

## Best Practices for Inclusive CME Activity Planning

Aligning with Prisma Health's mission "to be the difference," this document outlines best practices for incorporating inclusivity across demographic and professional dimensions when selecting activity planning committee members, speakers, panelists, and selection committees. It also provides guidance for speakers on inclusive content development and delivery to enhance the learning experience.

### Planning Committee Selection:

- Incorporate representation from diverse backgrounds across interprofessional roles, specialties, perspectives, experiences, sex, gender, race/ethnicity, age, ability, and other identity groups.
- Include individuals who possess shared experiences, backgrounds, and identities representative of the target audience(s).
- Actively engage and empower committee members from different professional roles and backgrounds in decision-making to address the needs of the target audience(s).
- Avoid inviting owners/employees whose primary business is producing, marketing, or selling healthcare products.

### Speaker/Panelist Selection:

- Develop topics and objectives reflecting interprofessional and diverse backgrounds and perspectives.
- Balance internal and external speakers to showcase diverse perspectives.
- Encourage speaker/panelist suggestions from committee members and professional networks.
- For panels, ensure representation across interprofessional roles, specialties, experiences, perspectives, sex, gender/ethnicity, race, age, ability, and other identity groups.
- For conferences, consider issuing a call for proposals, and encouraging applications based on identified topics.

### Selection Committee:

If a call for proposals is made:

- Consider anonymizing paper/proposal submissions to reduce bias.
- Include a selection committee that is professionally and demographically diverse.
- Develop an objective rubric to assess and select proposals/papers.

### Content Development & Delivery:

When guiding speakers on topics, content, and delivery for the upcoming activity encourage them to consider the following:

- **Content Development**
  - Incorporate inclusive language, including gender-neutral language and terminology that would be appropriate for various marginalized populations.
  - Include broad representation across educational materials, slides, videos, and learning content.
  - Use diverse and inclusive imagery reflecting the patient and provider population characteristics.
  - Specify study demographics for pre-clinical and clinical research (i.e. sex, gender, race/ethnicity, age, including animal/cell lines, etc.).
  - Avoid bias, stereotypes, microaggressions, or inappropriate clichés related to providers or patients.
- **Content Delivery**
  - Disclose if demographics are not identified in the research.
  - Include different learning styles (i.e. visual, tactile, etc.) and modalities.
  - Consider active learning strategies (i.e. group discussions, case studies, role-playing, simulations, problem-solving).
  - Allow both individual and group discussions.
  - Make content/educational materials available prior to delivery.

By following these best practices, CME activities can promote inclusivity, address diverse perspectives, and enhance the learning experience for all participants. **For questions or support, contact the CME office at [CME@PrismaHealth.org](mailto:CME@PrismaHealth.org).**