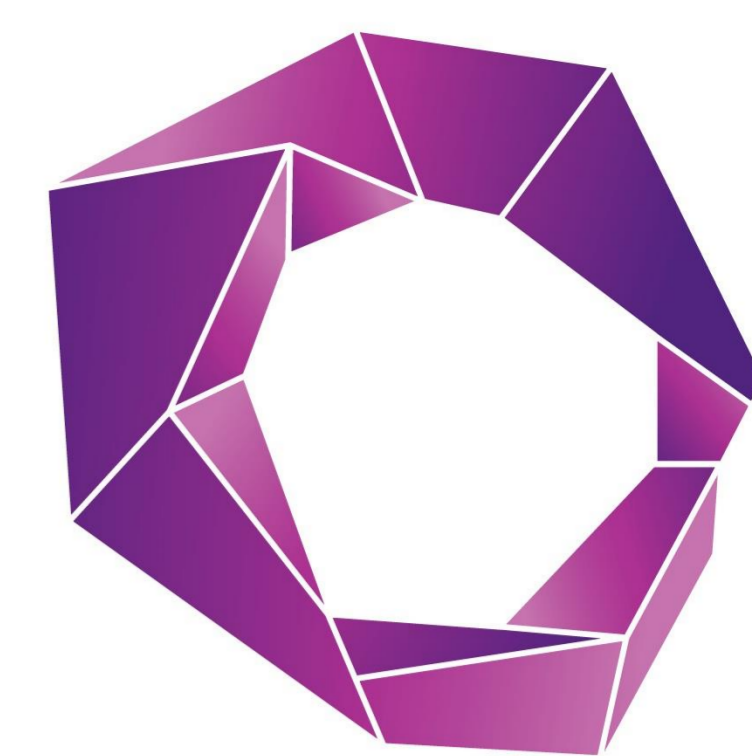


STANDARDISED EVALUATION OF ALLIED HEALTH WORKPLACE EDUCATION AT A TERTIARY SPECIALIST CANCER CENTRE

KATHRYN CIRONE¹, JESSICA CROWE¹, AMY BOWMAN^{1,2}, ALICIA MARTIN^{1,2}, LARA EDBROOKE^{1,2}

¹Peter MacCallum Cancer Centre, ²The University of Melbourne



Peter Mac
Peter MacCallum Cancer Centre
Victoria Australia

BACKGROUND

Evaluating Allied Health (AH) workplace education, and acting upon the findings, ensures AH teams are equipped to deliver safe, effective and patient-centered care. The AH workforce at the study site consists of approximately 95 staff across ten individual professions.*

Learning Needs Assessments are conducted to guide development of interprofessional and profession specific education activities. However, evaluation of education is ad-hoc.

Standardising evaluation across AH professions ensures consistency in data collection and allows for deeper understanding of learning needs and outcomes.

AIM

To evaluate the AH workforce education program, determining learner satisfaction and knowledge transfer into clinical practice.¹

To use findings to inform the development of future AH workforce education activities and plans, ensuring the program meets learner needs and supports clinicians to deliver best practice, safe and effective patient care.

METHODS

13-item survey developed using the Research Electronic Data Capture (REDCap) system.

Following each AH workforce education session, participants provided with a QR code linking to the REDCap survey. Participation voluntary & anonymous.

A retrospective audit of survey responses collected across a 7-month period was conducted.

Descriptive statistics to report professional characteristics, learner satisfaction and knowledge transfer. Chi-square tests for between-group comparisons. Open-ended survey questions coded inductively and themed.²

RESULTS

97 survey responses from 7 AH professions across 20 education sessions.

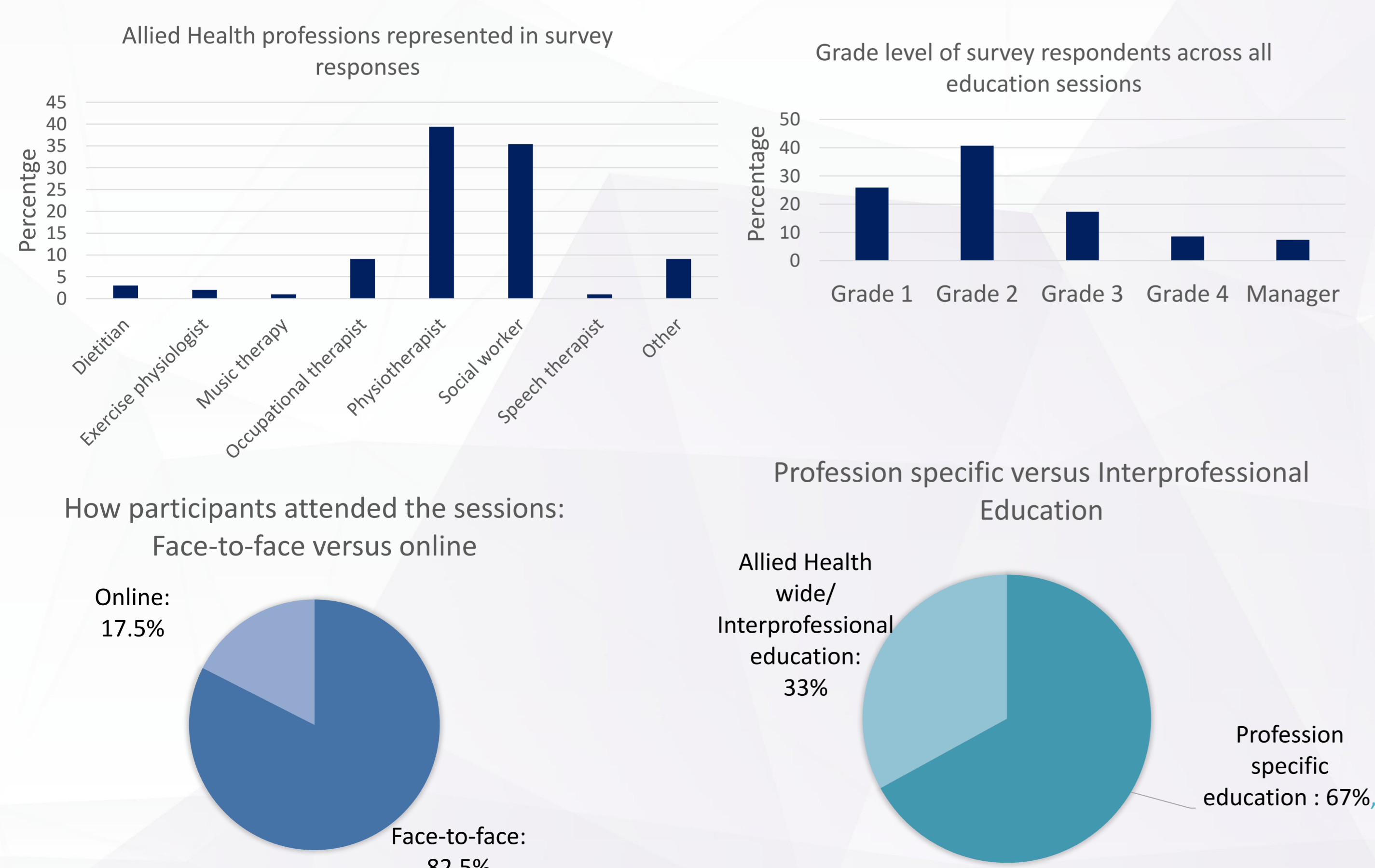
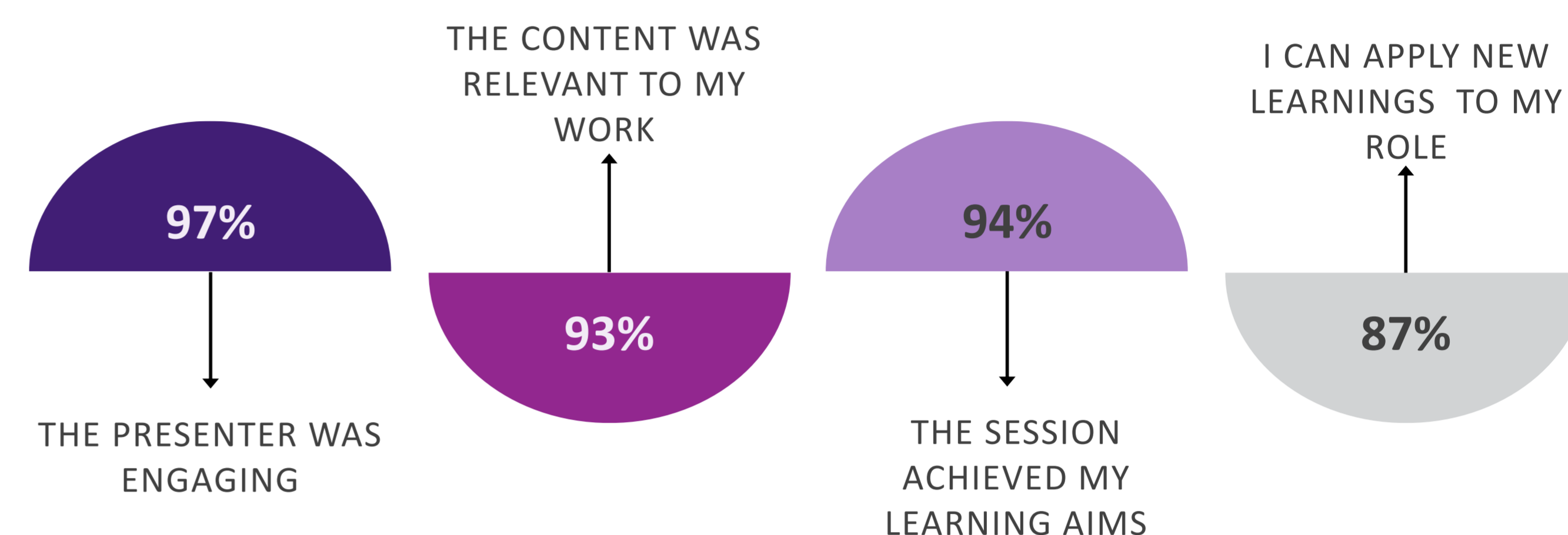


Figure 1: AH disciplines, grade level, attendance mode and session type.

*Allied Health Professions at study site: Allied Health Assistance, Art Therapy, Exercise physiology, Dietetics, Music Therapy, Occupational Therapy, Physiotherapy, Speech Pathology, Social Work, Spiritual Care

RESULTS

PERCENTAGE OF SURVEY RESPONDENTS WHO AGREE OR STRONGLY AGREE WITH THE FOLLOWING STATEMENTS



There were **no significant differences** in responses between the different **grade levels**. There were **significant differences** observed between the profession specific education and the AH wide / Interprofessional education sessions, as shown in figure 2 below.

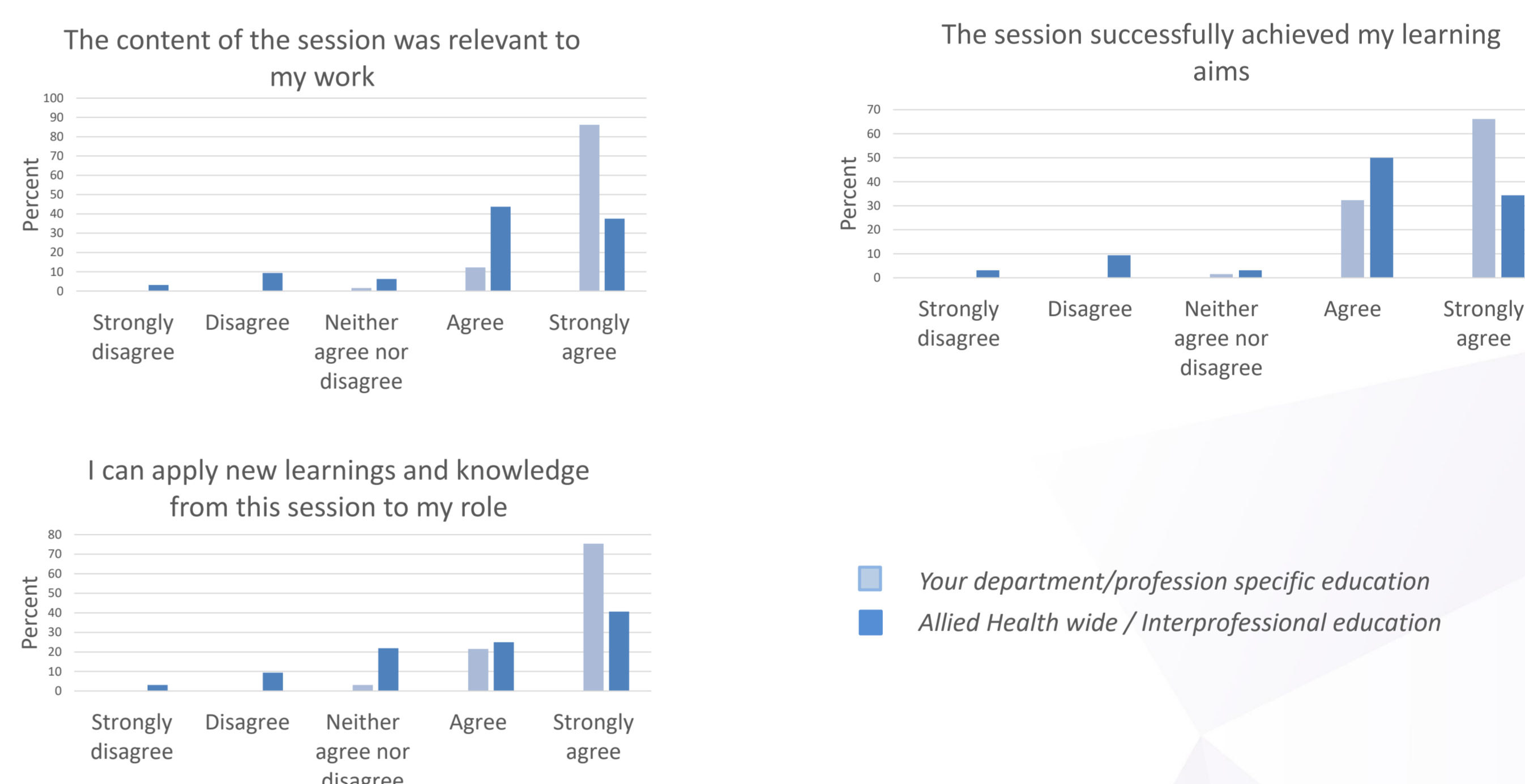


Figure 2: Comparison of relevance, learner aims met and transferability into practice between profession specific and interprofessional education sessions

Table 1: Identified themes emerging from free text responses investigating the most helpful elements & opportunities to improve in education sessions

Most helpful	Opportunities to improve
Case studies	More case studies
Presenter sharing their lived experiences in practice	Practical elements, linked to length and time of sessions
Specific topic content that can be applied	Suggestion to include broader attendance from multi-disciplinary team to learn from one another
Discussion time	

IMPLICATIONS AND RECOMMENDATIONS

Overall high satisfaction with education program. Continue conducting learning needs assessment to ensure learning needs are met.

Low engagement in survey participation from some professions. Professions with higher engagement had lead educators ensuring the survey was available.

Feedback that low survey uptake may be due to presenters not wanting to be "assessed". Recommend review of survey & co-design with all AH professions. Consider 'opt-in' alternatives for presenter feedback.

Significant differences observed between profession specific and Allied Health wide/Interprofessional Education (IPE). Ensure learning objectives of IPE clearly defined for clinicians to choose sessions relevant to learning goals. Consider broadening evaluation from outcome to programme evaluation.³

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