

APPLICATION PROCESS FOR ACCREDITATION OF SECTION 1 GROUP LEARNING ACTIVITIES WITH THE SOCIETY OF OBSTETRICIANS AND GYNAECOLOGISTS OF CANADA

1. Guidelines for all non medical Organization Applicants

According to Royal College Guideline, CPD activities that are approved as an accredited group learning activity under section 1 of the Framework of CPD options for maintenance of certification must fulfill the following requirements:

Approved programs must be co-sponsored by an accredited organization and meet the following Royal College criteria:

The process for accreditation, RCPS Guidelines state:

- The accredited provider must co-sponsor the CPD activity and be accountable for the implementation of the activity.
- As a co-sponsor, the SOGC will abide by the CMA guidelines for support of continuing medical education by industry.
- The accredited provider must be represented on the planning committee and participate in the needs assessment, program design, implementation and evaluation. SOGC, as the accrediting organization, must approve the final program and ensure that the program abides by CMA Guidelines for support of continuing medical education by industry.
- Co-ownership of the CPD activity by the accredited provider must be recognized on program materials.
- The accredited provider accepts the responsibility to keep a record of attendance and provide the attendees with certificates of attendance.
- Approval of section 1 will be recognized by the statement on program materials
“This event is an accredited co-sponsored group learning activity as defined by the Maintenance of Certification program of the Royal College of Physicians and Surgeons of Canada”

2. Guidelines for a Medical Organization (with no industry funding)

Approved programs do not need to be co-sponsored by the SOGC but they must meet the following criteria:

Criteria a: There must be a planning committee of specialists representing the target audience in place

Criteria b: There must be learning objectives that are defined and advertised in the program brochure

Criteria c: The program provides a period for discussion and interaction

- The organization that plans the activity is accountable for its implementation.
- SOGC will delegate the planning implementation and evaluation of the CPD activity to the medical organization.
- The accredited provider will not be recognized on the program materials.
- The medical organization accepts the responsibility to keep records of attendance and provide the attendees with certificates of attendance.
- The medical organization will provide records of the CPD activity (materials, attendance) to the Validation program on request.
- Approval of section 1 will be recognized by the statement on program materials.
“This event is an accredited group learning activity under section 1 as defined by the Maintenance of Certification program of the Royal College of Physicians and Surgeons of Canada”

3. SOGC Members who will Represent SOGC on Planning Co-Sponsored Programs

An organization submitting an application and wishing to co-sponsor a program with the SOGC for accreditation will, in consultation with the SOGC, appoint one member of its Program Planning Committee as the representative of SOGC on the co-sponsored accredited program.

The designated SOGC member of the Planning Committee will sign an agreement as part of the application process confirming that he/she agrees to carry out the responsibilities outlined by SOGC for this role. This includes adherence to the program content and process criteria in section 1 of this document and communication with SOGC concerning:

- Final program outline
- Early draft of promotional materials

It is understood that the applicant organization will cover all costs related to travel, transfers, hotel and a per diem per day of \$60.00, Canadian or American, for the SOGC planning committee member attending planning/meeting functions.

4.0 Proposed Fee Structure for the Accreditation Process

Categories of applications

4.1 Medical organizations (defined by Royal College)

4.2 Non-Medical organizations such as Industry (Pharmaceutical companies; CME companies; Medical Device companies); Health Canada; Political; Legal; Financial organization of governing bodies

The fee schedule is structured on the following assumptions:

a) Fee is related to amount of work required of SOGC

When co-sponsoring, SOGC will

- oversee assessment of the application and communicate with both the assessor and the applicant at regular intervals;
- maintain list of attendees and provide certificate of attendance;
- review a copy of final budget of program;
- validate faculty are paid at arms length from industry
- administer all faculty honoraria

b) Fee is also related to the amount of exposure the SOGC logo and co-sponsorship will receive ie. The value of the endorsement to the hosting individuals or organizations

c) We are assuming that the budget for the program is an indication of the reach of the program.

| # | Sponsoring Group | Accreditation Process | Application Fee |
|-----|---|--|--|
| 4.1 | Medical organization no private sector funding support | As per RCPSC guideline see section 2.0 above | \$300.00 non-refundable |
| 4.1 | Medical organization with less than \$10,000 revenue support from program | As per RCPSC guideline see section 2.0 above | \$500.00 non-refundable |
| 4.1 | Medical organization with more than \$10,000 revenue support from program Examples: Satellite Symposia; Large medical association meeting; Individual physician initiated project B where physician has found industry support for the project | | \$1000.00 non-refundable |
| 4.2 | Non-medical organization (industry, medical products, companies, legal or other professional organizations) | | \$5000.00 per day non-refundable to review application <u>or</u> \$2500 for ½ day and a total administration fee of 10% of faculty honoraria |

5. TO APPLY FOR APPROVAL OF A CPD PROGRAM

a) Contact the CPD Division of SOGC and ask for an application form or access form via web at www.sogc.org

b) Application should include:

- Names of members on the Planning Committee. Please identify the Chair of the Committee and the SOGC representative on the Committee if co-sponsored (We could appoint a member of the CPD committee. This representative would there to ensure administration process as a priority).
- What information do you have regarding the learning needs of your target audience? Please identify sources of this information.
- Learning Objectives for participants.
- Overview of the program content, format and potential faculty.
- Please indicate the opportunities for participant interaction.
- Budget for the Program (see note: all faculty will be paid through SOGC for co-sponsored programs and 10% of the honoraria fees paid to SOGC as an administration fee). The budget should include the breakdown for faculty honoraria and expenses, catering, A/V and facility costs.
- Identify the process for program evaluation.
- Application fee (see fee schedule 4.2).
- Application must be signed by Chair of Planning Committee.

Please note payment must accompany your application form; if payment is not included, your application will not be processed.

TO BE COMPLETED BY APPLICANT

**Application for approval as an accredited group learning activity under
section 1 of the Framework of
CPD Options for Maintenance of Certification**

Program Title

Location of Program

Program Format (One time event or multiple events)

Program dates, if known

Name of Program Planner Requesting approval (Chair of Planning Committee)

Name of primary (accountable) organizer

Address

Fax

Phone

E-Mail

As the course planner, I accept the responsibility for the accuracy of the information provided on this form and, to the best of my knowledge, certify that the CMA's guidelines, entitled "Physicians and the Pharmaceutical Industry (sec. 17-24)" or "Guide d'éthique sur les relations entre les organismes médicaux et les sociétés commerciales du Conseil d'EMC du Québec" have been met in preparing for the CPD event.

Information on this guideline available on:

http://www.cma.ca/inside/policybase/physicians_and_the_pharmaceutical_industry.pdf

Signature of Chair of Planning Committee _____

Date _____

OR

As the representative of SOGC on the planning committee of the co-sponsored program _____ with _____, I accept the responsibility for the accuracy of the information provided on pages 1&2 of the credit assessment form and, to the best of my knowledge, certify that the CMA's guidelines, entitled "Physicians and the Pharmaceutical Industry (sec. 17-24)" or "Guide d'éthique sur les relations entre les organismes médicaux et les sociétés commerciales du Conseil d'EMC du Québec" have been met in preparing for the course.

I also agree to discuss the program with the SOGC CPD division at the times agreed to, to ensure on-going communication regarding the program content, educational format and program materials.

Signature of SOGC representative on Planning Committee _____

Date _____

PLEASE COMPLETE AND RETURN WITH THE PROGRAM APPLICATION FORM WITH SUPPORTING DOCUMENTS TO SOGC

Minimal Educational Requirements for Section 1:

1. Has information from the target audience been used to determine course objectives either through participation on a planning committee or through surveys, focus groups or interviews? *Supporting documentation: please provide the names of the members on the Planning Committee as well as summary of surveys, group meetings or interviews.*

INFORMATION INCLUDED WITH APPLICATION: YES

2. Do the course objectives (which are printed on the brochure or handouts) describe what the participants may learn or achieve by attending the course? *Supporting documentation: please send a copy of the course objectives (can be on brochure).*

INFORMATION INCLUDED WITH APPLICATION: YES

3. Are some of the learning objectives derived from an objective assessment of the learning needs of potential participants, such as obtained from measurement of knowledge and/or performance (e.g., self-assessment test or practice audit)? *Supporting documentation: Please provide a copy of the audit or test instrument AND a summary of the results.*

INFORMATION INCLUDED WITH APPLICATION: YES

4. Does the course design formally incorporate opportunities for interactive learning using planned discussion periods (totaling 25% of course time or more) or small group interactive sessions? *Supporting documentation: Please send the proposed course schedule indicating discussion periods and small group sessions (can be on brochure).*

INFORMATION INCLUDED WITH APPLICATION: YES

5. Does the course design formally include opportunities for participants to receive feedback on their learning using a written test, touch pad system or test of skills acquired?
Supporting documentation: Please send a copy of the written test if proposed and the course brochure indicating how feedback of learning will be undertaken.

Please note that criteria 1, 2 and 4 must be present with supporting documentation in order for a CPD event to be approved.

This section is to be completed by the accredited provider and returned to the program planner. (The accredited provider should keep a copy of the completed application form).

This application is: Approved [] Not Approved []

Signature of Accredited Provider: _____

Date: _____

Approved CPD events must have the following statement on the program brochure and materials: "This event is an accredited group learning activity as defined by the Maintenance of Certification Program of the Royal College of Physicians and Surgeons of Canada."