

# Hospice and Palliative Nurses Association

## ANCC Accredited Provider

### Standards for Integrity and Independence Disclosure Statement

#### To be completed by Nurse Planner or designee:

Name of Individual /credentials

\_\_\_\_\_

Title of NCPD Activity:

\_\_\_\_\_

Date and location of NCPD activity:

\_\_\_\_\_



#### Individual's prospective role(s) in NCPD activity

Identify the prospective role(s) that this person may have in the planning and delivery of this education (*choose all that apply*)

- ☐ Accredited Provider Program Director / Nurse Planner
- ☐ Content Expert
- ☐ Teacher, Instructor, Faculty
- ☐ Author, Writer
- ☐ Content Reviewer
- ☐ Other \_\_\_\_\_

As the nurse planner, content expert or faculty member or other, we ask for your help in protecting our learning environment from industry influence. Please complete the form below and return it to [tamaraf@HPNA.org](mailto:tamaraf@HPNA.org) By: \_\_\_\_\_

**The Standards for Integrity and Independence require that we disqualify individuals who refuse to provide this information from involvement in the planning and implementation of accredited continuing education.** Thank you for your diligence and assistance. If you have questions, please contact us at [Tamara Forrest, MSHA, BSN, RN](mailto:Tamara Forrest, MSHA, BSN, RN) email: [tamaraf@HPNA.org](mailto:tamaraf@HPNA.org).

#### To be Completed by Planner, Faculty, or Others Who May Control Educational Content

Please disclose **all financial relationships** that you have had in the past 24 months with ineligible companies (see definition below). For each financial relationship, enter the name of the ineligible company and the nature of the financial relationship(s). There is no minimum financial threshold; we ask that you disclose all financial relationships, regardless of the amount, with ineligible companies. You should disclose all financial relationships regardless of the potential relevance of each relationship to the education.

#### Enter the Name of Ineligible Company

An **ineligible company** is any entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

For specific examples of ineligible companies visit [accme.org/standards](http://accme.org/standards).

#### Enter the Nature of Financial Relationship

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 **MUST** be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies **MUST** be disclosed by the principal or named investigator even if that individual's institution receives the research grant and manages the funds.

#### Has the Relationship Ended?

If the financial relationship existed during the last 24 months, but has now ended, please check the box in this column. This will help the education staff determine if any mitigation steps need to be taken.

Example: ABC Company

Consultant

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In the past 24 months, I have not had **any** financial relationships with any ineligible companies.

**I attest that the above information is correct as of this date of submission.**

**Date** \_\_\_\_\_



#### Note for ANCC Accredited Provider Program Director or Nurse Planner

Use this template to collect all relevant financial relationships of prospective planners, faculty, and others who may control educational content before they assume their role in the education. As an alternative to collecting disclosure information for each activity, if your planners and faculty are a set group of individuals, you might choose to collect this information on an annual or periodic basis and ask the individuals to update if any information changes during the year.