

CPD-HP Conflict of Interest Disclosure and Management Procedure

1. Purpose

This document outlines the standardized process for identifying, disclosing, reviewing, managing, resolving, and documenting Conflicts of Interest (COI) in all CPD-accredited activities organized by CPD-HP, QU Health.

The process ensures compliance with the Department of Healthcare Professions Accreditation Standards (DHP-AS), particularly Standard 1.5, and supports transparency, independence, educational integrity, and freedom from commercial bias.

All individuals who may influence the planning, development, review, delivery, moderation, facilitation, authorship, or evaluation of CPD educational content must disclose all financial and non-financial relationships within the past 24 months, whether related or unrelated to the activity topic and regardless of perceived relevance.

This includes, but is not limited to, SPC members, speakers/presenters, moderators, facilitators, authors/content developers, content reviewers, and any other individuals who may influence educational content.

2. Definitions

Conflict of Interest:

A set of circumstances in which an individual's financial or non-financial relationships may actually, potentially, or be perceived to influence their judgment in the planning, development, review, delivery, moderation, facilitation, authorship, or evaluation of CPD educational content.

Financial Relationship:

Any monetary or financial relationship, including salary, honoraria, consulting fees, speaker fees, advisory fees, research funding, grants, clinical trial funding, royalties, patents, ownership interests, shares, investments, or other financial benefits.

Non-Financial Relationship:

Any professional, personal, academic, institutional, advisory, leadership, committee, editorial, authorship, advocacy, or other relationship, whether paid or unpaid, that may be actual, potential, or perceived.

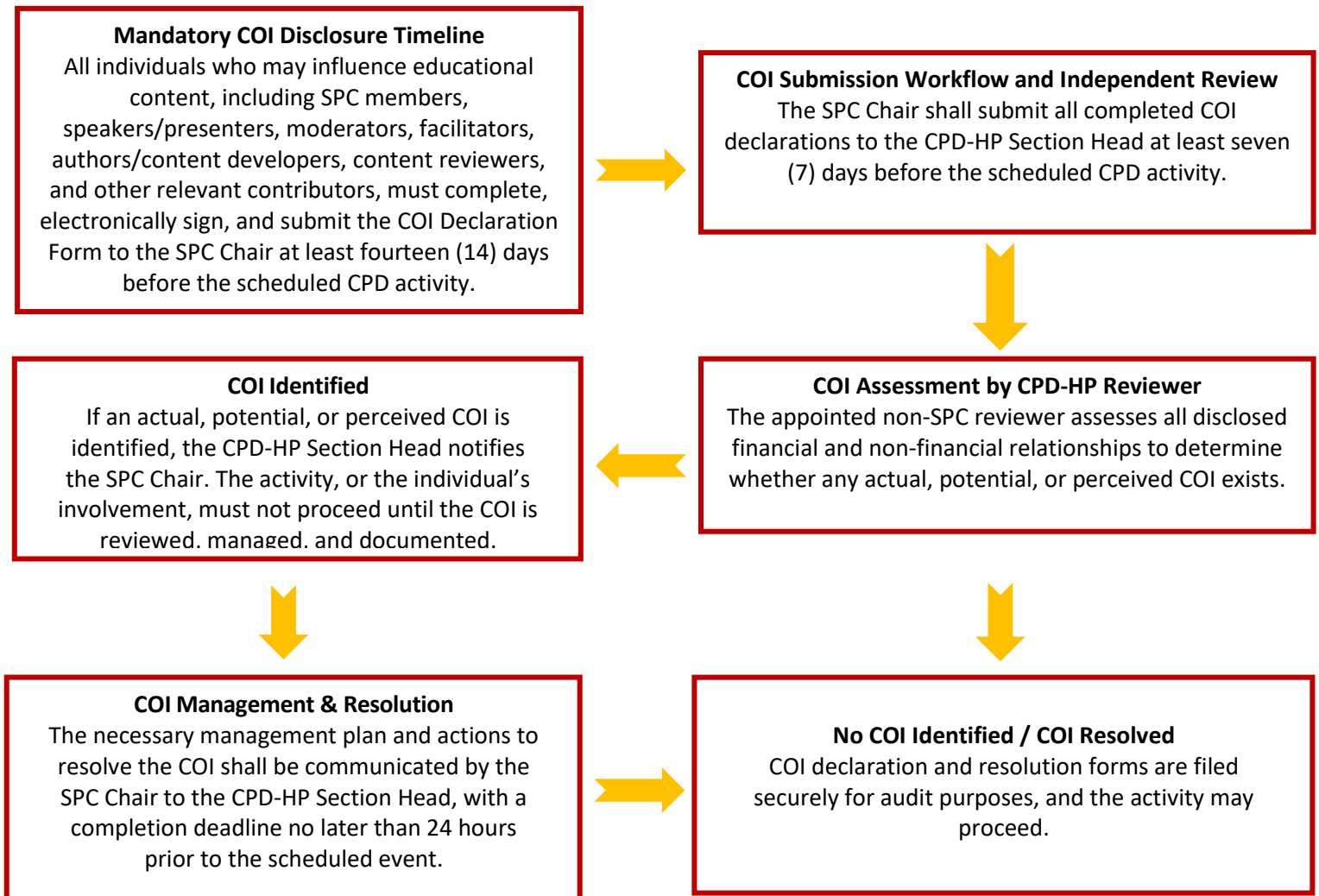
Disclosable Relationship:

Any financial or non-financial relationship within the past 24 months, whether related or unrelated to the topic of the CPD activity and regardless of perceived relevance.

Bias:

A tendency or inclination that prevents balanced, evidence-based, and objective consideration of a topic.

COI Management Flowchart



3. COI Disclosure and Review Process

3.1 Submission of COI Declarations

All SPC members, speakers/presenters, moderators, facilitators, authors/content developers, content reviewers, and other individuals who may influence educational content must complete, electronically sign, and submit the COI Declaration Form to the SPC Chair at least fourteen (14) days before the scheduled CPD activity.

3.2 SPC Chair Review

The SPC Chair reviews disclosed financial and non-financial relationships of speakers/presenters, moderators, facilitators, authors/content developers, content reviewers, and other contributors who may influence educational content before the CPD activity to determine whether any actual, potential, or perceived COI may require management.

3.3 Submission to CPD-HP

The SPC Chair must submit all completed COI Declaration Forms to the CPD-HP Section Head at least seven (7)

days before the scheduled CPD activity.

3.4 Independent CPD-HP Review

The CPD-HP Section Head shall appoint a non-SPC member of the CPD-HP Committee to independently review all submitted COI declarations, including those submitted by SPC members.

The reviewer will assess all disclosed financial and non-financial relationships, whether related or unrelated to the activity topic, and document whether any actual, potential, or perceived COI exists and whether management is required.

4. COI Identification and Management

If an actual, potential, or perceived COI is identified, the CPD-HP Section Head shall notify the SPC Chair. The activity, or the individual's involvement in the activity, must not proceed until the COI is reviewed, managed, and documented in accordance with DHP-AS requirements.

COI management actions may include, but are not limited to:

- disclosure of the relationship to participants;
- independent peer review of slides, handouts, cases, or other educational content;
- revision or removal of biased or promotional content;
- use of generic names instead of brand names, unless educationally justified;
- recusal of the conflicted individual from planning decisions related to the conflicted area;
- appointment of a non-conflicted co-speaker, reviewer, or facilitator;
- replacement or disqualification of the individual if the COI cannot be appropriately managed.

All COI management actions must be completed and documented no later than 24 hours before the scheduled activity.

5. Educational Content and Ethical Requirements

All individuals involved in CPD educational content must ensure that the activity is evidence-based, balanced, objective, and free from commercial bias.

Speakers/presenters and content contributors are required to:

- present unbiased, evidence-based information;
- avoid personal opinions not supported by research or evidence;
- use generic names of drugs, devices, or health products unless proprietary names are educationally necessary and justified;
- avoid promotion or recommendation of commercial products or services;
- clearly identify and disclose any discussion of off-label or investigational use of drugs, devices, products, or interventions, where applicable;
- revise or remove biased or promotional content when requested by the SPC or CPD-HP Office.

Individuals who refuse to disclose required relationships or refuse to resolve an identified COI shall be disqualified from participating in the planning or delivery of the CPD activity.

6. Participant Disclosure of COI Status

Participants will be informed of the COI disclosure status of individuals who influence educational content before or at the beginning of the CPD activity.

This may be done through the final program, speaker disclosure slide, opening announcement, participant handout, online platform, or activity materials.

If no COI requiring management is identified, the following statement may be used:

All COI declarations for individuals involved in the planning, development, and delivery of this CPD activity were reviewed. No actual, potential, or perceived conflicts of interest requiring management were identified.

If a COI is identified and managed, participants will be informed of the nature of the disclosed relationship and the management action taken, as appropriate.

7. Documentation and Record Retention

The following documents shall be retained in the CPD activity file for accreditation and audit purposes:

- completed COI Declaration Forms;
- completed COI Resolution Forms, where applicable;
- evidence of independent COI review;
- speaker or contributor correspondence requesting COI disclosure;
- evidence of participant disclosure, such as program statement, disclosure slide, announcement script, or activity materials;
- revised educational content, where content review or mitigation was required.

The CPD activity may proceed only after COI declarations have been reviewed and any identified COI has been appropriately managed and documented.

References:

1. Pereira P. (2013). Conflict of interest and its importance. *Perspectives in clinical research*, 4(1), 41-44. <https://doi.org/10.4103/2229-3485.106375>
2. <https://accme.org/rule/identify-mitigate-and-disclose-relevant-financial-relationships/>
3. Pannucci, C. J., & Wilkins, E. G. (2010). Identifying and avoiding bias in research. *Plastic and reconstructive surgery*, 126(2), 619-625. <https://doi.org/10.1097/PRS.0b013e3181de24bc>

Conflict of Interest (COI) Resolution Form

All individuals who may influence the planning, development, review, delivery, moderation, facilitation, authorship, or evaluation of CPD educational content must submit a COI declaration. This includes, but is not limited to, SPC members, speakers/presenters, moderators, facilitators, authors/content developers, content reviewers, and any other individuals who may influence educational content.

The SPC Chair is responsible for reviewing all disclosed financial and non-financial relationships of speakers/presenters, moderators, facilitators, authors/content developers, content reviewers, and other individuals who may influence educational content prior to the CPD activity, to determine whether action is required to manage any actual, potential, or perceived conflict of interest.

A non-SPC member appointed by the CPD-HP Section Head must independently review all COI declarations, including those submitted by SPC members, and document whether any disclosed financial or non-financial relationship represents an actual, potential, or perceived conflict of interest and how it was managed or resolved.

CPD Activity Details

Title:	
Activity Code:	
Date:	
Name of Individual:	
Role of Individual:	☐ SPC Member ☐ Speaker / Presenter ☐ Moderator ☐ Facilitator ☐ Author / Content Developer / Content Reviewer ☐ Other individual influencing educational content: _____

Documents Reviewed

☐ CPD Content (slides, handouts, cases, program, online materials)
☐ COI Declaration Form(s)
☐ Final program / agenda
☐ Disclosure slide or participant disclosure statement
☐ Speaker / contributor correspondence
☐ Other (specify):

COI Identified?

☐ No — No actual, potential, or perceived conflict of interest requiring management was identified after review of the disclosed financial and non-financial relationships.
☐ Yes — An actual, potential, or perceived conflict of interest was identified and required management.
Details (if applicable): _____ _____

Resolution Measures

Describe the actions taken to manage or resolve the identified COI (e.g., disclosure slide, independent content review, recusal, co-presenter involvement).

☐ No COI requiring management was identified after review of all disclosed financial and non-financial relationships. Therefore, no mitigation action was required.

☐ COI was identified and the following action(s) were taken:

- ☐ Disclosure to participants
- ☐ Independent content review
- ☐ Revision/removal of biased content
- ☐ Recusal from planning decisions
- ☐ Co-presenter or independent reviewer involvement
- ☐ Replacement/disqualification of individual
- ☐ Other: _____

Details of management/resolution:

COI Review Outcome

☐ No COI requiring management was identified.
☐ COI was identified and resolved to an acceptable level before the activity.
☐ COI was identified but not resolved; the individual must not participate until resolution is completed.
If the COI was not resolved, please explain: _____

Reviewer Details

Reviewer Name:	
Signature:	
Date:	

Reviewer Declaration:

I confirm that all disclosed financial and non-financial relationships, whether related or unrelated to the CPD activity topic, have been reviewed. Any actual, potential, or perceived conflicts of interest have been evaluated and, where applicable, managed according to CPD-HP policy before delivery of the activity.

Conflict of Interest Declaration Form

Office of Continuing Professional Development for Healthcare Professionals (CPD-HP), QU Health

To comply with the applicable accreditation standards of the Department of Healthcare Professions (DHP), Ministry of Public Health (MoPH), all individuals in a position to influence educational content are required to complete this form in accordance with DHP-AS Standard 1.5.

This includes, as applicable, speakers/presenters, facilitators, moderators, authors/content developers, content reviewers, members of the Scientific Planning Committee, and any other individuals who may influence educational content.

Kindly take a few minutes to read and complete the form below for the activity: **[ACTIVITY TITLE]** scheduled for delivery on **[ACTIVITY DATE]**.

All disclosed financial and non-financial relationships will be reviewed by the Scientific Planning Committee and the CPD-HP Office to determine whether any actual, potential, or perceived conflict of interest exists and whether management is required before delivery of the educational activity. Thank you in advance.

* Indicates required question

Section 1. Personal Information

1. Email Address *

2. Full Name *

3. Professional title / Position *

4. Department / Institution / Organization *

Section 2. Role in this CPD Activity

5. What is your role in the CPD activity? (Select all that apply) *

- ☐ Speaker
- ☐ Facilitator
- ☐ Moderator
- ☐ Author / Content Developer / Content Reviewer
- ☐ Scientific Planning Committee Member
- ☐ Other individual influencing educational content: _____

Section 3. Conflict of Interest (COI) Information

A conflict of interest may exist when an individual's financial, professional, or personal relationships could influence, or could reasonably be perceived to influence, their judgment in relation to the planning, development, delivery, or evaluation of a CPD activity.

The existence of a financial or non-financial relationship does not necessarily mean that a conflict exists or that wrongdoing has occurred. However, all financial and non-financial relationships within the past 24 months must be disclosed, whether or not related to the topic of this CPD activity and regardless of perceived relevance. The CPD-HP Office and/or Scientific Planning Committee will determine whether any disclosed relationship represents an actual, potential, or perceived conflict of interest requiring management.

Definitions

- **Commercial interest:** Any entity that produces, markets, sells, or distributes healthcare goods or services used on patients. Clinical service providers are generally not considered commercial interests.
- **Financial relationships:** Any relationship in which the individual receives or has received salary, honoraria, consulting fees, speaker fees, research funding, grants, royalties, ownership interests, patents, advisory roles, board membership, or other financial benefit.
- **Non-financial relationship:** Any professional, personal, academic, institutional, advisory, leadership, advocacy, committee, editorial, authorship, or other relationship that may be actual, potential, or perceived, whether paid or unpaid.
- **Disclosable relationship:** Any financial or non-financial relationship within the past 24 months with a for-profit, not-for-profit, commercial, professional, academic, healthcare, governmental, or other organization, whether related or unrelated to the topic of the CPD activity.

- **Conflict of interest:** A COI exists when financial, personal, or professional interests could—actually or potentially—compromise, or be perceived to compromise, professional judgment in conducting or participating in CPD. Such interests include those of the individual and their immediate family.

6. **Within the past 24 months, have you had any financial or non-financial relationships with any for-profit, not-for-profit, commercial, professional, academic, healthcare, governmental, or other organization, whether related or unrelated to the topic of this CPD activity?**

All relationships must be disclosed regardless of whether you believe they are relevant to the activity or likely to influence the educational content. CPD-HP and/or the Scientific Planning Committee will determine whether any disclosed relationship represents an actual, potential, or perceived conflict of interest requiring management. This includes, but is not limited to:

- Salary, honoraria, consulting fees, speaker fees, advisory fees, or other payments.
- Research funding, grants, sponsored projects, clinical trials, or institutional funding.
- Advisory board membership, committee membership, board membership, leadership roles, editorial roles, or consultancy.
- Patents, royalties, intellectual property, ownership interests, shares, investments, or other financial interests.
- Professional, academic, personal, advocacy, organizational, or unpaid relationships.
- Relationships involving immediate family members that could be actual, potential, or perceived conflicts.

Mark only one oval.

☐ Yes

☐ No

If you have selected YES to the above question, please provide details of each relationship disclosed above.

Organization / Entity: _____

Type of Relationship: _____

Financial or non-financial: _____

Paid or unpaid: _____

Period / Date: _____

Topic, product, service, or activity involved, if applicable: _____

Is this relationship related to the current CPD activity topic? ☐ Yes ☐ No ☐ Unsure

Additional details: _____

Section 4. Educational Content Declaration

7. Will your presentation or educational contribution include discussion of therapeutic recommendations, products, devices, or interventions that are not approved by the relevant regulatory authority for the stated use (i.e., off-label or investigational use)? *

Mark only one oval.

- ☐ Yes
☐ No
☐ Not Applicable

If yes, please briefly specify the nature of the off-label or investigational content and how it will be presented in an evidence-based and balanced manner.

8. I confirm that, where applicable, I will use generic names rather than commercial / brand names in the educational content, except where reference to a specific trade name is educationally necessary and justified. *

- ☐ Yes
☐ No
☐ Not Applicable

9. I confirm that my presentation / educational contribution will be evidence-based, balanced, and free from commercial bias. *

- ☐ Yes
☐ No
☐ Not Applicable

10. I confirm that I have included, or will include, an appropriate Conflict of Interest disclosure statement in my presentation or educational materials, where applicable, including a “no conflict of interest” statement when no COI has been identified.*

- ☐ Yes
- ☐ No
- ☐ Not Applicable

Section 5. Electronic Declaration and Signature

11. Electronic Declaration and Signature*

By checking the box below and submitting this form electronically, I declare that the information provided in this form is true, accurate, and complete to the best of my knowledge. I confirm that I have disclosed all financial and non-financial relationships within the past 24 months, whether related or unrelated to the topic of this CPD activity and regardless of perceived relevance. I understand that CPD-HP and/or the Scientific Planning Committee will review the disclosed information and determine whether any actual, potential, or perceived conflict of interest exists and whether management is required. I understand that disclosure information may be used for conflict-of-interest assessment, accreditation compliance, documentation, and participant transparency. I further acknowledge that my electronic submission of this form, together with my name, email address, and date of submission, constitutes my electronic signature.

☐ I agree and electronically sign this declaration.

12. Full Name (as electronic signature) *

13. Date *

Example: January 7, 2019

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