



Faculty Guidelines and Responsibilities for Continuing Education (CE) Activities

Live (In-Person) Events and Webinars

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Thank You!

WELCOME!

Great Valley Publishing (GVP) Company's magazines and associated media properties provide up-to-date information, important continuing education credits, and current career opportunities to our influential audiences of health care professionals. Our titles include ***Today's Dietitian (TD)***, ***Today's Geriatric Medicine (TGM)***, ***Social Work Today (SWT)***, ***Radiology Today (RT)***, and ***For the Record (FTR)***.

GVP strives to provide timely and engaging CE activities to every member of the health care team. It is our objective to offer CE activities that will improve practitioners' knowledge and skills in their focus areas, with the goal of achieving improved patient outcomes resulting in the advancement of overall human health.

We are pleased that you will be working with GVP to develop CE activity materials. To bring the highest quality learning opportunities to our audiences, GVP asks all faculty to read the following guidelines closely.

ACTIVITY PLANNING & DEVELOPMENT

The Five Phases

Phase 1 - Eligibility/Initial Planning

Faculty will be provided with:

- Introductory details about and working with the CE team (for review)
- An overview of the process we use to protect the integrity and independence of accredited CE activities (for review)
- Disclosure Form (required to complete): As a Jointly Accredited (JA) provider, we appreciate your help in partnering with us to follow accreditation guidelines and helping us create high-quality education that is independent of industry influence. As someone who will be able to control the educational content of an accredited CE activity, we ask that all faculty disclose all financial relationships with any ineligible companies that you have had over the past 24 months. “Ineligible companies” are defined as those whose primary business is “producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.”
- Faculty Agreement (required to complete)

Phase 2 - Activity Planning

Upon completion of the disclosure review process, faculty will be provided with the following:

- Invitation to and date/time options to schedule a kickoff call with appropriate GVP CE Team Staff (required to complete)
- GVP PowerPoint Template (to use for your presentation)
- Additional information (if applicable)

Phase 3 - Content Review and Development

- The CE Team will review all session materials for compliance with accredited education requirements, formatting, organization, clarity, relevance, and quality of content.
- Your content will also be evaluated by an external peer reviewer(s) who is also a health care professional in the field your content addresses (e.g., nutritionally focused activities will be reviewed by a Registered Dietitian).
- Feedback from the CE Team and the external reviewer will be shared in the form of comments within your materials, contained as an attachment in an email. You may or may not be required to make modifications.
- Once all modifications are made, the final version of the PowerPoint/materials will be sent to you for review and approval.

Phase 4 - For Webinars, the Practice Run

- GVP uses Zoom Webinar to deliver live webinars.
- The CE Team will schedule a time and date at least 2 days but not more than 2 weeks ahead of the live event date to review and test the platform, video/screensharing (if applicable), and sound to ensure the setup is appropriate and technology is working as expected.

Phase 5 - the Live Event

- For live webinars:
 - The CE Team and faculty will meet online about 15-20 minutes before the scheduled start time of the live show. Final modifications to technology – sound and/or video – will be made. Modifications to your PowerPoint are not possible at this time, so it should be final well *before* the live show.
 - A recording of the webinar will be posted on the CE Learning Library website within 5 business days of the live event.
- For in-person, live events:
 - Faculty can access their session room no more than 15 minutes before the scheduled start time of the activity.
 - PowerPoint presentations are pre-loaded onto the PC that is housed in your session room.
 - There is **not** an opportunity to use your own computer for live events, as our agenda and technological set up does not allow for swapping computers in/out.
 - Your session may or may not be recorded for use later/posting to the CE Learning Library.

The Standards for Integrity and Independence in Accredited Continuing Education

GVP upholds the Joint Accreditation's [Standards for Integrity and Independence in Accredited Continuing Education](#) in all our continuing education activities. The Standards are designed to ensure accredited continuing education provides health care professionals with accurate, balanced, evidence-based information that supports safe and effective patient care.

GVP strictly adheres to and enforces the guidelines, and we exceed our audiences' expectations by guaranteeing that our accredited continuing education makes care and treatment recommendations that are based on science, not marketing.

As such, GVP will remove all instances of promotion, including but not limited to: product, services, or material promotions; product-specific advertisements; use of trade names, logos, and product group messaging; and any other items we deem to be promotional in nature.

CONTENT DEVELOPMENT

Activity Content

As a health care practitioner, and just as you would with a client or patient, be mindful of your responsibility as a contributor to the education of the GVP audience. Please ensure that clinical care recommendations are based on evidence that is accepted within the standard of care of the health care professions.

Educational content must be fair and balanced, and any clinical content presented must support safe, effective patient care. This includes the expectations that:

Ensure Content is Valid

- All recommendations for client/patient care in accredited continuing education must be based on current science, evidence, and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options.
- All scientific research referred to, reported, or used in accredited education in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation.
- Although accredited continuing education is an appropriate place to discuss, debate, and explore new and evolving topics, these areas need to be **clearly identified** as such within the program and individual presentations. It is the responsibility of GVP to facilitate engagement with these topics without advocating for or promoting practices that are not or not yet adequately based on current science, evidence, and clinical reasoning.
- Content cannot be included in GVP CE programming if it advocates for unscientific approaches to diagnosis or therapy, or if the education promotes recommendations, treatment, or manners of practicing health care that are determined to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients.

Best Practices for Presenting Clinical Content in Accredited CE:

- Clearly describe the level of evidence on which the item being discussed is based and provide enough information about data (study dates, design, etc.) to enable learners to assess research validity.
- Ensure that if there is a range of evidence, the credible sources cited present a balanced view of the evidence.
- If clinical recommendations will be made, include balanced information on all available therapeutic options.
- Address any potential risks or adverse effects that could be caused with any clinical recommendations.

Best Practices for Discussing Evolving Topics, Treatments with Low/No Evidence Base:

- Facilitate engagement with these topics without advocating for or promoting practices that are not, or not yet adequately based on current science, evidence, and clinical reasoning.
- Construct the activity as a debate or dialogue. Identify other faculty who represent a range of opinions and perspectives; presentations should include a balanced, objective view of research and treatment options.
- Teach about the merits and limitations of a therapeutic or diagnostic approach rather than how to use it.
- Identify content that has not been accepted as scientifically meritorious by regulatory and other authorities, or when the material has not been included in scientifically accepted guidelines or published in journals with national or international stature.

- Clearly communicate the learning goals for the activity to participants (e.g., “This activity will teach you about how your patients may be using XX therapy and how to answer their questions. It will not teach you how to administer XX therapy”).

Addressing Practice Gaps

A practice gap refers to a problem that exists in practice or an opportunity for improvement in at least one of the following areas:

- Knowledge (does not *know*)
- Skill (does not *know how*)
- Practice (does not *do*)

Practice gaps are the building blocks of a CE activity in that they form the foundation to its justification, design, implementation, and assessment. These can be clinically-based, professional (e.g., leadership skills), patient care problems, or any similar areas in which learner improvement is necessary.

The practice gap statement should be included throughout your presentation as you seek to educate your audience. As you identify the practice gaps for your presentation, consider the following:

- Identify the gap in practice/underlying educational need the activity will seek to **resolve**
- State **why** the issues/problems exist
- Discuss **how** the activity will move learners from current practice (what is happening) to best practice (what *should be* happening)
- Link to the activity’s learning objectives and state the **desired outcomes** in terms of enhancing competence, performance, and/or patient outcomes

Note: For Interprofessional Continuing Education (IPCE) activities (i.e. those that include health care professionals from more than one profession), you must include the challenges/barriers members of the health care **team** may face when either incorporating or executing a team-based approach to achieve the desired state of practice this activity intends to achieve.

Tip: Identify the knowledge, skills, and or strategies members of the health care team need to adopt to work effectively together and to better serve the needs of patients.

Developing Measurable Learning Objectives

Your CE materials should be designed to help learners achieve identified Learning Objectives, which are the desired outcomes of the educational activity. The Learning Objectives should reinforce the main points of your activity and seek to impart knowledge of the disease, condition, or subject, and describe the change in the level of competence, performance, and/or patient outcomes. You should have at least three but no more than five learning objectives.

Keep the intended outcomes in mind when developing your activity content. The Learning Objectives should clearly state what the learner will be able to do upon completion of the activity and be designed to close the practice gap you assigned to your activity. Learning Objectives should:

- Be written to complete the following phrase: “After completing this continuing education course, health care professionals will be better able to...”
- Be stated in measurable terms.*
- Be practical and relevant to the learners’ expected scope of practice.
- Address potential barriers to implementing the learned material and strategies to overcome those barriers.

Be sure to use measurable, action-oriented words when expressing the Learning Objectives. Refrain from using verbs such as “understand” or “learn,” as these verbs are not measurable.

Example: For an activity on the management of IBS, the Learning Objectives might include:

1. Explain how diet may be a trigger or a therapy for IBS, impact changes in gut flora, and microbial-derived metabolites.
2. Describe how FODMAPs impact luminal distention via osmotic and fermentative effects.
3. Counsel clients on how to implement a low FODMAP elimination and re-introduction nutrition protocol.

*For additional guidance refer to the [Measurable Verbs for Learning Objectives](#) document in the Additional Resources Packet when developing your Learning Objectives.

Note: For Interprofessional Continuing Education (IPCE) activities including health care professionals from more than one profession, **you must include an objective designed to improve knowledge and/or skills that help the members of the health care team** work to enhance patient outcomes. See below for more details on IPCE-focused sessions.

Developing Interprofessional (IPCE) Content

Interprofessional continuing education – or IPCE – is where members from two or more professions learn with, from, and about each other to enable effective collaboration and improve health outcomes. If you are engaged by GVP to participate as a faculty member in an IPCE activity, you are likely (but not always) co-presenting with one or more faculty from other health care professions.

IPCE-focused activities seek to achieve an improved understanding of the roles and responsibilities of other members of the health care team by allowing professionals from different disciplines to learn together and communicate freely.

An example might be a webinar titled, *Interprofessional Strategies for Managing and Treating IBS*, and would feature a team of health care professionals that could include a dietitian, a gastroenterologist, a GI psychologist, and/or a primary health care provider.

IPCE activities are:

- Planned **by** the interprofessional team **for** the interprofessional team of learners;
- Based on the professional practice gaps of the health care team;
- Like all GVP activities, independent of commercial interests;
- Based on valid content; and
- Designed and evaluated for changes in skills, performance, or result in improvements in patient care outcomes provided by the health care **team**.

IPCE activities **must include:**

1. **The activity’s abstract** (i.e., the session description) must include a reference(s) to the health care **team**;
2. **At least one Learning Objective** that is designed to improve knowledge, skills/strategy, or performance of the members of the health care **team**;
3. **At least two interactive components** that take place during the live activity that **must be** focused on participants learning with, from, and about **each other**. The staff lead for your activity will walk you through the interactive components that are available for your session and help you determine the components that make the most sense based on your session’s topic, target audience(s), and the duration of your

activity. These could be a combination of two (or more) of the following options:

- Live group breakout sessions;
 - Live group discussion;
 - Interactive polling* that includes follow up discussion (in the form of verbal presentation and/or PowerPoint slide(s)) that reinforces participants' understanding of the poll question(s), the correct answer/results as they relate to the team-based patient care approach, and any additional supporting data or research;
 - Open-ended question(s)* that includes a follow up discussion from participants (in the form of either the moderator or presenter reading the answers and/or calling on participants who raise their hands). In addition, a follow-up Power Point slide(s) that reinforces the team-based patient care approach with presenter's expert experiences must be included; and/or
 - Use of interactive whiteboards or brainstorming software.
4. **Discussion of challenges/barriers** members of the health care team face when either incorporating or executing a team-based approach, as well as strategies that will help **remove or address** these barriers; and
 5. **Inclusion of at least one case study**, including analysis and discussion of the outcomes and/or improvements made by the team involved in the case.

If the above information **does not** apply to you, then you are participating in a uni-professional CE activity, which is designed to improve the knowledge, skills/strategy, or performance of learners from the same, single health care profession. An example uni-professional activity might feature a dietitian as the primary faculty for the event and be titled, *Nutrition Implications of Food Allergies in Children*.

GVP's Promotion of Your Activity

GVP will promote your activity in a variety of ways. Your activity may have a registration page; it may receive social media attention on GVP channels; and/or details may be sent to our various audiences via an electronic email blast (e-blast). Whatever the kind of marketing your activity receives, the required elements that are compiled jointly by faculty and the CE Team include:

- Activity date and start/end time
- Activity title
- Number and type of credits awarded
- Activity description
- Learning Objectives (3-5)
- Faculty name, title, institution (if applicable)
- Faculty bio and headshot
- Disclosure statement(s)

Once the above information is compiled, GVP's in-house marketing team will create the promotional materials. A member of the CE Team will share the materials with you for review and approval before they are shared with our audience(s).

- View an example of marketing materials for [a live webinar here](#)
- View an example of marketing materials for [an in-person event here](#)

POWERPOINT PRESENTATION GUIDELINES

Getting Started

The teaching methods most used to present GVP CE activities are lecture/discussion accompanied by a PowerPoint presentation.

You will be provided with a PowerPoint template that matches the live activity you will present. Unless a requested exception is made and granted, the template provided is the preferred template used for GVP activities. If you already have an existing PowerPoint file you will be using, please either provide an unformatted version of the PowerPoint file or add your content to the preferred template provided.

Presentations in Keynote (.key), Canva, Google Slides, or other non-PowerPoint programs, will not be accepted. Your file will be returned to you and you must convert it into PowerPoint format (.ppt or .pptx).

A Word About Animation and Fonts

If you plan to use **animation** in your slide deck, please keep it simple. Various computer operating systems and/or webinar platforms do not always recognize complex animation sequences and may cause (preventable) technological errors during the event.

Also note that it's possible that in the editing process of your PowerPoint, **animation may need to be adjusted or removed completely**. As such, animation cannot be guaranteed to appear as you intended in the edited version of your presentation. It is your responsibility to ensure the animation appears as you would like it to in the final version of the presentation.

Finally, if you download specific **fonts** for use in your PowerPoint presentation **note that they may not be recognized** by another computer and/or by certain webinar platforms. When this happens, the operating system/webinar platform will replace your font with a similar one (which may or may not look better than your original font) or replaces the font altogether (usually with Arial). **As such, please avoid using fonts that are not already contained within PowerPoint.**

Presentation Requirements

The following is a general outline of how your PowerPoint should be constructed:

- **Slide 1: Title slide (required).** The artwork for your session's title slide will be provided by GVP.
- **Slide 2: Disclosure Slide (required).** This slide will be included in the PowerPoint template and will be updated by the GVP CE Team.
- **Slide 3: Accreditation Statement Slide (required).** This slide will be included in the PowerPoint template and/or will be added by the GVP CE Team.
- **Slide 4: Learning Objectives Slide (required).** See also "Developing Measurable Learning Objectives" on page 7.
- **Last slide: Credit Claiming Instructions (required).** This slide will be provided by GVP.
- **Remaining Slides:** We recommend that the remainder of your slides be divided into sections and the content therein accomplish each Learning Objective.
- References must be included throughout your deck and you must compile **a separate, full reference list** (.doc or .docx format).

Style Tips

- Avoid bolding, italicizing, or underlining text unless appropriate or necessary
- Do not overuse question marks or exclamation points; only use when and where necessary
- When referring to a quote, data, statistics, or other information taken from another source **you must cite that source**. See also “Activity References” section on page 14.

Slide Deck Length & Presentation

60-Minute Session (approximately 53 minutes of talk time*)	90-Minute Session (approximately 78 minutes of talk time*)
Recommended <u>minimum</u> number of slides: 40	Recommended <u>minimum</u> number of slides: 55
Recommended <u>maximum</u> number of slides: 60	Recommended <u>maximum</u> number of slides: 75

Question and Answer Session (Q&A)

The Q&A session during a live activity is sometimes the most educational and rewarding part of the event. At GVP we recognize the value of including Q&A sessions in all our activities and as such, **they are a required component**.

Please note the following minimums for an activity’s Q&A session:

***For 60-minute webinars**, leave at least 5-7 minutes for audience Q&A (which means you will have roughly 53 minutes for your actual presentation).

***For 90-minute webinars**, leave at least 8-12 minutes for audience Q&A (which means you will have roughly 78 minutes for your actual presentation).

For live events, leave at least 15 minutes for audience Q&A (which means you will have roughly 45 minutes for your actual presentation).

Tip: Practice your presentation following this timing as you prepare for the activity. We recommend doing a full run through of your session at least twice.

IMAGE USE POLICY

Background

Images and other visual materials may be publicly available or educationally relevant and still be protected by copyright, license terms, privacy rights, confidentiality obligations, or other restrictions. Because GVP is a commercial publisher and education provider, materials that may be acceptable in another setting may not be authorized for use in a GVP activity.

What This Means for Your Presentation

Based on the background above, use only content you created or content GVP can verify you have the right to use. A citation or source acknowledgment is not permission.

What You May Submit

Visual content is generally acceptable when it falls within one of the following categories and any applicable conditions are satisfied:

- Content you created independently and have the authority to provide to GVP;
- Content created or supplied by GVP;
- Content for which you or GVP have written permission or a license covering the intended use;
- Verified public-domain content or openly licensed content used according to its terms;
- Charts or visualizations independently created from properly cited data, provided the data and presentation are accurate; or
- Independently designed visuals based on scientific facts, data, ideas, mechanisms, or concepts, with supporting scientific sources cited separately.

What You Should Not Submit without Specific GVP Approval

- Images, figures, tables, charts, screenshots, video, social media posts, or other materials copied from publications, websites, search results, presentations, or other sources;
- Journal figures or illustrations used only with a citation but without appropriate permission or license;
- Watermarked images or materials with removed or obscured attribution or rights information;
- Materials whose ownership, source, or license terms are unclear;
- Patient-identifiable, confidential, proprietary, embargoed, or unpublished material without appropriate authorization;
- Clinical, diagnostic, research, or outcome imagery that has been fabricated or materially altered and could be mistaken for authentic evidence; or
- Third-party content uploaded to a generative AI system for recreation, modification, restyling, or transformation unless GVP has confirmed that the applicable rights permit that use.

How GVP Can Help

Don't worry—we're here to help. GVP has processes in place to help identify copyright concerns, find suitable replacement materials, recreate graphics or infographics when feasible, and, within reason, assist with obtaining permission for reuse. There are three options available to help you navigate this policy; you can use one or all of these options in order to meet your needs.

Option 1: Obtain Permission to Reuse Imagery

If you know that your presentation contains third-party materials that may require permission, please identify them as early as possible and provide documentation of the permission when submitting your presentation materials to GVP. Written permission, such as an email from the copyright holder, is sufficient.

If permission cannot be obtained or if GVP determines that the material cannot be used, we will remove the material and provide a suitable replacement for your review/approval so the presentation can be used in accordance with applicable copyright requirements and this policy.

Option 2: Request a Recreation(s)

If you find a chart, table, graph, infographic, or other visual that you would like to use but cannot obtain permission, paste it into your draft presentation and add a comment requesting a replacement. Please also provide the supporting data, scientific sources, or teaching points whenever available.

GVP may create an independently designed replacement that communicates the same underlying facts or concepts without copying the original visual's protected design. The source visual will be removed before publication.

GVP may decline a request based on feasibility, rights concerns, available information, timing, or other relevant considerations.

Option 3: GVP as the Image Resource

If you want to avoid navigating copyrights, image reuse permissions, and third-party material restrictions altogether, GVP will secure and provide images for you. [Getty Images](#) is our image resource, so you can feel free to browse their website for inspiration.*

There are two ways you can tell us what images you'd like to see in your presentation:

1. Add a comment box to your materials and describe what kind of image you're looking for. For example:

Added Sugar vs. Total Sugar

- Sugars that are naturally-occurring within a food such as fruit and dairy are recommended
- Added sugars – reduce to 10% of calories as per the 2015 DGAs
- No difference in chemistry whether they are naturally-occurring in food or added to food
- No difference in physiology
- No analytical method to differentiate between added sugar and intrinsic sugar
- All fructose-containing sugars are low glycemic

Comments

New

Leslie Cimei A few seconds ago

Dear Today's Dietitian: Please include an image of sugar cubes or sugar granules in this slide.

Reply...

2. In a comment box, provide us with a readable image number from Getty and we will find the closest matching images available within our plan.* For example:

Creative #:	2284073057
License type:	Royalty-free
Collection:	iStock / Getty Images Plus
Max file size:	5000 x 3333 px (16.67 x 11.11 in) - 300 dpi - 13 MB
Upload date:	June 30, 2026
Location:	United States
Release info:	Property released
Categories:	Stock Illustrations Healthcare And Medicine

***GVP does not have access to Getty's entire library of images.** If you select an image that is not in our Getty plan, we will find a similar/suitable replacement for your review/approval.

If images need to be approved by your internal legal department or design team, please provide us with Getty creative numbers before obtaining internal approval. We can then tell you which images we do or do not have access to within our plan.

The Bottom Line

You don't need to be a copyright expert to navigate this policy. If you're unsure whether something can be used, just ask. We'll work with you to find a solution so you can focus on what matters most: creating a great educational experience for your learners.

ARTIFICIAL INTELLIGENCE (AI) USE POLICY

Copyrighted source images may not be uploaded to a generative AI system (ChatGPT, Gemini, Copilot, Claude, etc.) or used as image-to-image inputs for purposes of recreating, modifying, adapting, restyling, or replacing the copyrighted source image. In other words, copyrighted images may not be uploaded into AI tools to create a new version of the image, change its appearance, or use it as a starting point for a modified or redesigned image.

Independently created educational illustrations may be created and used with AI assistance when they are developed from underlying scientific facts, data, ideas, concepts, principles, mechanisms, or teaching points *rather than* from the expressive elements of a copyrighted source image. So, you can use AI tools to help create original educational illustrations based on scientific information, as long as the illustrations are not copied or based on the specific design or visual elements of a copyrighted image.

If You Use AI

Requirements for using AI:

1. Your AI prompt(s) must describe the scientific information to be communicated, and the prompt(s) must direct the creation of an independently developed visual composition.
2. The resulting illustration must use its own organization, spatial arrangement, iconography, labeling approach, color scheme, graphical style, and overall visual presentation.
3. The resulting illustration must not reproduce or closely imitate distinctive expressive features of a published figure.
4. The AI prompt(s) used and the scientific literature supporting or informing the concepts depicted must be appropriately cited in the activity.
5. All final illustrations must be reviewed by the presenter or another qualified expert to ensure scientific and medical accuracy.
6. GVP CE and editorial staff will also review the illustrations to make sure they do not closely resemble or copy distinctive elements of existing, copyrighted images.

If the scientific concept cannot be effectively illustrated without closely following the distinctive visual structure or expressive elements of an existing published figure, the figure should not be recreated using generative AI. Instead, permission for reuse or an appropriate license should be obtained. Alternatively, you can request support through one or all of the options described in the **Image Use Policy**.

ACTIVITY REFERENCES

Your activity content should be developed without bias and based upon primary sources such as journal articles, books, government/organization materials, and university/college research. Your resources should **not be more than 10 years old** unless the resource is foundational in nature, related to the groundwork of the original research/data, and the resource's claims are still accurate.

You are required to submit a separate reference list in a Word document. Your reference list should be a complete list of all the resources used to compile and/or verify the content of your activity. It can include recommended reading resources as well. Your reference list is due at the same time as the first draft of your PowerPoint presentation, but you can continue to add to it as you develop your deck and work with the CE Team to hone your session's focus.

For Live Events and Webinars	Between 10-20 references (on average) but upwards of 40 references depending on the complexity of the content
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Tip: As you add references to your presentation, simultaneously put those same references in a reference list in a Word document. GVP uses AMA format, but our editorial team is happy to help format your reference list to ensure consistency and accuracy. For additional guidance developing your citation refer to the [AMA Reference Style Guidelines](#) document in the Additional Resources Packet.

When submitting references for your activity:

1. Where necessary, cite all resources used on each slide within your presentation.
2. If you choose to use a reference number system, you must include the full reference list on the last slide(s) of the presentation. (See #2 below.)
3. Submit a separate Word document listing your references. This is required.

You can use one of two measures to cite references in your PowerPoint:

1. Simple citation: use the footer of the slide deck to include the author, a shortened article title, abbreviated publication name, and publication year.

For example:

A full, AMA-style citation:

Fidler Mis N, Braegger C, Bronsky J, et al. Sugar in Infants, Children and Adolescents: A Position Paper of the European Society for Pediatric Gastroenterology, Hepatology and Nutrition Committee on Nutrition. J Pediatr Gastroenterol Nutr. 2017;65(6):681-696. doi:10.1097/MPG.0000000000001733

Becomes:

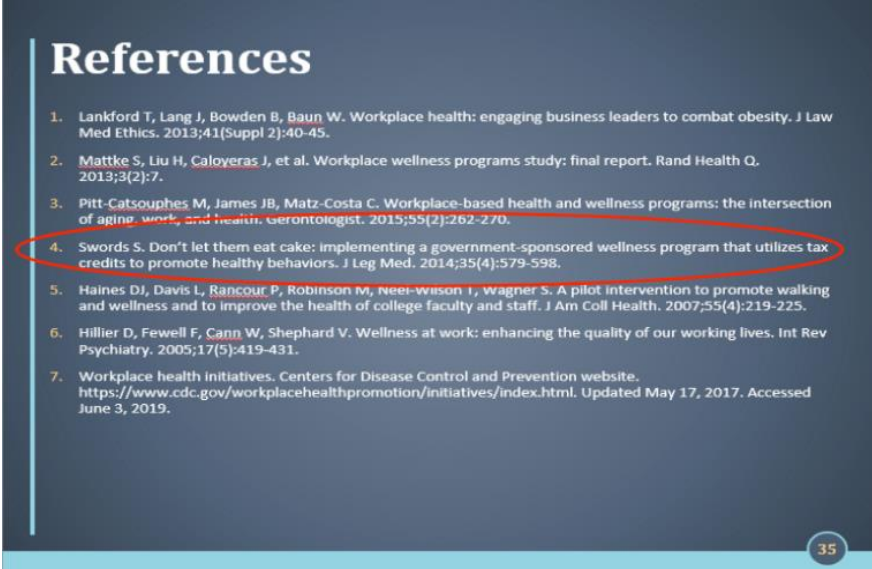
Fidler, Mis N., et. al. Sugar in Infants. J Pediatr Gastroenterol Nutr. 2017.

2. You can use a reference numbering system for each data point within the slide that corresponds to the full reference that is listed on the final slide(s) of the PowerPoint. For example:



Challenges to Wellness Programs⁴

- Large time commitment to create/implement by RD
- Variation in participation rate, lack of motivation
- Negative attitudes toward healthy eating/exercise
- Impaired health prevents participation
- Lack of funds, if there is a cost to join
- Limited knowledge of benefits
- Marketing flops
- Lack of time by participants, especially for corporate programs



References

1. Lankford T, Lang J, Bowden B, Baun W. Workplace health: engaging business leaders to combat obesity. *J Law Med Ethics*. 2013;41(Suppl 2):40-45.
2. Mattke S, Liu H, Caloyeras J, et al. Workplace wellness programs study: final report. *Rand Health Q*. 2013;3(2):7.
3. Pitt-Catsouphes M, James JB, Matz Costa C. Workplace-based health and wellness programs: the intersection of aging, work, and health. *Gerontologist*. 2015;55(2):262-270.
4. Swords S. Don't let them eat cake: Implementing a government-sponsored wellness program that utilizes tax credits to promote healthy behaviors. *J Leg Med*. 2014;35(4):579-598.
5. Haines DJ, Davis L, Rancourt P, Robinson M, Neel-vrison T, Wagner S. A pilot intervention to promote walking and wellness and to improve the health of college faculty and staff. *J Am Coll Health*. 2007;55(4):219-225.
6. Hillier D, Fewell F, Cann W, Shephard V. Wellness at work: enhancing the quality of our working lives. *Int Rev Psychiatry*. 2005;17(5):419-431.
7. Workplace health initiatives. Centers for Disease Control and Prevention website. <https://www.cdc.gov/workplacehealthpromotion/initiatives/index.html>. Updated May 17, 2017. Accessed June 3, 2019.

Every piece of data that is included in your presentation MUST be cited. And, regardless of how you choose to cite resources throughout your PowerPoint, the citation must also be listed in full, AMA format in the Word document that you are required to submit separately.

Tip: Be judicious with references. Do not over-cite information; general information that should be common knowledge to health care professionals does not need citations. However, more specific information, such as statistics, clinical guidelines, treatment methods, study results, and recommendations should contain appropriate citations.

HANDOUTS AND ANCILLARY MATERIAL(S)

Handouts

Depending on the type of activity, attendees receive an e-blast or link to handouts that are available for download. Additionally, attendees can download your activity's handouts from the credit claiming e-blast or the activity's page on the CE Learning Library after the event concludes (and up through 11:59 p.m. ET on the expiration date of the event).

Three components make up the PDF handouts for your activity:

- Final PowerPoint deck (1 slide/page and notes are not included)
- Reference list
- Ancillary material(s)

Ancillary Material(s)

Ancillary material(s) are valuable to participants and help to reinforce learning. These materials are typically supplemental strategies such as a creative guide, tip sheet, patient reminder/"did you know?" sheet, screening sheet, or checklist for learners to use as tools in practice to **enhance or facilitate** learning following the activity.

As a faculty member for a GVP activity, providing ancillary material(s) for your activity is required.

Materials must come to the GVP CE Team in an editable format, like a Word document or as a separate PowerPoint file. Please name the files as "ancillary material" or otherwise make it clear what the document(s) is. **Please do not send PDFs** - if you do, the materials will be returned to you for conversion into an editable format.

As you compile your ancillary material(s), consider the following:

- It should be clear that the material is a **supplement** to the overall presentation, not a replacement for it
- The material should not introduce new information, and what's more...
- ... It should be easy for learners to apply **recalled information** from the live activity to the ancillary material(s)
- **Don't recreate the wheel!**
 - Expand on areas of your PowerPoint presentation that are especially useful
 - Compile a list of online tools, toolkits, calculators, surveys, assessments, etc., that are relevant to and are addressed in your presentation
 - Transform areas cut from your PowerPoint into useful handouts
- When referring to third party resources, such as those listed in the second bullet point above, those resources **must be cited on the document** and, when applicable, use the **recommended citation style** from the source (e.g., the USDA has a specific citation style they want used when citing the Dietary Guidelines for Americans).

Your ancillary materials will be reviewed, edited/commented on, and ultimately approved by the CE Team. Materials will be made available as an additional handout (PDF) and as a digital download. Ancillary material(s) are due at the same time as the first draft of your PowerPoint deck and your reference list, but again – they can be edited/adapted as you continue to refine your presentation.

CONTENT MODIFICATIONS

After you submit your activity’s materials, they will be reviewed for compliance with GVP’s content standards and accreditation requirements. The CE Team will work with you to develop your session materials for approval, as well as any subsequent drafts of your activity’s materials. Most activities go through at least two (but possibly more) rounds of review/editing by the CE team.

Turnaround time for self-study (written) activities will be mutually agreed upon by the author and GVP.

Turnaround time for live/in-person events and webinars depends on the complexity, length, and any additional resources being provided. Therefore, the table below should be use as a guideline.

For In-person Events and Webinars	2-3 weeks	Please adhere to the established due dates to allow for an accurate and timely review and edit process. You will have the opportunity to review all edits and changes at every stage in the process.
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Editing Using Microsoft Comments and Track Changes Features

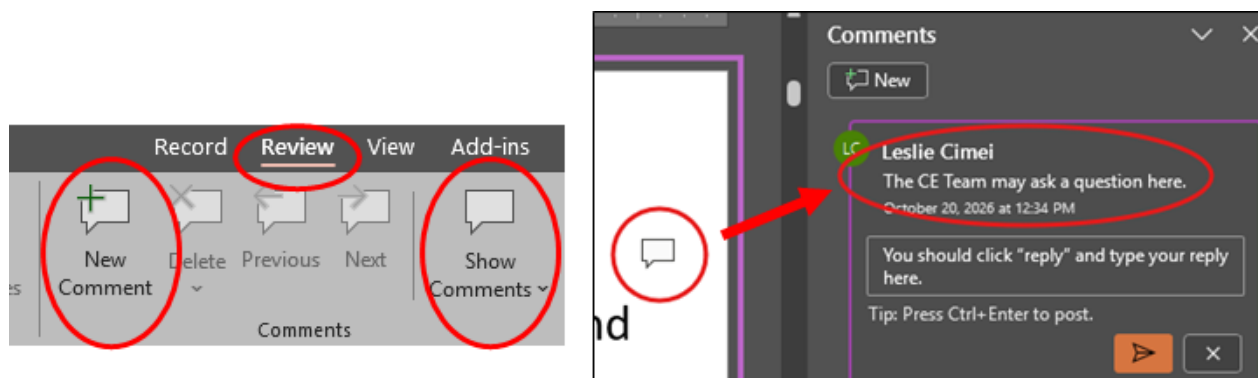
To maintain the integrity of the communication between the various team members involved in the review process, edits, questions, suggestions, and other communication are made through Microsoft Office’s comment boxes and "Track Changes" features.

Reading and Responding to Comments

Review your material for comments by following these steps:

1. Open the document or presentation.
2. Click on “Review” in the upper menu.
3. Click on the “Show Comments” option in the sub menu.
4. Use the “Previous” and “Next” features in the sub menu to navigate through the comments within the document or presentation.
5. Click the “Reply” option inside the respective comment box to issue a response.
6. To add a new comment, click "New Comment."

The following screen shots provide a visual depiction of these features.



ACTIVITY IMPACT ANALYSIS

Report and Feedback

Post activity, the CE Team will collect the attendees' self-reported changes from post-activity surveys and outcome reports. We analyze and identify the changes (competence, performance, or patient outcomes) the learner achieved as a result of participating in the activity, and provide the results to faculty, planners, and GVP's Executive Team for review and feedback.

Sharing this feedback is meant to help you improve your presentation for future events and often results in ideas for new live events or webinars.

THANK YOU!

Thank you once again for being a part of the continuing education of your health care peers. Your expertise, experience-sharing, and knowledge are a significant contribution to the ongoing improvements health care professionals seek to make as they work to advance health care outcomes and enhance the quality of life of their patients and clients.

As always, should you need help or have questions along the way, please feel free to reach out to a member of the CE Team for help. Communication is key - we're here to ensure you and your activity are set up for success!

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