Policy Name: ACCME Conflict of Interest Mitigation

Purpose:
- To comply with ACCME Standards for Integrity and Independence in Accredited Continuing Education 2 and 3 and Joint Accreditation Criteria 12.

1.0 Policy

1.1 All individuals who have the opportunity to affect the content of an accredited continuing education activity must disclose all financial relationship(s) with an ineligible company during the planning stages of the activity, via the SGO Financial Disclosure Form, as described in SGO Policy 7.5.

1.2 Any individual that discloses a financial relationship with an ineligible company is considered to be a conflict of interest (COI) and the disclosed conflict must be mitigated prior to the start of the accredited continuing education activity.

1.3 SGO will utilize a number of methods to mitigate conflicts of interest and safeguard against any potential biases.

2.0 Standards/Criteria

2.1 A conflict of interest exists when an individual who has the opportunity to affect the content of an accredited continuing education activity is involved financially with an ineligible company. (See policy 7.5 for the definition of a financial relationship.)

2.2 Any conflict of interest that cannot be mitigated will disqualify the individual from being involved in the planning and development process or participating in the accredited continuing education activity.

2.3 In accordance with generally-accepted policies on clinical content validation, when developing content, planners / faculty / presenters must ensure the following:

2.3.1 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.

2.3.2 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.

2.3.3 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.

2.3.4 Content shall be linked to the learning objectives for the activity, pertinent to the target audience and free of commercial bias.

2.4 No individual will be allowed to participate as a planner, faculty, or in other roles where they are in a position to control content of an accredited continuing educational activity if he/she owns and/or is employed by a pharmaceutical, device or biologic company or any other ineligible company as defined by the ACCME as those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. This type of relationship for a faculty/presenter is considered an unresolvable COI; Exceptions to this rule are in those rare instances in which the employed presenter is not discussing products or services related to his or her employer (such as disaster management or electronic health records or early-stage research). The specifications of the exceptions to this rule are as follows:

2.4.1 Employees of ACCME-defined ineligible companies can control the content of accredited continuing education activities when the content of the activity is not related to the business lines or products of their employer/company.

2.4.2 Employees of ACCME-defined ineligible companies can control the content of accredited continuing education activities (e.g., as planners, authors, or speakers [including poster presentations]) when the content of the accredited continuing education activity is limited to basic science research (e.g., pre-clinical research, drug discovery) or the processes / methodologies of research, themselves unrelated to a specific disease or compound/drug. In these circumstances, the accredited provider must be able to demonstrate that it has implemented processes to ensure employees of ACCME-defined ineligible companies have no control of an accredited continuing education activity content that is related to clinical applications of the research/discovery or clinical recommendations concerning the business lines or
products of their employer.

2.4.3 Employees of ACCME-defined ineligible companies can participate as technicians in accredited continuing education activities that teach the safe and proper use of medical devices. In this circumstance, SGO must demonstrate that it implements processes to ensure that employees of ACCME-defined ineligible companies have no control of accredited continuing education activity content that is related to clinical recommendations concerning the business lines or products of their employer.

3.0 OPERATIONAL PROCEDURE

3.1 SGO Education Committee Chairs and Chair of Compliance Subcommittee with the SGO Education Staff will review completed financial disclosure forms, track all information provided in the Individuals In Control of Content Form, and determine if any relevant conflicts exist. If relevant conflicts do exist, the methods to mitigate them as indicated below must be enacted and documented in the Individuals In Control of Content Form and maintained in the activity file.

3.2 Mechanisms to mitigate relevant COI for planners are as follows:

3.2.1 After receiving the disclosure forms and reaching a determination if reported COI is relevant, the Chairs of the Education Committee and the Chair of the Compliance Subcommittee with SGO Education Staff will determine:

3.2.1.1 Unresolvable COI (as defined in 2.7 above) and eliminate or replace that planner.

3.2.1.2 The next course of action with respect to those planners with resolvable COI.

3.2.2 If a planner has a relevant COI, mitigation of COI processes will be in place prior to the start of the planning process. Whenever possible, SGO Education Staff will work with SGO Leadership to replace planners with relevant COI with other experts that are not conflicted.

3.2.3 If a planner has a relevant COI, the planner will either:

3.2.3.1 Recuse him/herself from planning the content relevant to the reported COI,

3.2.3.2 Another nonconflicted planner(s) with sufficient expertise will participate in the planning process, or
3.2.3.3 The conflicted planner will divest him/herself of the relationship (even though this relationship will still require disclosure to learners).

3.2.3.4 For option 3.2.3.1, all planning decisions will then be reviewed and approved (or modified) by the nonconflicted planners who will conduct a peer review of all planning decisions to ensure they are free of any commercial bias. Planning decisions include selection of topics, content, objectives, agenda, faculty, and evaluation content and methods.

3.2.4 The faculty/planner agreement (included within the Financial Disclosure Form) on which the planner attests that he/she will plan the activity objectively, with fair balance and without commercial bias must be provided, signed by the planner and received by the SGO Educational Staff prior to the commencement of planning.

3.3 Mechanisms to mitigate COI for faculty, moderators, presenters, authors (faculty/presenter) are as follows:

3.3.1 After receiving the disclosure forms and reaching a determination if reported COI is relevant, the Chairs of the Education Committee and the Chair of the Compliance Subcommittee with SGO Education Staff will determine:

3.3.1.1 Unmitigable COI (as defined in 2.7 above) and eliminate or replace that faculty/presenter.

3.3.1.2 The next course of action with respect to those faculty/presenters with mitigatable COI.

3.3.1.3 If a faculty/presenter has a relevant COI, the COI will be mitigated prior to the activity.

3.3.2 If a faculty/presenter has a mitigatable COI, their presentation materials and other content will be reviewed by a nonconflicted reviewer to ensure fair-balance, scientific objectivity and an absence of commercial bias, and documented using a content review form. If any content is determined to have commercial bias, lack of fair balance or other issues related to the general principles of content
validity, the content in question will not be allowed to be presented until it is corrected and re-reviewed by the appropriate SGO Education Staff and/or assigned reviewer.

3.3.3 Other mechanisms to mitigate the reported and relevant conflict of interest are:

3.3.3.1 Refrain from making recommendations on topics on which a COI exists

3.3.3.2 Make all recommendations for patient care based on peer-reviewed data

3.3.3.3 Limit the scope of the content for the conflicted faculty to present as needed to mitigate COI

3.3.3.4 Divest him/herself of the financial relationship (even though the conflict will still require disclosure to learners).

3.3.3.5 No matter which option is selected, the content will be reviewed.

3.3.4 The Chairs of the SGO Education Committee and Chair of the Compliance Subcommittee with SGO Education Staff will review all COI and related information, including revised content, and make a final determination regarding a faculty/presenter’s COI and the mitigation thereof.

3.4 Reviewers will not have any relevant COI.

3.5 If relevant COI is disclosed, another reviewer will be selected with no relevant COI.

3.6 To maintain transparency, learners will be provided with information on identified relevant financial relationships that represent a conflict of interest from any of the above categories of persons that affect the content of the accredited continuing education activity, and that information will be positioned in course materials such that it is accessible by learners prior to the execution of the accredited continuing education activity (e.g., at the beginning of course syllabi).

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