

**PROPOSED REVISIONS  
TO  
ADA CERP RECOGNITION STANDARDS  
INFORMATION PACKET  
AND  
CALL FOR COMMENTS  
June 4, 2024**

**CALL FOR COMMENTS  
ON  
PROPOSED REVISIONS TO ADA CERP RECOGNITION STANDARDS**

June 4, 2024

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**Introduction**

The Commission for Continuing Education Provider recognition (CCEPR) invites you to participate in a call for comment on a draft of revised ADA CERP Recognition Standards (CERP Standards). Based on feedback from the communities of interest over the last few years, the Commission is proposing a comprehensive reorganization and revision of the CERP Standards, with the goal of modernizing, streamlining and clarifying the criteria for recognizing providers of continuing dental education.

This document provides background information on the revision process and an overview of the revised Standards which the Commission is proposing to replace the current ADA CERP Recognition Standards. The full text of the proposed revised ADA CERP Standards (also referred to as “new Standards”). We encourage you to review this document before submitting comments in the online survey.

Comments are requested by 5pm CDT, **August 2, 2024**.

## **Approach and overview**

The ADA CERP Recognition Standards were first adopted in 1992 with the establishment of the American Dental Association's Continuing Education Recognition Program (ADA CERP). Although the Standards have been updated periodically to address changes in continuing education such as new educational formats, the Standards have remained substantially the same since they were first released.

Over the last several years, the Commission for Continuing Education Provider Recognition, the ADA agency responsible for overseeing CERP Standards, has been engaged in a comprehensive revision of the Standards. The Commission has received feedback from surveys and meetings with stakeholders regarding the CERP Standards and application processes. The Commission has also learned from accrediting agencies for continuing education in other health professions, including Joint Accreditation for Interprofessional Continuing Education, identifying commonalities and best practices in accreditation and continuing professional education.

The goal of continuing dental education is to improve the knowledge, skills and ability of the dental professional to provide the highest quality of service to the public. In keeping with this, and the Commission's mission to serve the public and the profession by promoting excellence in CE, the proposed new Standards focus on the CE provider's role in developing education that has an impact on professional performance or improvements in oral health care, and that is based on the best available evidence.

In revising the CERP Standards, the Commission was guided by the following principles:

- Focus on criteria that are most relevant to the development and delivery of effective continuing education.
- State the requirements clearly and succinctly and provide a brief explanation of the rationale for the requirement.
- Follow a common-sense framework that reflects the sequence of planning and delivering CE.
- Align with similar accreditation requirements for CE in other health professions.

To streamline the Standards, the Commission focused them on the essential elements that define effective continuing education: activities that are designed to close identified gaps in knowledge or performance, content that is scientifically sound and free from commercial bias, and measuring the impact of the activity. The proposed new Standards state the minimum requirements for planning, implementing and assessing continuing education, with fewer criteria that prescribe how a CE provider should do this.

## **ACCME Standards for Integrity and Independence in Accredited CE**

A critical responsibility of CE providers is to protect the public by ensuring that continuing education is based on the best available science and is independent of commercial influence. The Commission believes that the Accreditation Council for Continuing Medical Education's (ACCME) Standards for Integrity and Independence in Accredited Continuing Education provide clear guidance for CE providers in the health professions on ensuring content validity and managing commercial conflicts of interest in CE. The Standards for Integrity and Independence have been adopted by eight CE accreditors representing multiple health professions. The Commission is proposing that ADA CERP adopt the Standards for Integrity and Independence in conjunction with the revised CERP Standards.

## **Next steps**

The Commission will review submitted comments at its meeting in September 2024. At that time the Commission will determine whether further revisions may be needed. If substantive revisions are made stakeholders may be invited to provide additional feedback. Once the Commission formally adopts revised CERP Standards, a transition plan will be announced. This will include an implementation period of one year before providers will be assessed for compliance with the new Standards. Application forms will be updated to reflect the new Standards. During the transition period, the current ADA CERP Standards will remain in effect.

## **Commenting on the revised Standards**

Communities of interest may submit feedback using the online survey.

For each of the five proposed new Standards and proposed new policies, the survey asks if the Standard or policy is clear as written, and whether there may be any challenges or unforeseen consequences associated with the requirement.

There is a space at the end of the survey to provide general comments.

**Comments are requested by 5pm Central Daylight Savings time on August 2, 2024.**

## Revised CERP Standards at a Glance

**Framework:** The 14 current CERP Standards were reorganized into five Standards reflecting the purpose, planning, implementation and assessment processes in which providers of continuing education engage. Consolidating criteria in this way helped to eliminate overlap between the Standards, and to highlight those attributes most relevant to the development and delivery of effective continuing education. To further streamline, many criteria in the current Standards that serve to describe how a provider must meet the requirements have been removed.

**Format:** Each of the new criteria is formulated as a succinct statement of a requirement. The criteria are formulated as a description of what a provider does to meet the requirement. For additional clarity, each criterion is usually followed by a brief statement of the rationale for the requirement. These 'intent statements' are not themselves requirements; they are provided as additional explanation, guidance, or suggestions regarding how to meet the requirement.

### Standards:

#### 1. Purpose and mission

Combines requirements from existing CERP Standards regarding the provider's purpose and mission for offering CE, how the provider periodically evaluates whether it is meeting its mission, how the provider uses this assessment to improve its programming to better meet its mission, and the administration of the program.

**New:** The provider's CE mission must be stated in terms of changes in professional skills or performance or patient outcomes which the provider aims to accomplish through its CE programming.

#### 2. CE planning

Consolidates criteria from several current Standards related to planning CE activities, including identifying knowledge or performance gaps, designing activities to bridge those gaps, and advertising CE activities.

**New emphasis:** When planning CE activities, providers must identify the desired change in professional knowledge or skills and design the activities to accomplish this, with an emphasis on active learning formats.

#### 3. Integrity and Independence

Combines current requirements to help ensure that CE activities have a sound scientific basis and are independent of commercial influence.

**New:** The proposed new CERP Standard would require providers to meet the ACCME Standards for Integrity and Independence in Accredited Continuing Education. The Standards for Integrity and Independence provide specific guidelines on steps to ensure that CE activities are developed and presented independent of commercial influence, and for managing relationships with commercial interests appropriately.

#### 4. Evaluation

Consolidates current requirements for evaluating CE activities into single requirement to evaluate the impact of the activity; evaluating other aspects of the activity would be optional.

**New emphasis:** Providers must analyze any changes in its learners' knowledge, performance or practice that resulted from the educational activity, changes the learners expect to make, and/or the impact on patients.

**5. Patient protection**

Required only if a CE provider offers courses in which patients are treated. Consolidates existing requirements for these types of courses.

**Policies:**

Several criteria in the current CERP Standards that relate to administrative practices an ADA CERP recognized provider is expected to maintain have been moved from the new Standards and reframed as policies. Providers seeking continued ADA CERP recognition would be expected to demonstrate that they comply with these policies.

- Periodic review of self-study activities
- Calculating credits
- Awarding credit
- Record keeping

For reference, the current ADA CERP Recognition Standards and Procedures can be accessed [here](#).

**Full text of draft revised CERP Standards**

The complete text of the proposed revised ADA CERP Standards and policies are presented in the second column on the following pages. The column to the left indicates current CERP Standards and Criteria related to the proposed new Standards.

# DRAFT OF REVISED ADA CERP STANDARDS

June 2024

Current Standard / Proposed Changes View <a href="#">current CERP Standards</a>	NEW STANDARD 1. PURPOSE AND MISSION
Standard I. Mission/Goals <ul style="list-style-type: none"> <li>Consolidate I.1, 2, 4, and Recommendations A-B</li> </ul>	<p><b>1.1. Provider’s CE mission</b></p> <p>The provider has a mission statement for its CE program which identifies the expected results of its CE programming in terms of changes in professional skills or performance, or patient outcomes.</p> <p><i>Intent statement/guidance:</i>  <i>A clearly defined CE mission statement can serve as a roadmap for the provider’s overall CE program. A mission statement may include information about the learners, educational methods and goals, but it must define what the program aims to achieve in terms of changes in professional skills or performance, or in terms of patient outcomes.</i></p>
Standard I. Mission/Goals <ul style="list-style-type: none"> <li>Combine I.5 and Standard IV.4. Evaluation</li> </ul>	<p><b>1.2. Overall program analysis</b></p> <p>The provider collects data and information on its CE program and analyzes the degree to which its CE mission is being met.</p> <p><i>Intent statement/guidance:</i>  <i>Gathering information and data about its overall CE program and conducting a periodic analysis of this information helps the provider to assess how effective its programming is in terms of improving professional knowledge, skills or practice, or patient outcomes.</i></p>
Standard IV. Evaluation <ul style="list-style-type: none"> <li>Relates to IV.3</li> </ul>	<p><b>1.3. Overall program improvements</b></p> <p>The provider identifies, plans and implements needed changes in the overall program in order to meet its CE mission.</p> <p><i>Intent statement/guidance:</i>  <i>Based on the data gathered about the provider’s CE programming and the provider’s analysis of whether it is meeting its CE mission, the provider may identify and implement changes to its CE program that will help it be more effective. Improvements might include changes in planners, planning processes, instructors, educational methods, educational resources, facilities, organizational support or structure, etc.</i></p>

<b>Current Standard / Proposed Changes</b> View <a href="#">current CERP Standards</a>	<b>NEW STANDARD 1. PURPOSE AND MISSION</b>
Standard IX. Administration <ul style="list-style-type: none"> <li>• Consolidate criteria IX.1, 2, 4, 5, 6, 7, 12;</li> <li>• Delete IX.8 and 9 (covered under new Standard on Integrity and Independence);</li> <li>• Move IX.10 into new policy on record keeping;</li> <li>• Delete IX.11 (covered under new Standard on Patient Protection);</li> <li>• Delete IX.13-14 (covered under existing Joint Providership Policy).</li> </ul>	<b>1.4. Program administration</b> <p>The provider has an identifiable, continuous administrative authority or individual with responsibility for administration of the provider’s CE program. The administrator is responsible for ensuring that the CE program meets the ADA CERP Recognition Standards and Procedures through an established planning, implementation, evaluation and record-keeping process.</p> <p><i>Intent statement/guidance:</i>  <i>Continuity of administration and planning is necessary for the stability and growth of the program. Written policies and procedures for planning, implementing the provider’s CE program will support continuity and compliance with the Standards.</i></p>
Standard IX. Administration <ul style="list-style-type: none"> <li>• Relates to IX.3;</li> <li>• Delete IX.16.</li> </ul>	<b>1.5. Advisory input in CE planning.</b> <p>The provider obtains input into the planning of its CE activities from health care professionals who are reflective of the target audience for which the provider’s CE activities are designed.</p> <p><i>Intent statement/guidance:</i>  <i>Objective input from professionals representative of the audience for which a provider’s activities are designed can offer insights and guidance regarding the profession’s educational needs and educational content. Providers may establish formal committees or advisory panels to provide this input, appoint qualified individuals to participate in the development of CE activities or provide peer review. These groups and/or individuals may also help the provider conduct its periodic self-assessment.</i></p>
X. Fiscal Responsibility <ul style="list-style-type: none"> <li>• Delete</li> </ul>	–
XII. Admissions <ul style="list-style-type: none"> <li>• Delete</li> </ul>	–

<b>Current Standard / Proposed Changes</b> View <a href="#">current CERP Standards</a>	<b>NEW STANDARD 2. CE PLANNING</b>
Standard II. Needs Assessment <ul style="list-style-type: none"> <li>Consolidate II.1-6 and Recommendations A-C.</li> </ul>	<b>2.1. Educational Needs</b> <p>The provider identifies the professional practice gaps (gaps in knowledge, skills, performance) of their learners and incorporates these educational needs into their CE activities.</p> <p><i>Intent statement/guidance:</i>  <i>Continuing education helps dental practitioners remain current in their professional knowledge, skills and practice in order to promote oral health and protect the public. CE providers should identify gaps between what dental professionals currently know or do and what is needed and desired in practice. Examples to document compliance might include but are not limited to:</i></p> <ul style="list-style-type: none"> <li>Course planning forms that include questions and information about the practice gaps to be addressed</li> <li>Surveys of target audience regarding performance gaps or barriers to practice</li> <li>Quality and safety assurance and improvement documentation</li> <li>Clinical guidelines</li> <li>Regulatory requirements</li> </ul>
Standard III. Objectives <ul style="list-style-type: none"> <li>Consolidate elements of III.1 and 3 with emphasis on the role of CE to improve professional performance and/or patient outcomes;</li> <li>Eliminate III.2, 4 and 5.</li> </ul>	<b>2.2. Designed to change</b> <p>The provider develops CE activities that are designed to change professional competence or performance, or patient outcomes.</p> <p><i>Intent statement/guidance:</i>  <i>As a next step in the planning process, the provider develops education that is designed to change learners' strategies/skills (competence), what learners actually do in practice (performance), and/or the impact on the patient or on the care delivered (patient outcomes). Written educational objectives articulate the desired results of an educational activity. They help direct the design of the activity and provide a framework for measuring the effectiveness of the activity.</i></p>
Standard VI. Educational Methods <ul style="list-style-type: none"> <li>Consolidate criteria VI.1, 2, 3, 4, 5, 7 with emphasis on appropriate educational design and active learning;</li> <li>Eliminate VI.8-10;</li> <li>Move VI.8.e. into new policy on Periodic Review of Self-</li> </ul>	<b>2.3. Educational formats</b> <p>The provider chooses educational formats for each CE activity that are appropriate for the setting, objectives, and desired results of the activity, and which promote active learning.</p> <p><i>Intent statement/guidance:</i>  <i>Activity formats (e.g., didactic, small group, interactive, hands-on skill labs) should be chosen based on what the provider hopes to change as a result of the education. Adult education literature provides guidance about which</i></p>

<b>Current Standard / Proposed Changes</b> View <a href="#">current CERP Standards</a>	<b>NEW STANDARD 2. CE PLANNING</b>
Study Activities.	<i>learning formats are more effective than others depending on the outcome that is desired, the setting, and the needs of the learners.</i>
Standard VII. Instructors <ul style="list-style-type: none"> <li>● Retain criterion VII.1;</li> <li>● Delete VII.7.</li> </ul>	<b>2.4. Instructor qualifications</b>  The provider chooses instructors who are qualified by education and experience to provide instruction in the relevant subject matter.
Standard VII. Instructors <ul style="list-style-type: none"> <li>● Consolidate VII.2, 4, 6</li> <li>● Delete VII.3 (refer to new Standard on Integrity and Independence).</li> <li>● Delete VII.5 (refer to new Standard 2.3)</li> <li>● Delete VII.8-9.</li> </ul>	<b>2.5. Instructor collaboration and communications</b>  The provider communicates and collaborates with the instructor regarding the educational needs, objectives, active learning formats, and assessments for the activity.
Standard XI. Publicity <ul style="list-style-type: none"> <li>● Retain most elements of XI.1;</li> <li>● Delete XI.2-7.</li> </ul>	<b>2.6. Publicity</b>  Publicity for the provider’s CE activities is informative and not misleading, and includes: <ol style="list-style-type: none"> <li>a. Name of the provider, and any joint providers</li> <li>b. Contact information for CE provider</li> <li>c. Description of course content</li> <li>d. Description of educational methods used</li> <li>e. Instructors’ names and qualifications</li> <li>f. Costs and refund policies</li> <li>g. Location, date and times (live activities)</li> <li>h. Release date and expiration date (self-study activities)</li> <li>i. Number of CE credits to be awarded</li> <li>j. Information on any pre-requisites</li> <li>k. ADA CERP recognition statement and joint providership statement when applicable</li> </ol> <p><i>Intent statement/guidance:</i>  <i>Publicity for CE activities must provide accurate information to the potential learners so that they may make informed decisions.</i></p>
Standard XIV. Record Keeping <ul style="list-style-type: none"> <li>● Combine XIV with Standard IX.10 in new administrative policies.</li> </ul>	[See proposed new policies at end of document.]

<b>Current Standard / Proposed Changes</b> View <a href="#">current CERP Standards</a>	<b>NEW STANDARD 3. INTEGRITY AND INDEPENDENCE</b>
Standard V. Commercial or Promotional Conflict of Interest	<p><b>3.0. Integrity and Independence</b></p> <p>The provider develops CE activities that comply with the <a href="#">Standards for Integrity and Independence in Accredited Continuing Education</a>, which includes the responsibility to:</p> <ol style="list-style-type: none"> <li>a. Ensure content is valid.</li> <li>b. Prevent commercial bias and marketing in accredited continuing education.</li> <li>c. Identify, mitigate, and disclose relevant financial relationships.</li> <li>d. Manage commercial support appropriately (if applicable).</li> <li>e. Manage ancillary activities offered in conjunction with accredited continuing education (if applicable).</li> </ol>
	<p><a href="#">ACCME Standards for Integrity and Independence in Accredited CE— Full Text</a></p> <p><b>Notes on terminology</b></p> <p><b>Ineligible company:</b> ADA CERP considers the ACCME term “ineligible company” as equivalent to the ADA CERP term “commercial interest,” defined as: (1) An individual or entity that produces, markets, resells or distributes health care goods or services consumed by, or used on, patients, or (2) an individual or entity that is owned or controlled by an individual or entity that produces, markets, resells, or distributes health care goods or services consumed by, or used on, patients. Providing clinical services directly to or for patients (e.g., a dental practice, dental lab, or diagnostic lab) does not, by itself, make an individual or entity a commercial interest. <b>Accredited:</b></p> <p><b>Accredited:</b> ADA CERP considers “accredited provider” as equivalent to “ADA CERP recognized provider,” and “accredited continuing education” as equivalent to CE offered by an ADA CERP recognized provider</p>
<p>CERP Eligibility Criterion 2 and Standard IX.8-9</p> <ul style="list-style-type: none"> <li>• Relates to CERP requirements to present content based on sound science, present known risks and benefits in order to protect the public.</li> </ul>	<p><b>Standard 1. Ensure Content is Valid</b></p> <p><i>Standard 1 applies to all accredited CE.</i></p> <p>Accredited providers are responsible for ensuring that their education is fair and balanced and that any clinical content presented supports safe, effective patient care.</p> <ol style="list-style-type: none"> <li>1. All recommendations for patient care in accredited continuing education must be based on current science, evidence, and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options.</li> </ol>

<b>Current Standard / Proposed Changes</b> View <a href="#">current CERP Standards</a>	<b>NEW STANDARD 3. INTEGRITY AND INDEPENDENCE</b>
	<ol style="list-style-type: none"> <li>2. All scientific research referred to, reported, or used in accredited education in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation.</li> <li>3. Although accredited continuing education is an appropriate place to discuss, debate, and explore new and evolving topics, these areas need to be clearly identified as such within the program and individual presentations. It is the responsibility of accredited providers to facilitate engagement with these topics without advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning.</li> <li>4. Organizations cannot be accredited if they advocate for unscientific approaches to diagnosis or therapy, or if their education promotes recommendations, treatment, or manners of practicing healthcare that are determined to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients.</li> </ol>
<p>CERP Standard V. Commercial or Promotional Conflict of Interest</p> <ul style="list-style-type: none"> <li>• Relates to CERP Standard V.1-2, 5, 10 requirements for ensuring CE is independent of commercial influence</li> </ul>	<p><b>Standard 2. Prevent Commercial Bias and Marketing in Accredited CE</b></p> <p><i>Standard 2 applies to all accredited CE.</i></p> <p>Accredited continuing education must protect learners from commercial bias and marketing.</p> <ol style="list-style-type: none"> <li>1. The accredited provider must ensure that all decisions related to the planning, faculty selection, delivery, and evaluation of accredited education are made without any influence or involvement from the owners and employees of an ineligible company.</li> <li>2. Accredited education must be free of marketing or sales of products or services. Faculty must not actively promote or sell products or services that serve their professional or financial interests during accredited education.</li> <li>3. The accredited provider must not share the names or contact information of learners with any ineligible company or its agents without the explicit consent of the individual learner.</li> </ol>
<p>Standard V. Commercial or Promotional Conflict of Interest</p> <ul style="list-style-type: none"> <li>• Relates to CERP Standard V. 9, 12-14 and requirements to identify and avoid conflicts of interest planners and instructors may have and to publish disclosures of relevant</li> </ul>	<p><b>Standard 3. Identify, Mitigate and Disclose Relevant Financial Relationships</b></p> <p><i>Standard 3 applies to all accredited CE.</i></p> <p>Many healthcare professionals have financial relationships with ineligible companies. These relationships must not be allowed to influence accredited continuing education. The accredited provider is responsible for identifying <b>relevant financial relationships</b> between individuals in control of educational content and ineligible companies and managing these to ensure they do not introduce commercial bias into the</p>

financial relationships.

education. Financial relationships of any dollar amount are defined as relevant if the educational content is related to the business lines or products of the ineligible company.

Accredited providers must take the following steps when developing accredited continuing education. Exceptions are listed at the end of Standard 3.

1. **Collect information:** Collect information from all planners, faculty, and others in control of educational content about all their financial relationships with ineligible companies within the prior 24 months. There is no minimum financial threshold; individuals must disclose all financial relationships, regardless of the amount, with ineligible companies. Individuals must disclose regardless of their view of the relevance of the relationship to the education. Disclosure information must include:
  - a. The name of the ineligible company with which the person has a financial relationship.
  - b. The nature of the financial relationship.
  - c. Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual’s institution receives the research grant and manages the funds.
2. **Exclude owners or employees of ineligible companies:** Review the information about financial relationships to identify individuals who are owners or employees of ineligible companies. These individuals must be excluded from controlling content or participating as planners or faculty in accredited education. There are three exceptions to this exclusion—employees of ineligible companies can participate as planners or faculty in these specific situations:
  - a. When the content of the activity is not related to the business lines or products of their employer/company.
  - b. When the content of the accredited activity is limited to basic science research, such as pre-clinical research and drug discovery, or the methodologies of research, and they do not make care recommendations.
  - c. When they are participating as technicians to teach the safe and proper use of medical devices, and do not recommend whether or when a device is used.
3. **Identify relevant financial relationships:** Review the information about financial relationships to determine which relationships are relevant. Financial relationships are relevant if the educational content

an individual can control is related to the business lines or products of the ineligible company.

4. **Mitigate relevant financial relationships:** Take steps to prevent all those with relevant financial relationships from inserting commercial bias into content.
  - a. Mitigate relationships prior to the individuals assuming their roles. Take steps appropriate to the role of the individual. For example, steps for planners will likely be different than for faculty and would occur before planning begins.
  - b. Document the steps taken to mitigate relevant financial relationships.
5. **Disclose all relevant financial relationships to learners:** Disclosure to learners must include each of the following:
  - a. The names of the individuals with relevant financial relationships.
  - b. The names of the ineligible companies with which they have relationships.
  - c. The nature of the relationships.
  - d. A statement that all relevant financial relationships have been mitigated.

**Identify ineligible companies by their name only.** Disclosure to learners must not include ineligible companies' corporate or product logos, trade names, or product group messages.

**Disclose absence of relevant financial relationships.** Inform learners about planners, faculty, and others in control of content (either individually or as a group) with no relevant financial relationships with ineligible companies.

Learners must receive disclosure information, in a format that can be verified at the time of accreditation, before engaging with the accredited education.

**Exceptions:** Accredited providers do not need to identify, mitigate, or disclose relevant financial relationships for any of the following activities:

1. Accredited education that is non-clinical, such as leadership or communication skills training.
2. Accredited education where the learner group is in control of content, such as a spontaneous case conversation among peers.
3. Accredited self-directed education where the learner controls their educational goals and reports on changes that resulted,

<b>Current Standard / Proposed Changes</b> View <a href="#">current CERP Standards</a>	<b>NEW STANDARD 3. INTEGRITY AND INDEPENDENCE</b>
	<p>such as learning from teaching, remediation, or a personal development plan. When accredited providers serve as a source of information for the self-directed learner, they should direct learners only to resources and methods for learning that are not controlled by ineligible companies.</p>
<p>Standard V. Commercial or Promotional Conflict of Interest</p> <ul style="list-style-type: none"> <li>• Relates to CERP Standard V.6-8 regarding managing commercial support;</li> <li>• Eliminates CERP Standard V.11 (CERP recognized providers are responsible for all CE content; see ACCME Standard 2 above).</li> </ul>	<p><b>Standard 4. Manage Commercial Support Appropriately</b></p> <p><i>Standard 4 applies only to accredited continuing education that receives financial or in-kind support from ineligible companies.</i></p> <p>Accredited providers that choose to accept <b>commercial support</b> (defined as financial or in-kind support from ineligible companies) are responsible for ensuring that the education remains independent of the ineligible company and that the support does not result in commercial bias or commercial influence in the education. The support does not establish a financial relationship between the ineligible company and planners, faculty, and others in control of content of the education.</p> <ol style="list-style-type: none"> <li>1. <b>Decision-making and disbursement:</b> The accredited provider must make all decisions regarding the receipt and disbursement of the commercial support.             <ol style="list-style-type: none"> <li>a. Ineligible companies must not pay directly for any of the expenses related to the education or the learners.</li> <li>b. The accredited provider may use commercial support to fund honoraria or travel expenses of planners, faculty, and others in control of content for those roles only.</li> <li>c. The accredited provider must not use commercial support to pay for travel, lodging, honoraria, or personal expenses for individual learners or groups of learners in accredited education.</li> <li>d. The accredited provider may use commercial support to defray or eliminate the cost of the education for all learners.</li> </ol> </li> <li>2. <b>Agreement:</b> The terms, conditions, and purposes of the commercial support must be documented in an agreement between the ineligible company and the accredited provider. The agreement must be executed prior to the start of the accredited education. An accredited provider can sign onto an existing agreement between an accredited provider and a commercial supporter by indicating its acceptance of the terms, conditions, and amount of commercial support it will receive.</li> <li>3. <b>Accountability:</b> The accredited provider must keep a record of the amount or kind of commercial support received and how it was used, and must produce that accounting, upon request, by the accrediting body or by the company that provided the commercial support.</li> <li>4. <b>Disclosure to learners:</b> The accredited provider must disclose to the</li> </ol>

<b>Current Standard / Proposed Changes</b> View <a href="#">current CERP Standards</a>	<b>NEW STANDARD 3. INTEGRITY AND INDEPENDENCE</b>
	<p>learners the name(s) of the company(ies) that gave the commercial support, and the nature of the support if it was in-kind, prior to the learners engaging in the education. Disclosure must not include the companies' corporate or product logos, trade names, or product group messages.</p>
<p>Standard V. Commercial or Promotional Conflict of Interest</p> <ul style="list-style-type: none"> <li>Relates to CERP Standard V.3, 4, 8 regarding marketing and sales activities in conjunction with CE activities.</li> </ul>	<p><b>Standard 5. Manage Ancillary Activities in Conjunction with Accredited CE</b></p> <p><i>Standard 5 applies only when there is marketing by ineligible companies or nonaccredited education associated with the accredited continuing education.</i></p> <p>Accredited providers are responsible for ensuring that education is separate from marketing by ineligible companies—including advertising, sales, exhibits, and promotion—and from nonaccredited education offered in conjunction with accredited continuing education.</p> <ol style="list-style-type: none"> <li>Arrangements to allow ineligible companies to market or exhibit in association with accredited education must not: <ol style="list-style-type: none"> <li>Influence any decisions related to the planning, delivery, and evaluation of the education.</li> <li>Interfere with the presentation of the education.</li> <li>Be a condition of the provision of financial or in-kind support from ineligible companies for the education.</li> </ol> </li> <li>The accredited provider must ensure that learners can easily distinguish between accredited education and other activities. <ol style="list-style-type: none"> <li>Live continuing education activities: Marketing, exhibits, and nonaccredited education developed by or with influence from an ineligible company or with planners or faculty with unmitigated financial relationships must not occur in the educational space within 30 minutes before or after an accredited education activity. Activities that are part of the event but are not accredited for continuing education must be clearly labeled and communicated as such.</li> <li>Print, online, or digital continuing education activities: Learners must not be presented with marketing while engaged in the accredited education activity. Learners must be able to engage with the accredited education without having to click through, watch, listen to, or be presented with product promotion or product-specific advertisement.</li> <li>Educational materials that are part of accredited education (such as slides, abstracts, handouts, evaluation mechanisms, or disclosure information) must not contain any marketing produced by or for an ineligible company, including corporate or product logos, trade names, or product group messages.</li> <li>Information distributed about accredited education that does</li> </ol> </li> </ol>

<b>Current Standard / Proposed Changes</b> View <a href="#">current CERP Standards</a>	<b>NEW STANDARD 3. INTEGRITY AND INDEPENDENCE</b>
	<p>not include educational content, such as schedules and logistical information, may include marketing by or for an ineligible company.</p> <p>3. Ineligible companies may not provide access to, or distribute, accredited education to learners.</p>

<b>Current Standard / Proposed Changes</b> View <a href="#">current CERP Standards</a>	<b>NEW STANDARD 4. EVALUATION</b>
<b>Standard IV. Evaluation</b> <ul style="list-style-type: none"> <li>● Consolidate IV.1-3;</li> <li>● Move IV.4 to new Standard 1;</li> <li>● Delete IV.5.</li> </ul>	<p><b>4. Analyze effectiveness of CE activities</b></p> <p>The provider analyzes changes in learners’ knowledge, performance or practice, and/or patient outcomes achieved as a result of the provider’s CE programs.</p> <p><i>Intent statement/guidance:</i>  <i>The provider uses evaluation tools for CE activities to assess learners’ achievement. The provider may evaluate any aspects of its CE activities that are relevant to its program, learners, setting, goals, etc., but it must at least use evaluation tools that will allow it to analyze any changes in its learners’ knowledge, performance or practice that resulted from the educational activity, changes the learners expect to make, and/or the impact on patients.</i></p> <p><i>Using this data and information gathered for all its CE activities, the provider will be able to analyze the impact of its overall CE program in terms of those changes.</i></p>

<b>Current Standard / Proposed Changes</b> View <a href="#">current CERP Standards</a>	<b>NEW STANDARD 5. PATIENT PROTECTION</b>
<b>Standard XIII. Patient Protection</b> <ul style="list-style-type: none"> <li>Consolidate XIII.1-9</li> </ul>	<p><b>5.0. Patient Protection</b></p> <p><i>Standard 5. Applies only to those providers that offer continuing education courses in which patients are treated. This includes courses in which the instructor or the learners perform procedures on patients.</i></p> <p>A provider that offers CE courses in which patients are treated has protocols and procedures in place to ensure patient safety, including the following:</p> <ol style="list-style-type: none"> <li>a. Ensuring that participants and instructors treating patients are in compliance with any applicable dental licensure laws in the jurisdiction where the course is being held;</li> <li>b. Ensuring that providers, instructors and participants have liability protection where required;</li> <li>c. Obtaining informed consent from patients;</li> <li>d. Informing patients in plain language of             <ol style="list-style-type: none"> <li>i. The training situation</li> <li>ii. The nature and extent of the treatment to be rendered</li> <li>iii. Any benefits or potential harm that may result from the procedure</li> <li>iv. Available alternative procedures</li> <li>v. Their right to discontinue treatment</li> <li>vi. The name and contact information for the clinician responsible for answering questions, addressing concerns, and providing any necessary completion of treatment and post-treatment care.</li> </ol> </li> <li>e. Ensuring aseptic conditions, sterile equipment and instruments in good working order, and access to emergency care.</li> <li>f. Assuming responsibility for competent completion of treatment, any necessary post-course treatment, and management of complications by a qualified clinician.</li> </ol>

<b>Current Standard / Proposed Changes</b> View <a href="#">current CERP Standards</a>	<b>PROPOSED NEW ADA CERP POLICIES</b>
Standard VI.8.e	<p><b>Policy on periodic review of self-study activities</b></p> <p>Providers that produce self-study activities must review each activity at least once every three years or more frequently if indicated by new scientific developments to ensure that content is current and accurate. Providers must publish the original release date of each self-study activity, the review date, and the expiration date on the self-study activity.</p>
Standard XIV.3	<p><b>Policy on calculating credits</b></p> <p>The provider designates credits for CE activities as follows:</p> <ol style="list-style-type: none"> <li>a. Credits are based on the actual length of instruction time, including Q&amp;A periods, and any mandatory self-assessment. Credits are not awarded for breaks, meals, registration periods or general business.</li> <li>b. Credits may be awarded in increments of fifteen minutes (0.25 credits per 15 minutes); no credits are awarded for activities that are less than 15 minutes in duration.</li> <li>c. Self-instructional activities are designated for credit based on a good faith estimate of the time an average participant needs to complete the activity.</li> </ol>
Combine Standard XIV.2 and 4.	<p><b>Policy on awarding credit</b></p> <p>The provider issues verification of CE credits earned to learners who complete a CE activity; the verification issued contains the following information:</p> <ol style="list-style-type: none"> <li>a. Name of the CE provider</li> <li>b. Name of the participant</li> <li>c. Title of the CE activity, including specific subjects if these are not included in the activity title</li> <li>d. Dates, hours and location of the CE activity (live activities) or the learner's completion date (self-study activities)</li> <li>e. Educational format of the activity (e.g., lecture, hands-on participation, live webinar, online self-study)</li> <li>f. The number of credits awarded (for large conferences or extended programs, the title of each session and the number of credits awarded for each are listed)</li> <li>g. The complete, authorized ADA CERP recognition statement, including information on filing complaints.</li> </ol>

<b>Current Standard / Proposed Changes</b> View <a href="#">current CERP Standards</a>	<b>PROPOSED NEW ADA CERP POLICIES</b>
	<p>Documentation must not resemble a diploma. Documentation must not attest, or appear to attest to specific skill, or specialty or advanced educational status. Providers must design such documentation to avoid misinterpretation by the public or professional colleagues.</p>
Standard IX.10 and XIV.1 and 5.	<p><b>Policy on record keeping</b></p> <p>The provider maintains accurate records of learners' participation in CE activities for a period of at least six years, and information on the planning and presentation of each course for the duration of its current ADA CERP recognition term. Maintaining accurate records of course participants helps the learners in the provider's activities meet their reporting requirements to regulatory agencies. Maintaining course activity files helps the provider meet its reporting requirements to ADA CERP, including the annual report, applying for continued recognition, and in the event of potential complaints.</p>