Playing by the Rules

It is no secret that rules and regulations have taken over our world. I cannot think of one area of our personal or professional lives that is not regulated in some fashion by guidelines, laws, or rules of behavior that, by definition, bring some sort of consequence should we ignore them. Many regulations are good (like stopping at a red light), whereas others (no gum-chewing on the bus) are just plain silly. Most often, however, playing by the rules is the price we pay for keeping some order and sanity to our lives, even when keeping track of the rules and making sure we conform to them can seem like a job in and of itself.

Recently, two separate but related issues have emerged for our consideration. One is the issue of conflict of interest, specifically financial conflicts. The second is a newly minted set of guidelines from the Accreditation Council for Continuing Medical Education (ACCME) to ensure independence (from commercial support) of continuing education (CE) activities.

We have been talking for a while now about financial conflict of interest and why it needs to be our concern. The Oncology Nursing Society (ONS), in all of its endeavors, now takes great pains to ensure that the proper conflict-of-interest information is collected from its officers, staff, presenters at educational sessions, authors, and volunteers in all of their many capacities and then see that the relevant information is communicated to those participating in the educational event. Nurses have not had these concerns on their plates for very long. Only in the past four to six years have our awareness of the issues and commitment to raising standards in this regard become common. As editors, sometimes we struggle to get authors to disclose when a pharmaceutical company financially supports their writing. Most of the time, the failure to disclose is a result of lack of understanding rather than purposeful, but it is a problem nevertheless. Editors, reviewers, and, ultimately, readers deserve to know how a given article came to be and whether money was paid to an author directly or, more commonly, indirectly through the auspices of an editorial company. Some authors may be concerned that disclosure would result in manuscript rejection, but such is not usually the case. The knowledge simply becomes one piece of information that reviewers or readers can use to judge the integrity of the information being presented.

ONS is accredited as a CE provider by the American Nurses Credentialing Center’s Commission on Accreditation and the California Board of Nursing. The guidelines put in place for continuing medical education (CME) do not yet exist for nursing. Nevertheless, we need to pay attention to the new ACCME guidelines not because we are going to offer CMEs but because many of our CE sponsors will only support activities that conform to these guidelines regardless of whether we are providing nursing CE or CME credit. In other words, our CE programs must address the requirements of nursing accrediting agencies as well as conform to ACCME guidelines. Within ONS, this is an issue for the Education Cancer Care Issues Team and Publishing Division as well as Oncology Education Services, Inc., because all offer CE credit to those who read our publications and attend programs.

Most of the attention given to the ACCME guidelines will not be readily apparent to those attending educational sessions or reading our materials. Adherence to the guidelines will effectively take place behind the scenes. With the journal articles, you likely will notice increased attention to requests for specific disclosure when we plan to offer CE credit. Because the editor usually makes the decision regarding which articles should offer CE credit, we may need to choose based on an additional set of criteria. We also will need to begin work on formalizing these policies. Because much of the discussion surrounding financial disclosure has included education on what it is and why it is important, we likely will need to continue those efforts until the majority of oncology nurses understand the ramifications. Money offered by pharmaceutical companies to write an article and present at meetings is substantial and appealing to most nurses. Nurses should be presenting, writing, and reaping the financial benefits but understand the pitfalls and the individual’s rights and responsibilities when they agree to do the work. Many times, these arrangements are made without a real understanding on the part of the nurses involved. Fortunately, experienced editors usually can spot the articles submitted by nurses recruited by editorial companies, allowing them to address the issue proactively. Perhaps one day we will not have to police the situation so tightly.

Finally, because the guidelines address the proximity of advertising to articles covering the same subject matter, we also will need to ensure that the ONS Publishing Division staff in charge of placing ads between editorial content develop an even greater sensitivity than before as to what can be placed where. This is a formidable task for journals that enjoy the amount of advertising support that our publications do. It is the nature of rules that every good outcome comes with a price.

In the weeks ahead, the Society’s editors will continue to consult with the ONS staff as needed to ensure that we all understand the standards and help to ensure that the guidelines are applied equitably. As consumers and producers of the involved material, it behooves us all to become smarter and more sophisticated about these issues.