

## WRITTEN AGREEMENT FOR INDUSTRY SUPPORT

PeaceHealth St. Joseph Medical Center is committed to presenting CME activities that promote improvements in physician competence, performance, and/or patient outcomes, health care quality, and community health, and are independent of the influence of ACCME-defined **ineligible companies\***. As part of this commitment, PeaceHealth St. Joseph Medical Center has outlined in this written agreement the terms, conditions, and purposes of industry support for CME activities. This includes direct or indirect financial or in-kind contributions to support a CME activity designated for *AMA PRA Category 1 credit*<sup>TM</sup>. \*The ACCME defines ineligible companies as any "whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients."

Title of CME Activity:				
Activity Location:	Activity Date(s):			
Name of company providing support:				
Amount of Support:				
Type of Support: Exhibit Fee	Unrestricted Medical Education Grant			

## Terms, Conditions, and Purposes

## Independence

- 1. This activity is for scientific and educational purposes only and will not promote any specific proprietary business interest of an ineligible company.
- 2. PeaceHealth St. Joseph Medical Center is responsible for all decisions regarding the identification of educational needs, determination of educational objectives, selection and presentation of content, selection of all persons and organizations that will be in a position to control the content of the CME, selection of education methods, and the evaluation of the educational activity.
- 3. An ineligible company may not be the agent providing the CME activity to the learners.

# **Appropriate Use of Industry Support**

- 4. PeaceHealth St. Joseph will make all decisions regarding the disposition and disbursement of the funds from an ineligible company.
- 5. The ineligible company will not require PeaceHealth St. Joseph to accept advice or services concerning teachers, authors, or participants, or other education matters, including content, as conditions of receiving financial or indirect support.
- 6. All industry support associated with this activity will be given with the full knowledge and approval of PeaceHealth St. Joseph. No other payments shall be given to the activity director, planning committee members, faculty, reviewers or authors, joint sponsor/provider, or others involved with the supported activity.
- 7. Upon request, PeaceHealth St. Joseph will furnish documentation detailing the receipt and expenditure of financial support.

#### Marketing / Promotion

- Product-promotion material or product-specific advertisement of any type is prohibited in or during the CME activity. The juxtaposition of editorial and advertising material on the same products or subjects is not allowed. Live or electronic marketing and promotion must be kept separate from the CME activity.
- 9. Promotional materials may not be displayed or distributed in the education space (physical or online) immediately before, during or after a CME activity. Ineligible companies may not engage in sales or promotional activities while in the space or place of the CME activity. Exhibit space will be in a separate location, away from the education space.

### **Disclosure**

10. PeaceHealth St. Joseph will ensure that the source of support from an ineligible company, either direct, indirect, or "in-kind," is disclosed to the participants, in program brochures, syllabi, and/or other program

materials, whether in print or online. This disclosure will not include the use of a trade name, company logo, or product-group message. The acknowledgment of industry support in the program or other materials may state the company name, but may not include corporate logos and/or slogans.

The industry supporter and PeaceHealth St. Joseph Medical Center agree to abide by all requirements of the <u>ACCME Standards for Integrity and Independence in Accredited Continuing Education</u> implemented by the Washington State Medical Association.

Name of Accredit	ed Provider: PeaceHe	ealth St. Josep	oh Medical Cente	r		
Tax ID Number: Contact Person: Phone Number:	91-0565889 Sheila Sandiford, CME Prog. Mgr. 360-715-4104		Email Address: Fax Number:	ssandiford@peacehealth.org 360-752-5302		
Joint Education P	Provider (if any):					
Contact Person: Phone Number: Tax ID Number:	Number:			Email Address: Fax Number:		
Name of Compan	y providing support:					
Address: City, State, Zip: Contact Person: Phone Number:		Email Address: Fax Number:				
	Agreed by	y Authorized l	Representatives			
Company Representative:		Accredi	Accredited Provider:			
(Signature and Date)		(Signature and Date)				
(Print Name)		(Print Nam	(Print Name)			
(Title)		(Title)				
		Joint Ed	lucation Provider	(If applicable):		
		(Signature	and Date)			
		(Print Nam	e)			
		(Title)				

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