**CHAIR AGREEMENT**

**SCIENTIFIC PLANNING COMMITTEE**

**Activity Name: Activity Date: SPC Chair Name:**

**Affiliation/Department:**

*The SPC Chair assumes the overall responsibility for conforming to accreditation / certification standards, and for following the CPD Activity Planning Guide in developing and delivering the activity. Specifically, the role of the SPC Chair includes:*

1. Ensuring that the SPC is representative of the target audience;
2. Being accountable for the planning, development and implementation of the CPD activity;
3. Ensuring that all the educational content has scientific validity, integrity, objectivity and is evidence-based;
4. Ensuring accreditation / certification statements are not included in any promotion material until the activity has been approved. It is not allowed to indicate that credits are “pending” or have been “applied for”;
5. Being responsible for submitting the completed RCPSC MOC / CFPC Mainpro+ application form and all required documentation;
6. Abiding by all CPD Schulich Medicine & Dentistry [policies](https://www.schulich.uwo.ca/continuingprofessionaldevelopment/about_us/policies/index.html);
7. Collecting Conflict of Interest Disclosure Forms for all members of the SPC, speakers, moderators, facilitators and authors and ensuring all forms are reviewed by the SPC prior to the activity.
8. Ensuring that any potential conflicts of interest are managed in accordance with CPD Schulich Medicine & Dentistry *Policy on Conflict of Interest Disclosure & Management for Accredited Learning Activities*;
9. Ensuring that any collection of personal information for CPD activity purposes is in full compliance with the [Freedom of Information and Protection of Privacy Act](https://www.ontario.ca/laws/statute/90f31) (FIPPA);
10. Ensuring that all sponsors / exhibitors sign the Sponsorship Agreement prior to the CPD activity;
11. Submitting a summary evaluation report and complete list of participant names in electronic or print format to CPD Schulich Medicine & Dentistry within 30 days of the activity completion date; and,
12. Accepting responsibility for the accuracy of the information provided in response to the questions listed in the application and certifying that the CMA’s guidelines, entitled, *CMA Policy: Guidelines for Physicians in Interactions with Industry (2007)*, and National Standard for Support of Accredited CPD Activities have been met in preparing for this event.

Chair Signature: Date:

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