



Membership Form April 2023—March 2024

[Insert company name or logo]
[Insert Date]

Introduction

The Good CME Practice (gCMEp) group is an open membership organisation for European education providers and follows the Core Principles as published in *Current Medical Research and Opinion*.

The purpose of this document is two-fold: it is the application form to join the group as well as for the annual renewal of membership. The aim of the Good CME Practice group is to guide how European CME providers contribute to improving health outcomes.

Members must agree to adhere to the principles of the Good CME Practice group¹ and be in full support of the aims and objectives of the group. The aim of the Good CME Practice group is to guide how European CME providers can contribute to improving health outcomes. It will do this by:

- Championing best practice in CME
- Maintaining and improving standards
- Mentoring and educating
- Working in collaboration with key stakeholders

All Member organisations and individuals must:

- Be a registered legal entity in geographic Europe with an operating office in geographic Europe
- Have a significant focus in providing medical education to healthcare professionals
- Be represented by individuals who live and work in geographic Europe

Please complete all relevant sections, keeping your answers short and accurate, referring to the gCMEp [Policy Document](#) for further details, and using principles and terminology as defined by [gCMEp](#), [EFPIA](#) and the [International Academy of CPD Accreditors](#).

¹ Farrow S, Gillgrass D, Pearlstone A, Torr J, Pozniak E. Setting CME standards in Europe: guiding principles for medical education. *Current Medical Research and Opinion*, 2012;**28**(11):1861–1871. [\[link\]](#)

1. About your organisation

a. Are you applying for Full membership, Associate membership or as a single-handed consultant?

- Full membership
- Associate membership
- Single-handed consultant

b. gCMEp group members must be a registered European legal entity with a European office. Please describe the structure of your organisation in Europe, including the people nominated to represent the organisation at gCMEp level. gCMEp group representatives must live and work in Europe.

[Please give short description <400 words]

Name of nominated, active representative: **[Insert name, email address]**

Secondary representative/contact: **[Insert name if you wish to nominate a second person]**

Administrative contact (if different): **[Insert name/or as above]**

2. Your approach to designing and delivering CME

a. Briefly describe your approach in the design and delivery of CME-accredited activities in Europe. Referring to the 4 Core Principles of gCMEp.

[Describe your organisation's approach <400 words]

b. How do you develop activities that achieve more than just Level 2 or "satisfaction" outcomes?

[Give a short description <200 words]

3. Your CME/IME experience

Full membership: As evidence of your CME track record, please give examples of **up to three** most successful and relevant accredited CME education activities that your organisation has developed in the past 12 months. If none of the activities developed in the past 12 months have been accredited by a recognised European accreditor (e.g. EACCME, EBAC, etc.) please explain why, and how your activities were compliant with the gCMEp standards and expectations.

Associate membership and single-handed consultants: please provide details of your CME/IME experience (if any), the education activities that you are currently providing and your plans for the future.

[Include title, date, city/URL, if CME, also the accreditation body, number of CME credits]

4. Independence (Full membership only)

An important part of the work of the Good CME Practice group is demonstrating independence, including where relevant, the effective separation between accredited CME/IME and industry-controlled activities. To help us better understand how your organisation develops and presents its educational activities, please provide further information about your approaches to the following:

a. How do you approach the difference between IME/CME, and medical scientific communications as developed by MedComms agencies, whether in your own organisation or in discussions you have with financial supporters?

[Describe your approach here <400 words]

b. What mechanisms and processes do you have in place to prevent commercial control or influence in order to maintain independence when working on CME activities?

[Give a short description <200 words]

c. Under what conditions do you allow financial supporters to have input into your activities e.g. faculty suggestions, content approval, support with delegates, etc?

[Give a short description <200 words]

5. Advocating for CME (for membership renewal only)

Describe what you and/or your organisation has done in the past 12 months to help support the aims of the gCMEp group and general promotion of the CME community in Europe.

Does your website carry the gCMEp logo with reciprocal links to gCMEp.org? This is a requirement of Full members and needs to be on the organisation's home page, "About Us" or dedicated education page

[Provide URL]

Have you attended the Spring Meeting, Autumn Meeting, or the latest European CME Forum? Attendance of a minimum of one is a requirement for members renewing membership.

[Provide details <50 words]

Have you presented or participated in gCMEp webinars, speaker at Day 0 or workshop at European CME Forum?

[If yes, add information <100 words]

Have you presented or participated at another meeting promoting gCMEp (e.g. ACEhp, AMEE, CCC, EBAC, GAME, UEMS, etc.)?

[If yes, add information <100 words]

Any other relevant activities?

[If yes, add information <100 words]

6. Membership fee

Please provide invoicing details. The annual term of membership runs for 12 months from April to March, and is renewable annually (in March/April) on the reaffirmation of the details as outlined in this application. The annual fee for Full memberships is 1,500 Euro, for Associate membership 500 Euro and for Single-handed consultancies (individuals) 150 Euro, terms of payment are 30 days. If a new membership commences mid-year, the term of membership will run from the month of acceptance until the following March and the membership fee will be calculated pro rata. Please provide any relevant invoicing details here.

[Insert billing entity, address, name, PO number/reference, VAT details if required, etc.]

7. Declaration

I hereby declare that the information provided is true, correct and complete, that we agree to adhere to the gCMEp Core Principles* and the Policy Document, and that I am authorised to represent my organisation in submitting this application to be a member of the Good CME Practice group.

Name:

Signature:

Position:

Date: