

**APPLICATION FORM FOR MEETING ACCREDITATION
by CSCC / CACB**

Step 1:

- Notify the CSCC Head Office of your intention to apply. The application process is done online (under the “Membership Tools” panel, select “[Meeting Accreditation Application](#)”). This form is intended to guide the applicant in gathering the necessary information. The online application can be saved and updated as supporting documents become available.
- Start your discussion of topics by reviewing the Needs Assessment. It is essential that you can show that the topics were selected from perceived and unperceived needs. Attach minutes of these meetings.
- Planners must establish general objectives for each symposium and show evidence that they have notified the speakers of these objectives.

Step 2:

- Submit the completed online Application Form for Meeting Accreditation to CSCC Head Office with all of the attachments ([see](#) checklist below) at least 1 month before the event. Several templates are available online in the corresponding section of the application. The fee payment is due upon approval of the application.

Submission Checklist:

The following documents should be included as the application:

- Online Application Form for Meeting Accreditation
- Conflict of Interest Forms for each speaker [see #4.3]
- Identification of all commercial sponsors [see #4.4]
- List of Local Organizing Committee (LOC) members with current position and institution [see #7.1]
- Summary report of results of Needs Assessment [see #7.2]
- Minutes of LOC meetings where needs assessment was considered or developed [see #7.2]
- Preliminary Program or Scientific Program [see #8.1]
- Speaker Information Form [see #8.3]
- Evaluation Form [see #11.1]
- Record of Attendance Form

Please keep a copy of the completed application form for your files.

Step 3:

- From each speaker gather a list of learning objectives and a signed Conflict of Interest Form and submit to CSCC Head Office. Forms from at least half of the speakers must be submitted before meeting accreditation can be granted. Remaining forms must be submitted before the scheduled session in order to receive eligibility to obtain PD credits for the speaker’s session.

CONTINUING PROFESSIONAL DEVELOPMENT ACCREDITATION

Step 4:

- Use the evaluation forms (conference & each session) and attendance codes supplied by CSCC Head Office. Set up a record of attendance form for attendees to track codes. Whenever possible, the CSCC Head Office will make available an online form for evaluation and verification of attendance. In the event that the online system is not available, submit completed forms and attendance code following the conference to the CSCC Head Office.

APPLICATION FORM FOR MEETING ACCREDITATION by CSCC / CACB

Approval of an accredited group learning activity for Continuing Professional Development (CPD) Event (Category 1)

To be completed by the Local Organizing Committee and sent to:
CSCC, 4 Cataraqi Street, Suite 310, Kingston Ontario K7K 1Z7
Tel: 613-531-8899 / Fax: 613-531-0626

All sections of this application must be completed. Keep a copy for your records and submit the original copy to: "CPD Program" at the above address prior to publication of the conference Preliminary Program.

PART #1: ORGANIZATION REQUESTING APPROVAL

1. **Name of Conference:** _____

Location of Program: _____

City

Province

Program Dates: _____

Start Date

End Date

2. **Chair of LOC Requesting Approval:** _____

Title

First Name

Surname

Address: _____

City: _____ Prov: _____ Postal Code: _____

Tel: _____ Fax: _____

Email: _____

3. **LOC Member** should include a Fellow in good standing with the CACB, OCQ or other medically qualified person or group who will be integrally involved in the planning process to ensure that the context and process for the meeting will meet CSCC/CACB Professional Development guidelines:

Name _____

Title

First Name

Surname

4. **Meeting Ethical Standards for Continuing Professional Education:** Group continuing professional development activities approved under Category 1 must meet the following guidelines:

4.1 The sponsoring or co-sponsoring professional scientific or medical organization will have control over the topics and content of the activity, as well as the speakers invited to present at the activity. No Pharmaceutical or Diagnostic company has control over the topics, content or speaker.

Yes

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- 4.2 The sponsoring or co-sponsoring professional scientific or medical organization will assume responsibility for ensuring the scientific validity, objectivity, and completeness of the content of the activity. Yes
- * 4.3 The sponsoring or co-sponsoring professional scientific or medical organization will disclose to participants the financial affiliations of faculty, moderators or members of the planning committee with any commercial organization(s) supporting the program whose products are discussed or mentioned during the activity. A financial disclosure will be given at the start of each participant's session. Yes
- * 4.4 All funds received in support of this activity must be provided in the form of an unrestricted educational grant payable to the sponsoring organization. Yes
Please identify all commercial organizations that are funding this activity and attach to the application form.
- 4.5 The activity's brochure and/or other written materials does not identify any of the sponsor's products in a manner which advertises specific products. The mention of companies shall not be commercial. Yes

PART #2: MANDATORY EDUCATION REQUIREMENTS

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

5. **Target Audience:** (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Clinical or medical biochemist | <input type="checkbox"/> Other physician |
| <input type="checkbox"/> General pathologist | <input type="checkbox"/> Laboratory manager |
| <input type="checkbox"/> Medical laboratory technologist | <input type="checkbox"/> Other healthcare professional _____ |
- please specify

6. **Purpose and Overall Conference Goal(s):** _____

7. **Needs Assessment Process:**

* 7.1 Attach a list of the members of the LOC with their current position and institution. Please indicate the category of the target audience to which each member belongs.

* 7.2 Has information from target audiences been used to determine the course learning objectives? Yes

Indicate the tools that were used to determine the need for this activity (check all that apply):

- | | | |
|---|---|--|
| <input type="checkbox"/> Surveys | <input type="checkbox"/> Review of literature | <input type="checkbox"/> Discussion |
| <input type="checkbox"/> Direct observation | <input type="checkbox"/> Focus groups | <input type="checkbox"/> Consensus of experts |
| <input type="checkbox"/> New developments | <input type="checkbox"/> Disease prevalence | <input type="checkbox"/> Evaluations from previous conference(s) |
| <input type="checkbox"/> Clinical practice guidelines | <input type="checkbox"/> Needs assessment | <input type="checkbox"/> Other (describe briefly) |

Supporting documentation: send summary report of the results.

7.3 Have unperceived learning needs been assessed in any manner? Yes
(e.g. practice audits, self-assessment tests, etc.) Explain: _____

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Criteria 2: The activity must create and communicate learning objectives to address identified needs. The learning objectives must be printed on the program brochure and/or hand-out materials.

8. Learning Objectives:

- * 8.1 Do the learning objectives describe what the participant may learn or achieve by attending the CPD event or meeting. Yes

Supporting documentation: Attach a copy of the brochure, Preliminary Program or schedule of scientific program showing the title, speaker(s), number of hours, and learning objectives for each presentation, as they are known at this time.

- 8.2 Indicate how the learning objectives will be communicated to the audience prior to the conference (check all that apply):

- Brochure/Preliminary Program Session handout materials
 Final Program Other (describe briefly)

- * 8.3 Will the speakers be provided with, and complete the following CPD-approved forms? (check all that apply):

- Letter of request with general learning objectives for the session
 Speaker Information Form
 Conflict of Interest Disclosure Form
 Learning objectives of other speakers in same session

9. Accreditation Statement:

Approved CPD events must have the following statement on the program brochure and materials: Yes
"This event is an Accredited Group Learning Activity as defined by the CSCC/CACB Professional Development Program."

Criteria 3: At least 25% of the total education time must be devoted to interactive learning strategies.

10. Alignment of Instructional Methods to Learning Objectives:

- 10.1 Does the course design formally incorporate opportunities for interactive learning? For example, planned discussion periods, small group interactive sessions (less than 16 participants per session), problem- or case-based learning, workshops or seminars, audience response system? Yes

Indicate the types of instructional methods and aids that will be used to achieve the stated objectives (check all that apply):

- Discussion period Q & A
 Workshop Small group interactive session/Roundtable
 Panel Computer-assisted instruction
 Seminar Laboratory session
 Audience response system Problem- or case-based learning
 Handouts Other (describe briefly)

Criteria 4: The activity includes an evaluation of the learning objectives.

11. Evaluation:

11.1 The conference will use the CPD-approved Evaluation Form (paper or online) for participants to evaluate the effectiveness of each session and the conference as a whole. Yes

11.2 Does the course design formally include opportunities for participants to receive feedback on their learning using a written test, touch pad, or test of skills acquired? Yes

* ***Optional Supporting documentation: Send a copy of the evaluation form indicating how feedback of learning will be undertaken.***

*** Please note that items 7.1, 7.2, 8.1, and 8.3 *must* be present with *supporting documentation* for CPD event approval.**

Note: Items 7.3 and 11.2 are not currently mandatory.

DECLARATION:

As the course planner I accept the responsibility for the accuracy of the information listed on this form

Signature of Chair of LOC

Date