

International Healthcare Congress Guidelines

Seventh edition 2017

IPCAA Secretariat

🏠 Postfach 182
📍 CH-4013 Basel
☎ +41 61 821 31 33

🌐 www.ipcaa.org
✉ secretariat@ipcaa.org

Introduction

IPCAA has revised these Guidelines to help clarify some areas of congress organisation in view of the regulatory framework experienced by potential congress sponsors from the pharmaceutical industry.

The Guidelines serve to provide organisers with information on various aspects of congresses, particularly in the light of industry codes relating to hospitality aspects.

Essentially, all activities at medical meetings should be undertaken with regard to relevant regulatory and compliance frameworks currently in force. IPCAA's comments are based on the IFPMA (International Federation of Pharmaceutical Manufacturers & Associations) and EFPIA (European Federation of Pharmaceutical Industries and Associations) Codes and their latest revisions, but care should always be taken to check national and other relevant applicable codes. If national laws and/or codes are more restrictive they always prevail.

This formal document of IPCAA now appears in a seventh edition as amended in January 2017, and we hope the contents will continue to prove useful to everyone engaged in the organisation of medical congresses.

IPCAA

1. Preamble

1.1 The aim of these guidelines is to ensure the highest possible standards at medical congresses by providing guidance to congress organisers. IPCAA believes that congresses should have as its prime objective to exchange up-to-date scientific information and should be organised in a fair and professional way at a suitable venue (see section 7). The healthcare industry has an obligation to be strict in the application of the laws, codes and the relevant principles.

1.2 The pharmaceutical industry considers medical congresses an indispensable and effective platform for the dissemination of scientific knowledge and the exchange of experience in clinical research and development. Thus, the success of a medical congress will depend on a partnership between the organisers, the delegates and the Healthcare industry, which directly and indirectly funds the event. All will expect that the programme is of high scientific content, that participants meet their educational wishes and that the venue proves suitable scientific education.

1.3 IPCAA recognises that the organisation of medical congresses is a challenging and expensive undertaking. Fundraising to defray this expense is a legitimate right of congress organisers. The healthcare industry is one major source of such funds and – without wishing to influence scientific content – has the right as a partner to represent its views (through IPCAA) on the organisation of medical congresses and on the charges made for specific activities.

1.4 Individual medical congresses should be seen as self-supporting, financed, for example, through registration fees, sale of exhibition space, advertisements, sponsoring of symposia and surplus funds from previous congresses. Any retained (surplus) funds raised, directly or indirectly, by the healthcare industry should be transparent to supporting company. The Medical Society / PCO (Professional Congress Organizer) should be prepared to disclose those surplus funds upon request of main sponsors. Sec. 4.14 herein below prevails, if the HCO (Healthcare Organization) / PCO prefers an audited statement of account.

1.5 Each supporting company shall document and disclose transfers of value it makes, directly or indirectly, to or for the benefit of an HCO or Healthcare Professional (HCP) i.e. EFPIA Disclosure Code, Art. 1, section 1.01.

1.6 Those medical societies, which organise their congresses through a core PCO, permanent secretariat, management company etc., will arguably find it easier to interact with supporting companies than those societies that rely solely on an ad hoc organising committee.

1.7 IPCAA recommends that, when organising committees are appointing a Professional Congress Organizer (PCO) to manage the meeting, only professional, experienced, internationally recognised companies with suitable financial assets are considered. It is also critical to the smooth development of the meeting that the PCO is appointed at the early planning stage and if possible on a contract of several years to ensure that good business procedures are

followed and to secure continuity of approach. The appointed PCO carries the same obligations as the medical society when acting in their place.

1.8 It is encouraged that the scientific society meets at least once annually with IPCAA and other industry representatives, to maintain an appropriate level of communication.

2. Programme

2.1 The scientific programme is of paramount importance at all medical congresses. This would usually be composed of independent keynote lectures, plenary sessions, free communications and poster sessions, all of which should be integrated into the congress programme. The official congress language for international events must be English.

Satellite symposia and sponsored educational sessions should also be an integral part of the scientific programme.

2.2 The supporting companies are prepared to pay for the opportunity to hold a satellite symposium or to sponsor a symposium during the congress. Items such as room rental fees, slide, computer and/or video projection, sound amplification and competent technical assistance (in English) should be included in this cost.

2.3 Inserts in congress bag, marketing on congress website, push notification from congress apps, mailing to all pre-registered delegates prior to congress, posters displayed onsite, invitations distributed onsite, etc. should serve only to inform about scientific aspects of the congress.

2.4 Organisers should ensure that there is no duplication of scientific content throughout the course of a congress.

2.5 Every effort should be made to increase reach of the educational programme of the Medical Society through digital channels.

2.6 Free communication and poster sessions are an important part of the scientific programme and are considered the responsibility of the organising committee. Details of each presentation should be included in the programme book, and summaries included in the book of abstracts.

2.7 The congress organisers are asked to ensure that speakers at all sessions (including satellite symposia) are neither double booked nor have overlapping commitments.

2.8 In addition, speaker arrangements proposed by congress organisers on behalf of industrial sponsors should be subject to review and approval by the sponsor due to the fact that company-guidelines may be more stringent than those of the congress.

3. Honoraria and inducements

Other than honoraria to speakers and symposium chairmen, no monetary payments or other inducements should be made to congress attendees unless they relate to the reimbursement of reasonable accommodation and travel expenses, always provided these do not conflict with national laws and regulations.

4. Industry Collaboration

4.1 The medical societies, resp. their organising committees are strongly encouraged to provide a formal sponsorship bid document (the prospectus) well in advance of any request to the healthcare industry (or other sponsors) for financial support. This document should be produced by the secretariat of the medical society or the responsible PCO, and should include a statement of the objectives of the congress from a scientific, educational and financial perspective.

4.2 The evolution of regulatory codes not only has implications for congress organisers in terms of hospitality etc. to be offered but has also led to more complex approval processes within corporate organisations of the supporting companies. Medical societies and their PCOs, are advised to reflect the need for lengthier decision-making procedures in their congress planning schedules.

4.3 The industry sponsorship guidelines/prospectus (the prospectus) should show the demographics of previous events, with delegate attendance split by country and medical speciality and expected attendance at the meeting for which sponsorship is sought (also see 11.2).

4.4 The prospectus should provide itemised costs of satellite symposia, exhibition space and any other support opportunities which are available. The sale of 'packaged' activities leading to gold and silver sponsorship levels is definitely discouraged and transparent itemized costing should be provided. Where organisers wish to recognise major sponsors with gold and silver awards, this should be calculated on the comparative total value of each sponsor's activities. IPCAA believes that it is in the common interest to keep the costs of medical congresses within acceptable limits.

4.5 The prospectus should clearly state the pre-payment policy, which includes a reasonable deposit and payment schedule. Financial implications due to Force Majeure must be made transparent to supporting companies for the purpose of calculating appropriate refunds. Reasonable cancellation policies should apply to supporting companies related to satellite symposia slots, exhibition space and any other sponsorship items. Except in exceptional circumstances, all prices and invoicing should be in the currency of the host country. All agreements should be covered by legally binding contracts and there should be absolutely no option for the medical society / PCO to change anything at its sole discretion.

4.6 The organisers should indicate the Continuing Medical Education (CME) credit status of the scientific components of the meeting along with the name of the awarding body.

4.7 Supporting companies apply for their own activities to be CME accredited. This needs to be considered in the over all CME application by the medical society / its PCO. Current guidelines, laws and policies must be adhered to.

4.8 Medical Societies should collaborate with industry on maximising digital opportunities of Industry participation.

4.9 When appropriate, the prospectus should provide an outline of the Value Added Tax (VAT) recovery procedures in the country in which the meeting is being held, as well as the country where invoices will be generated.

4.10 The prospectus should also detail any visa requirements, visa restrictions, health warnings and other aspects, which may affect a significant proportion of potential participants.

4.11 As legislation, regulations and industry self-regulatory codes governing the promotion of medical products vary from country to country, the prospectus should outline any specific rules that will affect the activities of sponsoring companies, particularly with reference to exhibition activities.

4.12 It is considered good business practice that the prospectus should indicate how any residual funds arising from the meeting will be distributed. This should include any support given to the host organizing medical society.

4.13 As a principle, IPCAA discourages any agreements, which give unfair advantage to individual sponsors with similar financial involvement. Level of sponsorship shall be a more important measure of involvement than the identity of the supporting company.

4.14 It is now established practice, for the organising party to share their financial and budgetary objectives with prospective sponsoring companies well in advance of the congress, and publish an audited statement of accounts within 6-12 months of the end of the congress. This statement of accounts should be made available to the supporting companies.

4.15 Where point systems are operated to prioritize sponsorship allocations, these should be transparent and consistent within the society; the system should result from consensus with industry sponsors. A point system is strongly encouraged as it creates transparency over how the sponsorship items are allocated.

4.16 Medical societies / congress organisers should not have influence or financial interest in independent closed meetings organised by individual companies, providing these do not conflict with the official programme.

5. Exhibitions

5.1 As indicated in paragraph 7.2, the area allocated to exhibitions should be in an appropriate location with convenient access to and from the main congress areas; the exhibition should be planned as an integral and educational part of the

congress. In addition, it is considered appropriate for exhibit parameters to be decided in collaboration with supporting companies.

5.2 The medical society/PCO should arrange a site visit well in advance of the event and invite all exhibiting companies. The exhibition regulations and floor plan should be distributed to all interested parties at least one month prior to the congress.

5.3 It is the responsibility of the medical society/PCO to produce a detailed exhibitor's manual at least nine months prior to the event. In addition to accurate floor plans, this document should include contact details of the nominated contract person(s) and an outline of any country-specific regulatory issues, which may affect promotion at a medical exhibition. Details of appointed customs brokers, etc. must also be provided.

5.4 Material displayed on exhibition stands – whether pharmaceutical information, equipment, devices, or items for free distribution – should comply with the international codes of practice and the healthcare regulations of the host country. Guidance should be provided in the exhibitors' manual.

5.5 The cost of exhibition space should bear a relationship to the price charged at recent similar medical congresses at the same (or similar) venue.

5.6 Services provided – such as electricity supply, TV monitors, telephone lines, including wireless internet access etc. – should be of an acceptable international standard and should be charged at a price compatible with the standard rates in the relevant city.

5.7 Exhibitors should be issued with a reasonable quantity of complimentary exhibition passes according to size of booth for their sales and technical staff to man the exhibition stands. Company staff with delegate badges (granting full access to the congress) should also be allowed on the exhibition floor according to the same rules applied to exhibitor badges.

5.8 Where local regulations on access to exhibit for non-prescribers exist, organisers must ensure that non-prescribers are clearly marked on the badge.

Organisers should also create a special industry category allowing the appropriate access for company representatives.

5.9 Adequate secure and convenient on-site storage should be provided for exhibitors, with access guaranteed during the opening hours of the exhibition. In recognition of the international aspects of these events, off-site truck parking should be provided for the duration of the meeting.

5.10 A minimum build-up period of 48 hours (24 hours for breakdown) should be allowed, with good access for loading and unloading guaranteed. Where organisers sell individual exhibition space in excess of 100 sq. m. it should be recognised that build-up period of more than 48 hours will be required.

5.11 Space allocated to exhibition use should be provided with adequate fire fighting facilities, emergency exits and corridors between the exhibits to allow rapid evacuation. This and the provision of 24-hour security is the responsibility of the exhibition organiser.

5.12 If the organisers of the exhibition are contractually obliged to use contract suppliers (such as catering), it is their duty to negotiate fair and reasonable prices for the provision of those services, which should be of an internationally satisfactory level.

5.13 While use of the exhibition area for modest catering and coffee breaks is considered acceptable, no other events – such as opening ceremonies, receptions etc. should take place within the exhibit area.

6. Registration package

Personal Data of delegates shall be collected for the purpose of a specific congress only. Any further use of the data is subject to the written permission of the delegate. Any further local laws on data privacy remain unaffected.

Delegate registration fees should include:

- Congress apps / bag (or similar) containing the programme, abstract book, etc.
- ID badge
- The right to attend all lectures and exhibitions
- Public transport vouchers or a shuttle bus service if appropriate
- Official Opening session (must reflect the scientific / educational spirit of the congress)

And exclude:

- Other activities (which should be charged to the individual separately)
- Gifts and mementoes
- Tours of any kinds

7. Venue and City

7.1 The congress venue should be chosen with care, taking into account the range of facilities available, in particular the capacity of both the congress hall, a sufficient number of appropriate quality hotel rooms, at prices which reflect compliance requirements, accessibility (no more than one hour from a major international airport, with easy and rapid transfer), security, cost and local infrastructure. Careful consideration should thus be given to the choice of venue. The personal security of all attendees should be a critical consideration in the venue selection process.

7.2 Exhibition halls and rooms for sponsored symposia should be within convenient access of the main congress areas and should be an integral part of

the main congress location. Adequate freight handling facilities and access must be available. Tents and similar temporary structures are not acceptable.

7.3 The venue should provide up-to-date audio-visual equipment as well as WLAN and competent technicians (English speaking).

7.4 The location of the congress should support a truly international scientific programme. Before committing to any location, consideration should be given to the host country regulations and guidelines to ensure these do not unduly limit the participation of individuals, or unduly limit activities of supporting companies.

8. Housing

8.1 It is acknowledged by those involved in congress organisation that in many cases there is a substantial shortfall of adequate hotel accommodation in most of the cities chosen to host medical meetings. It is also recognised that the development of an organised procedure to deal fairly with the issue is not straightforward.

8.2 There are a number of actions that can be taken to resolve some of the difficulties associated with congress housing:

- A suitably qualified PCO/Destination Management Company/Convention Bureau should be appointed by the organising committee before any agreements with hotels and sponsors are made.
- At the time of preparation of the bid, the bidding medical society resp. its PCO should aim to reserve at least 70% of their total estimated room requirements. These should be confirmed once the bid is accepted. Such a move would help prevent third parties taking advantage of the rooming situation – which often leads to rapid price escalation and disadvantages to the congress and its sponsors.
- The organising committee/PCO should state any procedures they have developed to deal with demand for rooms which exceeds the capacity of the host city.
- The PCO should be able to easily identify those delegates who receive multiple invitations and have in place a system, which reduces to a minimum the impact of this practice on accommodation.
- Supporting companies should be advised to request their block booking as early as possible. The PCO should promote available accommodation to likely sponsors and other groups in a fair and transparent manner.
- The PCO should accurately describe the quality and standard of hotels in accordance with the standard terminology of the Pharmaceutical and other Healthcare Industry Codes.
- Hotel pricing should reflect the high number of rooms secured by a congress planner in a given city. In addition, there should be adequate transparency to demonstrate that an appropriate discount from the published hotel rack rates has been negotiated. Any charge for a hotel

room, which is above the published rack rate, is considered unacceptable.

- Hotels should guarantee the contracted choice of rooms. In case of changes, only hotel rooms of the same quality are acceptable and not without written notification and acceptance by the supporting company.
- No additional charges, penalties etc. are to be levied for any changes to rooming lists up to the final agreed cut-off date.
- Supporting companies should not be required to commit to occupying hotel rooms for the full duration of the congress. If this condition is not manageable by hotels, then it should be compensated by negotiation of higher discounts to reflect the obligation placed on supporting companies to pay for more accommodation than they effectively require.
- The congress should make the published room rates at the congress transparent to supporting companies by issuing price bands for the different hotel categories. In addition, complete transparency on hotel charges is recommended, disclosing the extent of any price surcharges above the amount received by the hotels, and detailing all parties with any financial interest in the final room prices. This is an increasingly essential requirement, in view of increasing regulatory constraints and conditions on the healthcare industry and other healthcare firms. Invoices produced should fully reflect this transparency requirement.
- Supporting companies should be given the opportunity to state their preference amongst all available hotels, in the allocation process.
- PCOs should negotiate well in advance with hotels the best possible conditions regarding cancellation and refunding policies.
- The cancellation clauses should reflect those imposed by the hotels.

No-Shows

Hotels should make every effort to resell cancelled rooms to other congress participants / customers. They should inform the original contract partner on the progress made. In the event that the hotel or organiser is able to resell the cancelled rooms, the supporting company should receive full credit for these rooms.

Contracting and deposits of rooms

- The recommended terms for contracting and deposits are:
 - Companies should be able to commit to their expected allotment as early as possible.
 - Companies may be expected to pay deposits up to 10% of the expected volume at time of contract.
 - Remaining cost (up to a total of 90% prepayment) should be paid according to hotel contracts. The remaining amount of the total costs should be paid within 30 days after final reconciliation of hotel's statements.

- After the congress the deposit less costs of any no-shows or non-settled bills is returned to the company.
- It is preferable if sponsors are given direct access to the contracted hotel(s) for communication purposes.

9. Hospitality

9.1 Hospitality provided (directly or indirectly) to HCPs must be limited to registration fees, travel expenses, meals and overnight stay.

9.2 Hospitality shall not include sponsoring or organising sporting or leisure events (e.g. sporting events, museum visits, concerts etc.).

9.3 Hospitality shall not include sponsoring or organising entertainment events (e.g. sightseeing tours before, during or after a congress, theatre, concerts)

9.4 It is recommended to check the rules prevailing under applicable national codes.

9.5 Any events, arranged by the organising committee or a supporting company, should be modest and secondary to the main purpose of the congress.

9.6 No industry funds should be used to finance social events in any aspect.

9.7 It is inappropriate for either the congress organiser or the healthcare industry to encourage tourism.

10. Print and electronic media

10.1 Organisers of a satellite symposium should have the right to choose their own publishers, reporters, photographers and other technicians for the production of material which relates to that symposium.

10.2 The congress logo may be of benefit to supporting companies in publications and other material dependent on the congress. Any charges made by the medical society/PCO for use of the logo should relate only to the costs of reproduction.

11. Evaluation

11.1 The congress organiser should make time available for a review and evaluation meeting with supporting companies before the close of the congress. It would be useful for the local PCO of the next congress to be present. The timing of this meeting should be announced in good time prior to the beginning of the congress.

11.2 The congress organisers should provide to all supporting companies within one month of the conference ending a set of statistics which include delegate demographics in an anonymous way, including details by speciality, geographic

distribution, and history of attendance. The results of any survey measuring delegates' satisfaction with the congress should also be shared with industry sponsors.

12. Additional Guidance

- AC Forum
- Biomed Alliance
- EFPIA Code on the Promotion of Prescription-Only Medicines to, and Interactions with, Healthcare Professionals
- EFPIA Code on Disclosure of Transfers of Value from Pharmaceutical Companies to Healthcare Professionals and Healthcare Organisations
- EFPIA e4ethics (online pre-assessment platform)
- HCEA - Guidelines for International Healthcare Exhibitions and Congresses
- HCEA - Guidelines for U.S. Healthcare Conventions
- HCEA - Guidelines for Scientific Exhibits and Poster Displays: Application, Production and Presentation
- IFPMA code of practice
- IFPMA Note for Guidance on Sponsorship of Events and Meetings

