



UNIVERSITY OF ARKANSAS
FOR MEDICAL SCIENCES

Joint Provider Agreement Terms and Conditions

Collaborating as a jointly accredited provider with non-accredited providers to provide nursing, pharmacy, and/or medicine continuing education credit.



JOINTLY ACCREDITED PROVIDER™
INTERPROFESSIONAL CONTINUING EDUCATION

In support of improving patient care, the University of Arkansas for Medical Sciences is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

Introduction to Joint Providership

The University of Arkansas for Medical Sciences Office of Continuing Education (UAMS OCE) is a Joint Provider of continuing education for pharmacists, nurses and physicians to provide non-accredited organizations, hereby known as “Joint Provider,” the ability to offer accredited continuing education activities. Should UAMS OCE choose to partner with a Joint Provider, assurance that all accreditation criteria are met rests with UAMS OCE. Please contact the UAMS OCE at 501-661-7962 for a consultation to determine if this is an activity that will meet accreditation criteria.

UAMS OCE will consider accrediting CE activities through the UAMS OCE joint provider process if the terms of the Joint Provider Agreement are met. A copy of this the Joint Provider Agreement is to be completed by a representative of the organization seeking to be a Joint Provider of an educational activity for which you desire to offer nursing, pharmacy, and/or physician credits to the participants of the educational activity. This agreement is one where you agree to abide by the accreditation criteria as outlined in this agreement and by the OCE compliance staff and pay all fees outlined in the agreement.

The Joint Provider must agree to:

1. Develop activities that are consistent with UAMS OCE mission and goals and are compliant with the Joint Accreditation criteria.
2. Identify faculty (speakers, authors) competent in the subject matter.
3. Develop topics that are not promotional or appear to be intended for the purpose of endorsing either a specific name brand medication or commercial product (see UAMS OCE Commercial Support policy.)
4. Provide all requested material by established deadlines as indicated in the joint provider agreement.*

*If the Hosting Organization fails to meet these terms, UAMS has the right to terminate the relationship and refuse to grant the appropriate CE credit for any activity.

COMMERCIAL SUPPORT. A commercial interest cannot be a joint provider. Funds from commercial interests to support the educational activity are regulated through the ACCME Standards for Commercial Support which also serves as the basis for the Standards for Commercial Support for Joint Accreditation. Please see the commercial support policy for details. *The UAMS OCE will need to receive letters of agreement for approval and signature prior to the start of the activity as outlined in the Standards for Commercial Support.*

JOINT PROVIDERSHIP PROCESS

EDUCATIONAL DESIGN. To ensure that activities closely align with the criteria for Joint Accreditation, UAMS OCE and the Joint Provider must ensure that the following process was utilized to develop activities.

- Conduct a needs assessment of the educational needs and identify the knowledge, skills and/or practice gap of the targeted audience.
- Identify learning objectives.
- Provide guidance to faculty (including the nature of the target audience, teaching methodology, development and use of instructional materials and learning assessments, and the development of appropriate objectives).
- Ensure that the Standards for Commercial Support are followed and resolve conflicts of interest.
- Summarize and analyze feedback from the targeted audience (separated by profession) obtained through activity evaluation forms.

Additionally, UAMS OCE must review and approve all materials and information so as to assure that the activity provides an in-depth presentation with fair balance and full disclosure. Organizations wishing to move forward in the joint providership process and agree to adhere to the accreditation criteria are encouraged to read the Introduction to Joint Providership and complete and submit to UAMS OCE the joint providership agreement a minimum of 60 days prior to the activity date.

In addition, joint providers must send the faculty agreement to all confirmed speakers or authors and instruct them to complete and return the agreement and accompanying materials to you so that you can provide them to UAMS OCE a minimum of 45 days prior to the activity date. Please see the joint providership agreement for a detailed checklist and deadlines.

EDUCATIONAL NEEDS ASSESSMENT. A needs assessment must be completed before planning CE activities and should guide content development and delivery. The Joint Provider will be required to complete an educational needs assessment that will demonstrate evidence-based assessment showing the state of practice now, the state of desired practice, and the knowledge or practice gap identified for each activity.

ACTIVITY ANNOUNCEMENTS. The Joint Provider must submit a proof of **all** promotional materials that are disseminated in some manner, U.S. Postal Service, email, flyers, etc., to the UAMS OCE for approval prior to dissemination. If the announcements are not approved in advance and do not contain the appropriate statements, the joint provider will need to correct, reprint (if printed material), and resend all correspondence. If not corrected, the UAMS CE office holds the right to cancel the joint providership agreement.

EVALUATION OF CE ACTIVITIES. To offer participants the ability to provide feedback on activities, the joint provider is required to distribute UAMS OCE-approved activity evaluations to participants, as well as summarize and analyze the results and return this analysis to UAMS OCE. This valuable information will be used to improve activities or offer activities that are of interest to participants and will validate whether the activities met UAMS CE's mission and goals.

ASSESSMENT OF LEARNING AND FEEDBACK. Assessment of learning and providing feedback is an important educational strategy to check for learning and is strongly encouraged. This can be an informal question and answer period at the end of the presentations; a post-test; audience response system; case presentation with questions and answers; that provide feedback as to why the answers are correct or incorrect. .

INTERPROFESSIONAL vs. UNIPROFESSIONAL EDUCATION. Interprofessional Collaborative Practice is recognized as key to providing safe patient care. Therefore, UAMS is committed to providing continuing interprofessional education, whenever appropriate. Therefore, please consider a target audience that is interprofessional and compose a planning committee that is representative of the target audience when you embark on planning the educational activity.

The UAMS OCE recognizes that some topics are uniprofessional due to the scope of practice of the practitioner and will provide joint providership for those activities as well.

JOINT PROVIDERSHIP FEES. Please contact the Director of Accreditation Compliance at 501-661-7962 to obtain a complete fee schedule.

ADDITIONAL ACPE PHARMACY CE GUIDELINES

METHODS OF DELIVERY. Methods of delivery of pharmacy continuing education are important to the effectiveness of the activity. CPE activities are categorized into three types: knowledge, application and practice. The CPE activity type conducted should be consistent with UAMS CE's mission and be appropriate to meet the identified needs of pharmacists and pharmacy technicians. APCE activities shall be based on one of the following:

- **Knowledge-based Activity:** These activities are primarily constructed to transmit knowledge (i.e., facts). The facts must be based on evidence as accepted in the literature by the health care professions. These activities are less than one-hour in length.
- **Application-based Activity:** These activities are primarily constructed to apply the information learned in the time frame allotted. The information must be based on evidence as accepted in the literature by the health care professions.
- **Practice-based Activity:** Joint providers conducting practice-based activities that include a didactic (home study) and practice experience component (live) and will be a minimum of 15 contact hours should contact UAMS CE directly for additional guidance.

The OCE must obtain a Universal Activity Number (UAN) from CPE Monitor at least 2 weeks prior to the activity. The OCE has 60 days from the activity date to upload this information for each participant. Therefore, the OCE must have the following from **each participant** in order to award pharmacist credits:

- NABP eProfile number
- Month and day of birth

The OCE cannot award credits after 60 days from the activity date.

Terms of Agreement. The Joint Provider agrees to complete the following assignments and adhere to established deadlines.

| Agreement | Deadline (note: days are business days) | |
|--|--|--------------------------|
| Participate in an initial consultation meeting to ensure this is an activity that can be accredited and all criteria will be met. | Minimum 60 days prior to activity | <input type="checkbox"/> |
| Submit to UAMS OCE completed planning document, supporting documentation, and joint providership agreement | Minimum 60 days prior to activity | <input type="checkbox"/> |
| Submit a nonrefundable accreditation fee; an invoice will be generated when the signed joint provider agreement is received | Minimum 60 days prior to activity | <input type="checkbox"/> |
| Submit information obtained from speakers: contact information, activity details, CV and biography, learning objectives, multiple choice posttest questions, answers and feedback explaining why chosen answers are correct for each activity, disclosure of financial relationships and compensation NOTE for Pharmacy credits: each presenter should submit learning objectives only if UAMS OCE is accrediting each presentation individually; otherwise, objectives can be noted in the planning document; | Minimum 30 days prior to activity | <input type="checkbox"/> |
| Provide the UAMS OCE a proof of the announcement/promotional material (including web addresses) for approval before distribution | Minimum 45 days prior to activity | <input type="checkbox"/> |
| Provide UAMS OCE with a copy of all letters of agreement for commercial support upon receipt of the support for signature by the UAMS Director of OCE | Upon receipt of LOA and prior to the start of the activity | <input type="checkbox"/> |
| Provide UAMS OCE with a copy of written method to be used to disclosure financial relationships or lack thereof, for advanced approval | Minimum 15 days prior to activity | <input type="checkbox"/> |
| Provide UAMS OCE with a copy of written method to be used to disclosure commercial support, if applicable | Minimum 15 days prior to activity | <input type="checkbox"/> |
| Provide participants with activity evaluation | Day of activity | <input type="checkbox"/> |
| Disclose to participants financial relationships or lack thereof | Day of activity prior to start of the content | <input type="checkbox"/> |
| Collect completed credit claim forms from participants | Onsite at end of the activity | <input type="checkbox"/> |

Submit to OCE a closing report with all documentation outlined in the report in a digital format (paper copies are accepted):

- Credit claim forms collected from participants
- Typed roster of all participants
- Evaluation summary and analysis report
- One** copy of final handout materials
- One** copy of all final promotional material(s), i.e. brochures, email blasts, website, etc.
- Final income/expense budget with all commercial support and exhibit fees line itemed
- Copy of **check(s) for all honoraria and other speaker expenses paid** (travel, hotel, meals, etc., if applicable) (must be line itemed on budget and must match budget)
- Copy of the written disclosure documentation used to provide information to participants **OR**
- If permission was given for verbal disclosure, Verbal Disclosure Attestation form (must have received permission in advance from OCE to use verbal)

If you received any educational grants:

- Signed Letter(s) of Agreement (if not already on file in OCE)
- Copies of checks from the grantor(s)
- Copy of method of disclosure of commercial support to participants

If you had exhibitors:

- Itemized exhibitor list attached
- Exhibit form(s) attached
- Copies of checks from exhibitor for exhibit fee

**30 days
post-
activity**

UAMS OCE – The responsibility for assurance of all accreditation criteria rests solely with the UAMS OCE; therefore, UAMS OCE will be responsible for the following (the items exclusive to pharmacy credit are noted, otherwise all items apply):

| Agreement | Deadline (<i>note: business days are Monday through Friday</i>) | Assignment Complete |
|---|---|--------------------------|
| Conduct a compliance review of planning document and supporting documentation and notify Joint Provider of UAMS OCE accreditation decision and feedback about review and provide: <ul style="list-style-type: none"> • disclosure of financial relationships form for joint provider to collect disclosure information from all involved in content, i.e. speakers, planners, authors, moderators, panelists, etc. • template for written disclosure of financial relationships to participants | Maximum 14 days after receipt of planning form and documentation including joint provider agreement | <input type="checkbox"/> |
| Conduct a review of promotional materials for compliance and provide approval or request for changes | Maximum 7 days after receipt | <input type="checkbox"/> |
| Review letters of agreement for commercial support | Maximum 7 days after receipt | <input type="checkbox"/> |
| Review disclosure of financial relationship forms for every planner, speaker, moderator, author for review of conflict of interest | Maximum 14 days before activity | <input type="checkbox"/> |
| Review of text to be used for written disclosure of financial relationships to participants | Maximum of 7 days after receipt | <input type="checkbox"/> |
| Review of text to be used to disclose commercial support to participants | Maximum 7 days after receipt | <input type="checkbox"/> |
| Review closing report documentation | Within 14 days after receipt | <input type="checkbox"/> |
| Enter participant data into database | Within 14 days after receipt | <input type="checkbox"/> |
| Pharmacy credit: Enter activity information into CPE Monitor and obtain UAN(s) for activity | Maximum 30 days prior to activity | <input type="checkbox"/> |
| Pharmacy credit: Upload pharmacist participant and program information into CPE Monitor | Maximum 60 days post activity | <input type="checkbox"/> |
| Invoice joint provider for participant fees | Maximum 60 days post activity | <input type="checkbox"/> |
| Maintain all participant records | Maximum of six years | <input type="checkbox"/> |

Joint Provider Agreement

Complete this agreement and submit pages 10 and 11 to UAMS Office of Continuing Education a minimum of 60 days prior to the activity date. This joint provider agreement between The Board of Trustees of the University of Arkansas acting for and on behalf of the University of Arkansas for Medical Sciences, the Office of Continuing Education, and the Joint Provider defines the relationship between the parties regarding the activity or event listed below. By signing this Joint Provider Agreement, the Joint Provider is acknowledging that they have read the UAMS Joint Provider Agreement Terms and Conditions and agrees to follow those Terms and Conditions in conducting this activity.

| | |
|-------------------------|--|
| Activity name | |
| Activity Date(s) | |

ACCREDITATION TYPE (Please mark all that apply)

| | |
|--|--|
| <input type="checkbox"/> Nursing (ANCC) | <input type="checkbox"/> Physician (AMA) |
| <input type="checkbox"/> Pharmacist (ACPE) | <input type="checkbox"/> Pharmacy Techs (ACPE) |

JOINT PROVIDER INFORMATION Please provide contact information for the person responsible for this event or activity. To avoid confusion and to maintain efficiency, please appoint only one point-of-contact.

| | |
|-------------------------|----------------|
| First Name | |
| Last Name | |
| Organization | |
| Street Address | |
| City, State, Zip | |
| Email Address | Phone # |

| | |
|--------------------------|--|
| <input type="checkbox"/> | Our organization is an ACPE-accredited provider, the ACPE Provider ID # is |
| <input type="checkbox"/> | Our organization is an ACCME-accredited provider, the ACCME Provider ID # is |
| <input type="checkbox"/> | Our organization is an ANCC-accredited provider, the ANCC provider ID # is |

Please complete RESTRICTION OF BOYCOTT OF ISRAEL CERTIFICATION:

In accordance with Ark. Code Ann. § 25-1-503, _____ (name of organization) hereby certifies to UAMS that _____ (name of organization):

- (a) is not currently engaged in a boycott of Israel and
 - (b) agrees for the duration of this Agreement not to engage in a boycott of Israel.
- A breach of this certification will be considered a material breach of this Agreement.

In the event that _____ (name of organization) breaches this certification, UAMS may immediately terminate this Agreement without penalty or further obligation and exercise any rights and remedies available to it by law or in equity.

FEES The joint provider will pay a standard fee for CE accreditation and will be a joint provider for the activity listed in this document. This includes the responsibilities listed above. Fees will be invoiced separately as agreed upon by both parties.

| | | |
|--|--------------------------|--|
| Accreditation Fee | \$ | |
| Per Participant Fee (invoiced post-activity) | <input type="checkbox"/> | \$ 5.00 per person credit recording fee |
| | <input type="checkbox"/> | \$.55 per person per credit hour (Pharmacy) |
| Other Fees | <input type="checkbox"/> | \$ |

SIGNATURES: By signing this form, the accredited provider and non-accredited provider(s) have agreed to enter into a joint provider relationship and carry out the respective responsibilities as outlined herein. The UAMS Office of Continuing Education reserves the right to withdraw from this joint provider agreement and CE credit if any of the above requirements and terms and conditions of the joint provider agreement are not fulfilled. The accreditation fee is non-refundable.

ACCREDITED PROVIDER

JOINT PROVIDER

Signature: _____

Signature: _____

Name: Lea A. Mabry, M.Ed.
 Title: Director UAMS OCE
 Date:

Type name:
 Title:
 Date:

UAMS CONTRACTS AND FINANCE The Board of Trustees of the University of Arkansas acting for and on behalf of the University of Arkansas for Medical Sciences

Signature _____
 Date

William Bowes, M.S.
 Sr. Vice Chancellor for Finance and Administration/Chief Financial Officer

Return this completed and signed joint provider agreement with the accreditation fee to the OCE
By email: cbbuzbee@uams.edu, **By fax:** 501-661-7968; **Mail:** UAMS OCE, 4301 W. Markham St.
 Slot 525, Little Rock, AR 72205

Internal Use Only

Non-managed RSS Managed

Fund _____ Cost Center _____