

Code of Practice for Continuous Medical Development Accreditation Committee (CMDAC)  
Occupational Medicine Section UEMS

Agreed at the section meeting in Innsbruck Apr 2012.

## **Background**

1. The Occupational Medicine Section of UEMS has agreed at the meeting in Bucharest on Saturday 16 October 2010 to set up an accreditation committee to consider applications under the UEMS scheme for European accreditation. International Continuous Medical Education (CME) events are accredited based on national accreditation by relevant CME authority and consultation with European speciality based accreditation boards. UEMS/EACCME has signed agreements on mutual recognition of CME events with national accreditation authorities of several EU countries and this code of practice covers occupational medicine events applying for said accreditation. The Occupational Medicine Section has also signed an agreement with UEMS as stated in UEMS 2010/02 in support of the process.

## **Membership**

2. Membership of the CMDAC is by volunteers from Occupational Medicine Section of UEMS and EASOM. The agreed number of members for the committee is 5, 3 UEMS members and 2 EASOM members. If the work load increases to be unmanageable for this number, the membership may be increased if agreed by UEMS members.

3. The Chair of the Committee is a UEMS member and the secretary of the Occupational Medicine Section of UEMS is an additional non-voting member to assist with the administration of the system. On any one application there is a requirement of 3 reviewers to provide a considered and justified opinion on academic content including ECMECs to be awarded (1 ECMEC per hour; 6 for full day and 3 for half day's programmed educational activities). If less than 3 reviewers provide feedback then the EACCME Secretariat will make a decision on feedback received by the closing date. No member country is allowed to vote on applications from their own country to avoid any conflicts of interest and therefore all elected members of the Accreditation Committee should be from different countries. In addition, the voting members are to have experience in medical education, which allows them to make a valued judgment on the educational content of the event applying for accreditation.

4. The membership of the Committee is voluntary and the members can resign from this role at any UEMS meeting when an appropriate replacement can be elected. The Secretary of the Section will hold up-to-date details of the membership of the Committee.

## **Application**

5. The criteria for International Accreditation of CME are outlined in UEMS document D 9908 reviewed 2007 and UEMS 2011/20 for e-learning materials. Assessment and approval by the National Awarding Authority is required as part of the process. The current scheme is hosted by the UEMS with each section having their own processes to quality assure events. The application form is available at [www.eaccme.eu](http://www.eaccme.eu). The detail required on the application form is outlined later in this document.

6. The following should be noted:

- There is no accreditation given to commercial promotional activities or activities irrelevant to the speciality.
- There should be disclosure of any potential conflict of interest by the organisers.

### **Costs**

7. The current costs of the scheme cover the administrative expenses of EACCME at national, European and specialist section resulting in three invoices. The fees are based on a sliding scale relating to the number of expected participants and current fees can be found on the UEMS website. Processing of fees is the responsibility of EACCME administration and not the specialist section and the monies due to be paid to the section for their work in accreditation will be paid into the Section's sub-account by UEMS.

### **Authority**

8. National accreditation is awarded by the CME regulating body of the country where the activity takes place and will be awarded to national participants distinct to the EACCME scheme. European accreditation is the responsibility of UEMS under the EACCME scheme and will award EACCME credits after the programme is scrutinised by the Occupational Medicine Section of the UEMS with support from EASOM. The organisers by participation in the process will accept the scientific evaluation by EACCME Secretariat after review of the Section's comments and recommendations and apply the number of credits recommended by the Secretariat to non-national participants. Where participating countries have robust systems in place to scrutinize quality of educational events, it is unlikely that there will be significant differences in outcome between national and EU recommendations for credits.

### **Time-lines**

9. The event organiser needs to send a request 3 months before the event to allow the committee time to scrutinize the content of the educational event. Due to time constraints, requests for accreditation are likely to be considered by National AA and UEMS sections simultaneously. Once the paperwork has been processed by UEMS, the relevant paperwork will be forwarded to the secretary of the Section of the UEMS who will distribute to the relevant members of the committee. Members are committed to review and comment within 3 weeks by e-mail to the Secretary of the Section who will collate the responses and forward to the EACCME secretariat. Where necessary further clarification of content can be obtained from the event organiser through the secretary who will ensure timelines are met. If there is disagreement with the responses the secretary will inform the Chair who will adjudicate. If there are too few responses, it may be necessary for the Secretary or President (in a reserve capacity) to contribute to meet the required timelines.

### **Quality**

10. The quality of International CME is governed by the UEMS document D 9908/ Revised 2007. In this document it confirms the quality assurance of Continuing Medical Education (CME) in the European countries is the responsibility of the National Accreditation Authorities, considering European consensus on quality assurance requirements laid down in the UEMS CME Charter with its Annexes and the guidelines implicit in the data to be submitted.

11. The quality and effectiveness of the accreditation process and of the awarding of international CME credits will be granted at the European level by EACCME. The provider applying for international certification should conform to the quality criteria set by the relevant national and international Authorities, should submit to the European Accreditation Council for CME proof of the quality and content of the CME activity concerned.

12. For this purpose the following data must be submitted for assessment to the EACCME on the accompanying application form and reviewed by the Committee for each application.

- a. Objectives of the CME activity:
- b. The learning objectives of the CME activity and its target participants.
- c. Programme, a detailed written statement confirming the content of the event / training programme and the expected outcome, how the CME is to be delivered, language(s) the event will use and any interpretation services provided.
- d. Provider details:
  - i. The names and relevant data of the programme director who is ultimately held responsible by EACCME for the event including conflicts of interest issues with their qualifications. Relevant qualifications of other lecturers / presenters to the event.
  - ii. The structure of the provider with statutes and rules of procedure if applicable and other relevant details.
  - iii. Providers will only be awarded accreditation for CME activities that they organise themselves. (Note: Providers cannot transfer their accreditation to other parties or let other parties organize the CME activity on their behalf.)
- e. Previous experience of delivering CME is not a requirement by the scheme, but previous successful events organized by the same provider including details about the programme and presenters can help with the accreditation process. Relevant details should be sent with the application form.
- f. Proof of disclosure of potential conflict of interest (e.g. paid consultant, significant investments, research grants) should be made in the printed programme (or at least orally before the presentation begins). Disclosure should also be made by members of the Planning Committee.

## **Sponsorship**

13. Providers often receive financial and other support from non-accredited commercial organizations. Such support can contribute significantly to the quality of CME activities. This support should be subjected to standards. The provider must assure that the educational programme approved for international CME credit is not influenced or biased by commercial organisations. Commercial support may be provided to conferences in a variety of ways: exhibits, advertising, industry meetings and presentations, payment of expenses of faculty or participants (travel, hotel etc.), educational grants. Industry-presented education must be clearly distinguished from CME activities under the control and supervision of the provider's CME planning committee. These events cannot be recognized for ECMEC credits. Standard uniform terminology should be used to identify industry presented education. Industry-presented education should not be scheduled to compete with CME. Educational grants must always be made with "no strings attached" and should always be acknowledged in the printed programme.

## **Attendance**

14. Organisers must have a process by which to verify the actual attendance of physicians at events and should only claim credit proportional to the actual time spent participating in the CME activity.

## **Self assessment and Feed back**

15. Good practice requires self-assessment by the provider and the participant. Therefore arrangements must be made to facilitate feed back concerning the learning process from the participants to the provider of the CME activity.

## **Post-event Report**

16. There is a requirement for the event to submit a short report of each CME activity to EACCME. This should include the final programme, the development of CMR activity, actual attendance and an analysis of the participant's feedback forms. The occupational medicine section will request from EACCME Secretariat for copies of the reports on all approved educational events as part of the quality assurance process. The summary should be requested by the Sec within 3 months of the event.

## **Accountability**

17. It is important in the role of the occupational medicine section in approving the academic content of educational events that the process is evidence based, transparent and auditable for accountability purposes. To this end, all activity and its stages of approval will be maintained by the secretary and be available to UEMS scrutiny at their request. This will include the dates events for approval are received, the members who were involved in the accreditation process, the outcome of the decisions with the reasons for the decision. Any dispute between members of the committee will be discussed through the Chair who holds the final decision.