

DEI Table 2

Table 2. Open-Ended Response Categories, Exemplary Quotes, Codes, and Respondent ID

Open-Ended Response Category	Theme	Exemplary Quotations [Code] (Respondent Year + Number)
DEI Best Practices	CE Programming DEI Strategies	<p><i>We have developed some guidance that will be provided to all who contribute to the development of content outlining some ways they can include DEI into their content. (DEI in Content)](21/22-P11)</i></p> <p><i>Our team has made small changes like including the speaker's preferred pronouns. [Speaker Pronouns] (23-P8)</i></p> <p><i>We continue as an association to listen to the needs of our members, and patient educational handouts written in multiple languages are needed, as well as more multilingual pharmacists and pharmacy technicians. While we have not defined the best way to approach this through education that we provide, we can connect our members to opportunities that may allow them to develop those skills outside of our programming. [Educational Material] (23-P8)</i></p> <p><i>Learner evaluation questions were added to measure the accomplishment of the following:</i></p> <ol style="list-style-type: none"> <i>1) This CE activity discussed only evidenced-based risk factors and/or social determinants of health when describing patients and patient populations.</i> <i>2) This CE activity used appropriate, non-biased imagery, language, and terminology (e.g. avoiding stereotypes) when describing people and populations. [Activity Assessment] (23-P7)</i> <p><i>Setting up locations when offering live CE for participants to pray, meditate or be in a silent and safe space. We have also looked at the dates when offering a Continuing Education LIVE conference to consider religious observances that might affect our attendees (Ramadan, for example). [Planning and Delivery] (23-P8)</i></p> <p><i>We added questions within the program intake process: Describe the steps that the course director and/or planning committee are taking to view any of the content for this interprofessional CE activity from a diversity, equity, and inclusion lens, and Explain how the content of</i></p>

		<p><i>this interprofessional CE activity will address the root causes of health disparities, factors that impact patient wellness or provide mitigating factors to improve patient outcomes. These questions have helped initiate the conversation and open up thinking about how the topic area(s) for the activity might investigate how DEI & A are inherent within the topic and whether the topic is being looked at from a health disparities lens. Even when course directors are initially resistant, raising the questions gets them thinking and we have seen consideration of changes.[Activity Development and Planning] (23-P7)</i></p> <p><i>Reviewed CPE planning committee membership roster to consider balance of male vs females, age(s) of individuals, representation from POC, representation from urban vs rural areas. [Committee Planning] (21/22-P17)</i></p>
	<p>Organizational DEI Strategies</p>	<p><i>Our program director and assistant director have completed training programs in DEI within the past year. We have taken steps to ensure balanced programming and have a greater focus on incorporating DEI when we initiate planning committees and advisory boards. [Training] (21/22-P5)</i></p> <p><i>I attended the [Conference] and learned an excellent technique from the keynote speaker...DEI is not a programming focus, something to be talked about or 'taught' but instead it is almost a state of mind....content should be created and then consideration of "HOW does this CE topic affect the privileged and marginalized groups (i.e., X, Y Z, etc.)?" The keynote presentation was extremely well done and was the first I have heard, on the topic where DEI, where it is NOT a check off box...it is inviting us to challenge ourselves to understand how our discussion impacts all DEI groups. [Training] (21/22-P12)</i></p> <p><i>We are creating a "learning journey" for team members to educate themselves and others on topics ranging from awareness of unconscious bias in various methods, including in-person, webinars, and also self-driven training modules. The goal is to provide training and education that helps develop inclusive thinking and actions. In addition, we aim to enable team members to become more comfortable with concepts that impact us at work and increase cultural competency. [Training and Education] (23-P3)</i></p>

		<p>We plan to include DEI as a content area in our upcoming education needs assessment survey that will be sent in Autumn of 2023. We will continue to approach DEI as it relates to our audience of pharmacy staff in a variety of areas and pharmacy technicians to ensure we are providing educational opportunities relevant for all staff. [Needs Assessment] (23-P12)</p>
DEI Goals	Mission Statement and DEI Strategic Plan	<p>I think our DEI statement probably best summarizes our goals:</p> <p>"Commitment to Diversity, Equity, and Inclusion: Everyone deserves professional development. [Institution] provides continuing education opportunities for all pharmacists and pharmacy technicians while embracing diversity and offering programming that fosters equity and inclusion." (21/22-P10)</p> <p>Our organization will support diversity in our membership, equity in our opportunities, and inclusiveness in our organization, empowering pharmacists, technicians, and student pharmacists to address systemic racism, and have broader cultural humility in the care of patients. (23-P11)</p>
	Developing CE Activities	<p>We are considering additional DEI-related CE activities for the upcoming year but do not have any specific goals set at this time.(21/22-P3)</p> <ol style="list-style-type: none"> 1. Provide at least two CPE programs annually specific to DEI (pharmacists only). 2. Follow state mandates requirements for DEI programming. 3. Create a task force that advances DEI in the CPE program by March 30, 2022. 4. Take the recommendations of the task force and implement those that directly affect DEI. 5. Use data from activity evaluations to design new DEI activities. This CPE program is run by the administrator with minimal assistance from staff. Therefore, our initial goals are modest. (21/22-P9) <p>Planning of future educational programs continues to incorporate health disparities content in activities, such as, but not limited to, age, geographic location, ethnicity, race, appearance, disability, gender, sexual orientation, language, literacy, level of education, religion, socioeconomic status, living conditions, and other relevant social determinants of health in teaching and</p>

		<i>learning methods (i.e., case vignettes, questions, workshop learning activities, etc.) (23-P16)</i>
	CPE Committee/Task Force	<p><i>We are exploring the addition of a diversity committee member to the CPE committee. We are also considering adding DEI guidance to our faculty guidance document. (21/22-P20)</i></p> <p><i>To have our Education Committee develop DEI initiatives that will be included in future CPE presentations as well as getting approval from the Executive Council of a formal DEI statement to be posted on our website.(21/22-P33)</i></p> <p><i>We have used this survey as an opportunity to brainstorm goals for our CPE Committee and nominated a member of our CPE Committee to be a liaison to the Department of Pharmacy DEI Committee. (23-P12)</i></p>
	Faculty Development and Guidance	<p><i>To create a facilitator guide which walks the presenter through a series of questions that invite them to avoid "the DEI check off box" but instead include DEI seamlessly throughout the content. (21/22-P27)</i></p> <p><i>Revised faculty guidance to include DEI principles relative to content development.</i></p> <p><i>Modify the peer review form/feedback to include DEI concepts where appropriate.</i></p> <p><i>Continue to engage a diverse group of faculty in course development. (21/22-P47)</i></p> <p><i>We plan to add DEI guidance to our faculty guidance letter and identify a brief video focused on provided faculty development re: DEI in continuing education to include in our guidance materials. (23-P12)</i></p>
ACPE Support	Support-Sharing Best Practices	<p><i>More examples of what ACPE would like to be considered in pharmacy CE activities. (Examples of DEI) (23-P1)</i></p> <p><i>Webinars and examples of best practices alone will be helpful. Learning from our peers is incredibly valuable. [Best Practices from Peers] (23-P3)</i></p> <p><i>Make all programs aware of best practices and successes experienced by other programs. [Best Practices] (23-P5)</i></p>
	Support-Training and	<i>Webinar workshops on how to include DEI within our programs. (Training-Workshops) (23-P19)</i>

	Technical Support	<p><i>Continue to support the conversation and offer tools that support efforts such as Diversity, Equity, Inclusion, and Anti-Racism in Continuing Education: Guidelines and Recommendations for Incorporating DEIA into Continuing Education for Healthcare Professionals from the ACCME task force. [Support and Tools] (23-P9)</i></p> <p><i>Bringing information to providers in a great start. If there are resources / references that you feel exemplify the area it would be great to provide those on the site. [Support and Resources] (23-P7)</i></p> <p><i>It would be great if a category within the UAN could be developed to help aggregate DEI Specific educational offerings, as this is a measure we review with our educational programming advisory committee, it would help to more easily see, track and evaluate the data. [UAN-Reporting] (23-P10)</i></p>
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