A balance



Raynard S. Kington, M.D., Ph.D.
Deputy Director,
National Institutes of Health
July 8, 2010

“ We applaud the Accreditation Council for Continuing Medical Education’s efforts to provide additional guidance for ensuring research independence and a free flow of scientific exchange, while safeguarding accredited CME from commercial influence.

Your vigilance in this important matter contributes to the best practices of unbiased information-sharing and will benefit, ultimately, the health of the American public.”

ACCME® Standards for Commercial Support



THANK YOU