THE ROYAL COLLEGE OF PHYSICIANS & SURGEONS OF CANADA (RCPSC) SECTION 1

The Continuing Professional Development (CPD) Office, Faculty of Medicine, McGill University, will review your activity for RCPSC MOC Section 1 credits. In this three part application form, the RCPSC accreditation/certification eligibility criteria must be met and the supporting documents provided. Activity organizers must visit the website of The Royal College of Physicians and Surgeons of Canada to ensure that their activity meet the organization’s criteria for CPD accreditation/certification.

ACTIVITY NAME:

PART #1: Physician Organization Requesting Review

Activities eligible for approval under MOC Section 1 must meet one of the following requirements.

Indicate which option applies to your organization:

Option 1 - ☐ We are a **physician organization**¹ – we planned this educational activity unaided or in conjunction with another physician organization.

Option 2 - ☐ We are a physician organization that is co-developing this educational event with a **non-physician**² organization. We (the physician organization) have had substantial input into the planning, organization, development and implementation of this activity and accept accountability for its entire content.

¹ **Physician Organization**: A non-profit group of health professionals with a formal governance structure. These include (but not limited to):
• Faculties of Medicine
• Hospital Departments/Units
• Medical Societies
• Medical Associations

² **Non-physician organization**: A pharmaceutical/communication company, medical/surgical supply company or other profit organization

Complete the section below:

**Physician organization name:**

Mandatory to meet the criteria as stated on pages 3-4 of this application form under the heading “Definition of a Physician Organization”

Name of Contact Person:

Telephone: Facsimile: Email:

**Non-physician co-developing organization name:**

Name of Contact Person:

Telephone: Facsimile: Email:

PART #2: Mandatory Educational Requirements

Criteria #1: The activity must be planned to address the identified needs of the target audience.

Please provide an explanation or supporting documentation for the following questions: **Write clearly.**

1. Describe the identified target audience for this activity. If applicable, please indicate if this activity is also intended to include other health professionals. Indicate area of expertise.
2. What sources of information were selected by the Scientific Planning Committee to develop the content of this activity? Examples can include reviews of scientific or education literature, clinical practice guidelines, and surveys or focus groups conducted by the organization planning the event.

Criteria #2: Learning objectives that address identified needs must be created for the overall activity and individual sessions. The learning objectives must be printed on the program brochure and/or handout materials.

1. Do the learning objectives express what the participants will be able to know or achieve by participating in the activity? Yes □ No □

2. How are the learning objectives linked to the evaluation strategies for this activity? For example, does the evaluation form list the learning objectives or pose questions to participants about whether the learning objectives were met?

The activity must include an evaluation of the event’s established learning objectives and the learning outcomes identified by participants.

1. Do you provide an opportunity for participants to identify if the stated learning objectives were achieved? Yes □ No □

2. Are there opportunities for participants to identify and/or reflect on what they have learned? (One example of this would be a question asking what the participants learned or plan to integrate into their practice) Yes □ No □

If yes, describe the opportunity utilized by participants to identify what they have learned.

PART #3: Ethical Standards

Each of the following Ethical Standards must be met for CPD accreditation/certification approval.

1. The physician organization(s) must have control over the topics, content and presenters selected for this activity. We comply with this standard: Yes □ No □

Describe the process by which the topics, content and presenters were selected for this activity.
2. The physician organization(s) must assume responsibility for ensuring the scientific validity and objectivity of the content of this activity. We comply with this standard: Yes □ No □

Describe the process to ensure validity and objectivity of the content for this activity.

3. The physician organization(s) must disclose to participants all industry financial relationships of faculty, moderators or members of the scientific planning and organizing committees for the past 2 year period. Not just those relevant to this activity. We comply with this standard: Yes □ No □

Describe how the conflict of interest information is collected and disclosed to participants.

4. All funds received in support of this activity were provided in the form of an unrestricted educational grant payable to the physician organization(s) for management and disbursement. Ensure to complete page 14 of this certification application form. We comply with this standard: Yes □ No □

Please describe how the physician organization(s) assumes responsibility for the distribution of these funds, including the payment of honoraria and expenses. Under the current CPD National Standards, the physician organization is responsible for the management and disbursement of funds, including honoraria payments to all resource persons.

5. No drugs, products or logos appears on any written, promotional materials (preliminary or final programs, brochures, or advanced notifications) for this activity. We comply with this standard: Yes □ No □

A preliminary schedule, including a general description of the activities, timing, specific topics and speakers, is attached to this CPD accreditation/certification application form. Yes □ No □

6. Generic names should be used rather than trade names on all presentation slide sets and written materials. We comply with this standard: Yes □ No □

Describe the process to advocate presenters’ adherence to using generic rather than trade names of medications and/or devices included within all presentation slide sets and written materials.

We comply with the 6 above mentioned standards: Yes □ No □

As the Chair of the Scientific Planning Committee, I accept responsibility for the accuracy of the information provided in response to the questions listed on this application form. Also, to the best of my knowledge, I certify that the CMA’s guidelines entitled CMA Policy: Guidelines for Physicians in Interactions with Industry (2007), have been met in preparing for this activity. CMA Guidelines - Physicians in Interactions with Industry

Date: (yyyy/mmm/dd) SCIENTIFIC PLANNING COMMITTEE CHAIR (SIGNATURE)