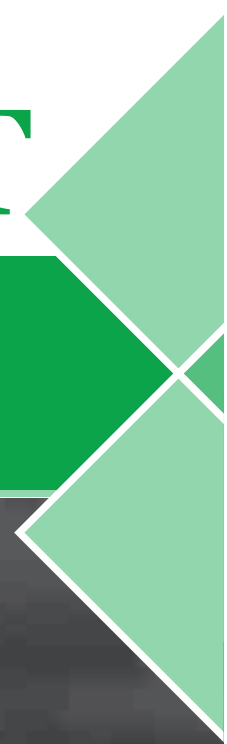




evaluation REPORT

A Manual in Quality Standards in Substance Use Education



2013

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FOREWORD

The Drug Education Workers' Forum (DEWF), grew from a need to identify and provide some coherence for the voluntary, community and statutory agencies involved in the development or delivery of drug education programmes. The Drug Education Workers Forum was founded in 2000 as a voluntary organisation. The DEWF served as a collective voice for members from multi-disciplinary backgrounds who were responding to drug related issues and its main objectives were networking; information exchange; support and policy development.

During the years 2002 to 2007, members of DEWF, in a voluntary capacity researched, compiled, piloted and refined the Quality Standards in Substance Use Education (QSSE). This was achieved with much support and good-will from their respective employers. DEWF advocated specifically for meeting the “need for clear, practical information on best practice substance use education in Ireland” (DEWF 2007). The Quality Standards in Substance Use Education were designed in response to a growing need for a broad based programme in substance use education.

The process of development included consultation with a broad range of individuals and agencies regarding the content. In addition focus groups were also held to consult with participants of substance use education programmes and substance use education service providers. Launched on the 10th of September 2007, the quality standards are the result of a deep commitment by DEWF to the delivery of quality education in substance use in Ireland and evidence a collaborative engagement of education and prevention practitioners from community, statutory and voluntary organisations.

Substance use education encompasses a range of interventions across multi-disciplinary settings and includes education programmes, policies and guidelines. The aims of the QSSE were to provide a clear framework within which practitioners of substance use education and those commissioning substance use education programmes could a) reflect on current and proposed substance use education service provision; b) be supported in designing and developing programmes and initiatives; c) deliver programmes; d) monitor and evaluate work carried out and e) gauge and enhance professional development in the field. Therefore, the QSSE acts as a best practice resource and guide for both practitioners (this includes drug education workers; youth workers; community education workers; community development workers and health promotion staff for example) and for those who commission work in substance use education nationally (such as youth work management boards and coordinators; school boards of management; principals; SPHE coordinators; substance use education agency management boards; adult education coordinators; community education coordinators community development organisations and other related organisations).

A comprehensive programme of training was designed to complement the QSSE and was provided nationally to those involved in the provision of substance use education by DEWF members from the years 2007-2012.

A specific plan of evaluation was delineated from the outset. An inbuilt evaluation process was included over the course of delivering the training where trainers conducted brief evaluations at the

conclusion of sessions and this data is included in this report. The manual itself also includes feedback sheets that encourage all those who use it to provide feedback to the Drugs Education Workers Forum directly. This asks for specific information regarding manual coherence, use of reference lists and the clarity of the standards and performance indicators.

The original tender brief for the external evaluation included two phases. **Phase 1:** to quantitatively evaluate the training and implementation of the QS in people's work. **Phase 2:** set out to interview different stakeholders e.g. funder, participating organisations, network members, participants at training of trainers and at one day training etc., to gain deeper insight into the training and use of the DEWF QS in people's work and how it impacted on the prevention education sector nationally.

The tendering process yielded a small number of applications. The external evaluators from the University of Limerick undertook to complete Phase 1 (this report). At this time, DEWF experienced its own set of challenges. Participation in forum meetings reduced, resulting in the QSSE committee losing personnel. This was due to the expansion of drug workers roles coupled with a reduction of available hours for DEWF participation. The impact of DEWF's reduced capacity meant that Phase 2 of the evaluation did not proceed.

It is noteworthy that the results of the evaluation of QSSE are extremely positive as this report will demonstrate. There was clearly a need for the coherence and standards that the manual provides. Indeed Action 26 of the National Drugs Strategy (2009-2016) explicitly advocates the efficacy and necessity for the DEWF QSSE, in their articulation for the need to 'implement a uniform set of drugs and alcohol education standards, using the DEWF framework being implemented by Drugs Task Forces at present.' The evaluation evidence points to the fact that there can be little doubt of the commitment and success of DEWF in the professional development of substance use education and prevention practitioners. It also evidences the capacity of DEWF to successfully identify and respond to the needs of substance use education practitioners in Ireland.

The compilation of the QSSE was no small endeavour. The acknowledgement from the National Drug Strategy Team of the value of this project and inclusion in the National Drugs Strategy (Action 26) confirms its success. The financial support from the National Drug Strategy by the then Minister of State, with responsibility for the NDS, Noel Ahern has been invaluable in the development and implementation of the project. The specific interest from Europe and the use of QSSE in informing the development of European indicators in the field is also certain acknowledgement of its efficacy.

Finally, it must be acknowledged that this could not have been achieved had there not been a genuine desire to support the development of this sector which required commitment from the members of DEWF and their supporting organisations. QSSE and its implementation has been realised through the DEWF collaboration which is comprised of workers coming from a variety of organisations with varying levels of input to the substance use education sector to form a voluntary cross-sectoral multi-disciplinary network that is DEWF. Such a complex partnership is not new, however, what has been achieved through the hard work and dedication of its members on a voluntary basis surely is a unique example of what can be gained. We can really learn from such success. The need to actively protect the space for such communities of practice to voluntarily come

together to raise standards in their field, is worthy of mention in current times of austerity.

DEWF believe that quality standards have an important role in substance use education and hope that the DEWF Quality Standards will continue to inform this work in Ireland over the coming years. This independent evaluation has been welcomed by DEWF.

EXECUTIVE SUMMARY

This report set out to evaluate the training provided by the Drug Education Workers Forum (DEWF) on the manual in Quality Standards in Substance Use Education as well as the efficacy of the manual itself.

OBJECTIVES OF THE EVALUATION

The specific objectives of this evaluation were:

- To analyse the data arising from the one day training evaluation forms
- To analyse the data from the two day training evaluation forms
- To design, administer and analyse a follow up online questionnaire on the effectiveness of the manual.

EVALUATION DESIGN

The evaluation was undertaken in three distinct parts. The first stage was the analysis of the one day evaluation data. The one day training took place over five years, 2008 - 2012 and across Local and Regional Drug Task Forces nationwide. In total, 521 participants took part in the training, with 481 evaluations collected in total. From these, three hundred and eighty two evaluations were included in the survey, with another 99 being received by the DEWF co-ordinator after the research was underway and are therefore not included in the analysis.

The second stage was the analysis of the two day training evaluation data. This training took place over five years, from 2007 - 2011 and across four clusters of RDTF regions around the country. In total, 104 participants took part in the training. One hundred and three participants returned a questionnaire, on the day of training.

The final stage of the evaluation comprised the creation of an online follow up survey focused on participants' experiences of using the manual since the training. This questionnaire was sent to both one and two day participants. Ninety eight people responded to the follow up questionnaire.

RESULTS

One Day

Responses to the one day training were very positive. 90% of participants understood how to use the manual to aid their work as drug education officers post training while 89.7% of participants indicated confidence in using the skills learned in the training. Communication of the principles of

the manual was clearly successful with 95.8% affirming their awareness of the manual's underpinning principles post training. Almost all participants (99%) found the information contained in the manual useful with the same percentage of participants identifying the usefulness of the skills development contained in the training. In terms of improvement, the recurring theme of the complexity of the manual language emerged strongly for participants as an area that needs to be addressed.

Two Day

The two day training yielded similar positive responses. Ninety per cent of participants indicated that as a result of the training they now understood how to use the manual to aid their work as drug education officers. Over three quarters of respondents identified feeling capable to deliver training on the manual as a result of their participation on the two day training of trainers' sessions, with 22% uncertain. In terms of confidence in using the skills learned during training 90% of participants answered affirmatively, and 96% were aware of the principles underpinning the manual post training, evidencing success in delivery.

Some areas for improvement identified by participants included better clarity with regard to what to expect prior to attending training; more clarity and experience of case studies and enhancement of group/experiential activities.

Follow up Survey

Participants continued to remain positive even after the time lapse between training and the follow up survey.

In terms of the QSSE having an impact on participants work practice, 90% responded affirmatively. Fifty eight per cent indicated that QSSE informed policy development and/or dealing with critical incidents. Clearly responses were positive in terms of QSSE informing substance use education programme development and implementation (84%) and in assisting respondents when working in partnership (74%). Participants indicated that the QSSE have also been influential in highlighting issues or helping identify respondents' organisational needs in relation to training/access to resources (66%). In terms of evaluation 86.0% indicated QSSE helped them evaluate programmes, 44% the evaluation of staff training and 57.4% the evaluation of organisational policy

Fifty seven per cent indicated using the competencies section of the manual with 56% indicating that the QSSE informed other aspects of their work outside substance use education and the comments supplied showed a range of application. Twenty four per cent of respondents have gone on to deliver QSSE training.

RECOMMENDATIONS

- Given the overwhelmingly positive responses to the training and manual, it clearly signals the need for further continuation and expansion.
- Production of a further edition of the manual is recommended and attention given to simplifying the language used and making it more user friendly.
- Further expansion of settings targeted for participation in training would be of benefit nationally.
- The potential of the manual and training in the building of policy development capacity and competencies is clearly of merit.
- Scope remains within the manual and training to extend the specific section on travellers, parents and service users to include other target groups such as individuals with intellectual disability, minority groups, prisoners and sex workers.
- A follow up/refresher session could be conducted six months after undertaking the training. This can be done online, if resources are limited. This would potentially sustain and deepen engagement and understanding of participants.
- Should training be continued it would be desirable to send out a follow up survey one year after training, in order to continue to gain insight into its efficacy and impact.
- The partnership model and inter-agency planning that underpinned the development and implementation of QSSE partnership can serve as a model of good practice for similar programme development initiatives.

1. INTRODUCTION

1. INTRODUCTION

This report will detail the analysis of the data collected during the evaluation of the implementation of QSSE training. This section outlines the aim and objectives of QSSE and will guide the reader as to the layout of the report.

1.1 AIM OF QUALITY STANDARDS IN SUBSTANCE EDUCATION

The aim of the Quality Standards in Substance Use Education is defined as:

- To develop a manual and associated training which would serve to support individuals and agencies in their substance use education work in a range of settings

1.2 OBJECTIVES OF QUALITY STANDARDS IN SUBSTANCE EDUCATION

From the outset clear, actionable and comprehensive objectives are delineated for QSSE. These are identified as:

- To develop a resource manual for use by substance use education practitioners that encompasses a review of research findings and expertise in a range of substance use education settings.
- To provide a guide for those commissioning substance use education interventions, reviewing evidence and guidelines on best practice in a range of specific settings.
- To formulate setting specific quality standards for substance use education.
- To develop training modules based on the resource manual which will furnish substance use education practitioners with the opportunity to review and develop the knowledge, skills and competencies relevant to their work.
- To encourage critical reflection on substance use education theory and practice in Ireland.
- To support organisations with a substance use education brief in reviewing and critiquing their work.
- To design and develop performance indicators relating to these quality standards.
- To ensure that the quality standards and performance indicators are theoretically and/or experientially evidence based.
- To compile these standards and indicators in a practical manual to be used as a resource for those involved in substance use education.

- To continually monitor, review and evaluate the content and use of these quality standards.

National response to the manual has been positive, for example Farragher (2007) in *Drugnet Ireland*, (Issue 24, Winter 2007 pp. 23-24), describes the QSSE as “*highly structured and provides a consistent framework of standards across the three education settings. Elements common to the school and youth-work settings include substance use policy, managing incidents, and staff development*”. Along with comprehensive training in the manual in 2007, capacity building training was also rolled out in conjunction with the manual in order to ensure that practitioners were a) cognisant of the underpinning principles of the programme, b) were knowledgeable in terms of its content and c) comfortable in the skills necessary for building capacity for effective substance use education. These training sessions were organised in blocks of one and two day training sessions and were evaluated on each day. This report details the outcomes of these evaluations.

1.3 OUTLINE OF REPORT

The development of Quality Standards in Substance Education (QSSE) and associated training was funded by the National Drugs Strategy 2001-2008. This report outlines the results of the evaluations of the capacity building training delivered in order to optimise the implementation of QSSE. This report is laid out in the following manner:

CHAPTER 2: RESEARCH DESIGN

This chapter provides a brief overview of the data collection processes employed. It details the scope and processes of data collection and analysis.

CHAPTER 3: ONE DAY TRAINING EVALUATION

This chapter details the results of the data collection specific to the one day training delivered. It provides demographic information and subsequently details respondents’ experience of the QSSE training.

CHAPTER 4: TWO DAY TRAINING OF TRAINERS EVALUATION

This chapter details the results of the data collection specific to the two day training of trainers. It provides demographic information; respondents’ experience of the QSSE training and their recommendations specific to the manual.

CHAPTER 5: FOLLOW-UP SURVEY

This chapter details the results of the data collection specific to the follow up electronic survey distributed to all participants for whom we had contact details for. It provides demographic information; how participants have utilised QSSE in their work; influence of QSSE on their work practice; partnership and policy development and respondent recommendations.

CHAPTER 6: CONCLUSIONS AND RECOMMENDATIONS

This chapter identifies conclusions and recommendations arising from the QSSE evaluation data.

2. Research Design

2. RESEARCH DESIGN

The scope of the evaluation undertaken was specific to evaluation of the training and implementation of the quality standards manual. Two types of training were offered in this regard:

- One day training for drug education workers on their use and application of the manual in different settings.
- Two day training of trainers (ToT).

The intention behind this approach was that trainers, who were educated in the use and application of the quality standards, would then be enabled to carry out the one day training on QS in their own regions with drug education workers. It was also believed that the two day workshop for trainers would have an additional benefit in enhancing their own work in drug education. On completion of the one day or two day training workshops participants completed questionnaires as to its usefulness and quality. In addition, a follow up questionnaire was distributed to all participants. The intention was to capture the extent to which participants on the training found the manual to be of use in their work.

Therefore, data were collected at three junctures and these are analysed in this report;

- One day training evaluation (r=382)
- Two day training evaluation (r=103)
- Follow up questionnaire (r=98)

2.1 ONE DAY TRAINING DATA COLLECTION

One day training for participants occurred over five years; 2008-2012. The regions in which the training took place included: Mid West RDTF; Western RDTF; South East RDTF; Midlands; Dublin North East; Ballymun LDTF; North East RDTF; East Coast RDTF; South RDTF; North Dublin and South West RDTF. Three hundred and eighty two evaluation sheets were returned from these training days.

On completion of the training, participants were given a questionnaire to complete prior to leaving the training facility. All questionnaires were returned to the trainers on each day. The questionnaires were anonymous but a record was kept of the year and region in which the evaluations were undertaken and this demographical information will be detailed in the next chapter. In addition the questionnaire asked participants to answer questions specific to whether post training they now a) understood how to use the manual in their work as a drugs worker; b) their confidence in using the skills learned in the training; c) their awareness of the basic principles behind the development of the quality standards manual; d) to rate the usefulness of the topics in the training which included manual information; skills development and learning; e) to rate the usefulness of the facilitation methods employed in the training; f) to provide suggestions and/or recommendations as to what

could be added to the training and what could have been omitted. Finally an overall question as to whether the training met participants' expectations was also included with an additional section for participants to make any comments that they wished to inform the training.

2.2 TWO DAY TRAINING OF TRAINER DATA COLLECTION

In total one hundred and three participants returned evaluations at the end of the two day training. The training occurred over a five year period 2007 – 2011. The regions in which the training took place included South West (Kildare); South West (Mullingar); Limerick; North West (Leitrim); Dublin and South East (Kilkenny). The one hundred and three participants comprised the full sample that completed questionnaires on the training of trainer workshops.

On completion of the two day workshops participants were given a questionnaire to complete. All were returned to the facilitators on each day. The questionnaires were anonymous. They were asked to identify, post training; a) whether they understood how to use the manual to aid their work as a drugs education officer; b) whether they felt enabled to deliver training on the manual to other drug education workers; c) their confidence about using the skills learned during the training; d) awareness of the basic principles behind the development of the quality standards manual; e) the usefulness of the topics covered in the training; f) the usefulness of the varied methods of facilitation employed during the training; g) suggestions/recommendations that could be added or omitted to the training; h) whether the training met expectations and additional comments.

2.3 FOLLOW UP SURVEY

The follow up survey was distributed to all participants of the quality standards training, who had provided contact details. The questionnaire was a comprehensive document examining a range of themes related to the programme and its implementation. All respondents were asked to indicate their gender; age range; when they had participated in the training and in which Regional Drugs Task Force region and setting that they are currently employed. This demographical information is available in the corresponding chapter.

The next series of questions examined the impact of the quality standards programme and training on their work practices. Specifically respondents were asked a) if they used the quality standards within their work; b) if the quality standards has impacted or influenced their work practice; c) if the quality standards informed policy developments or their dealing with critical incidents; d) if the quality standards had informed substance use education programme development and implementation.

The next series of questions examined the link between the training organisation and individual competencies/skills development. For example it specifically asked; a) if the quality standards highlighted issues in or helped identify needs of their organisation in relation to staff training and resources; b) whether the quality standards assisted them when working in partnership or when

involving external agencies; c) whether the quality standards helped them to evaluate their work; e) whether they used the competencies section of the quality standards manual.

The next series of questions were tailored to elicit responses on the quality of the manual and training. Specifically it asked respondents to; a) comment on the overall content of the quality standards manual and its relevance to substance use education; b) comment on the overall clarity of the standards and performance indicators included in the quality standards manual; c) identify recommendations for improving the manual; d) identify research papers or evidence which might inform future sections when developing the manual.

The next series of questions asked specifically about respondents' experiences of organising and delivering quality standards training. Respondents were asked to identify; a) whether they had delivered quality standards training; b) if they received any support from their local/regional drugs task force to advertise, promote and organise the training; c) how they targeted participants to attend; d) what types of issues in relation to best practice in substance use education emerged during the training; e) feedback received in relation to the relevance of the training. For those who had not yet delivered training they were asked to give some insight as to why not and to identify the barriers/challenges in rolling out the training in their areas.

Finally, an open section was provided, warmly inviting respondents to make recommendations for the Drug Education Workers Forum in terms of the programme of training in quality standards.

2.3.1 PILOTING

The follow up survey was piloted with a sample of the research population. Eleven respondents (seven female and four male) from the South West RDFT, Southern RDTF and East Coast RDTF, participated in the pilot stage of the research. The survey was refined as a result of the pilot; in particular it was shortened from 38 to 26 survey items. It was also refined to remove any repetition and to also provide better clarity in questioning.

2.3.2 DISTRIBUTION

The survey was implemented online. It was created and uploaded to the software Survey Monkey which is an online programme that facilitates respondents to complete their survey anonymously online. The survey was initially e-mailed to all participants who gave a contact e-mail address which was 362 in total. Then, allowing for mail delivery failure and out of office replies, the total sample was 302. Following an initial low response to the questionnaire, the survey was also distributed to all the drug task forces who were asked to circulate it via their mailing lists. Ninety eight people in total responded to the questionnaire.

2.3.3 ANALYSIS

The data were manually inputted into the software programme Statistical Package for the Social Sciences (SPSS). Descriptive analysis was then performed on the data. The results of the analysis are outlined in the following chapter.

Open ended comments in which participants wrote freely were analysed thematically and grouped into specific categories which are represented in the report.

3. ONE DAY TRAINING EVALUATION

3. ONE DAY TRAINING EVALUATION

This chapter provides a summary of the feedback that was received from those who attended one day QSSE training. In total, 521 participants attended this training. This chapter provides brief demographic information and outlines respondents' experiences with regard to participation in the quality standards training. Three hundred and eighty two training evaluations were received from the training sessions.

3.1 YEAR OF TRAINING

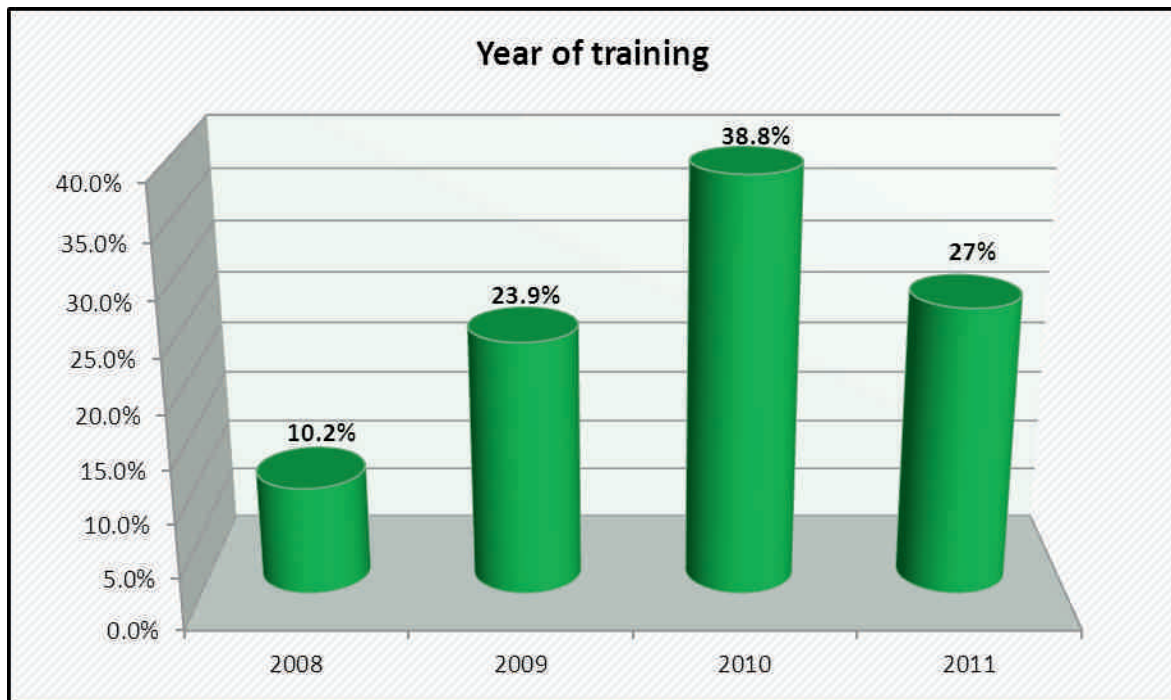


Figure 3.1

Three hundred and eighty one participants answered this question. As can be seen from Figure 3.1 the majority of training evaluations were received in 2010 (n=148). One hundred and three (27%) participant evaluation forms were received in 2011. Ninety one (23.9%) participant evaluation forms were received in 2009. In 2008, the first year the training was rolled out, the lowest number of training participation is evident, which was just over 10% (n=39) of the total number of evaluations.

3.2 GEOGRAPHICAL LOCATION OF TRAINING

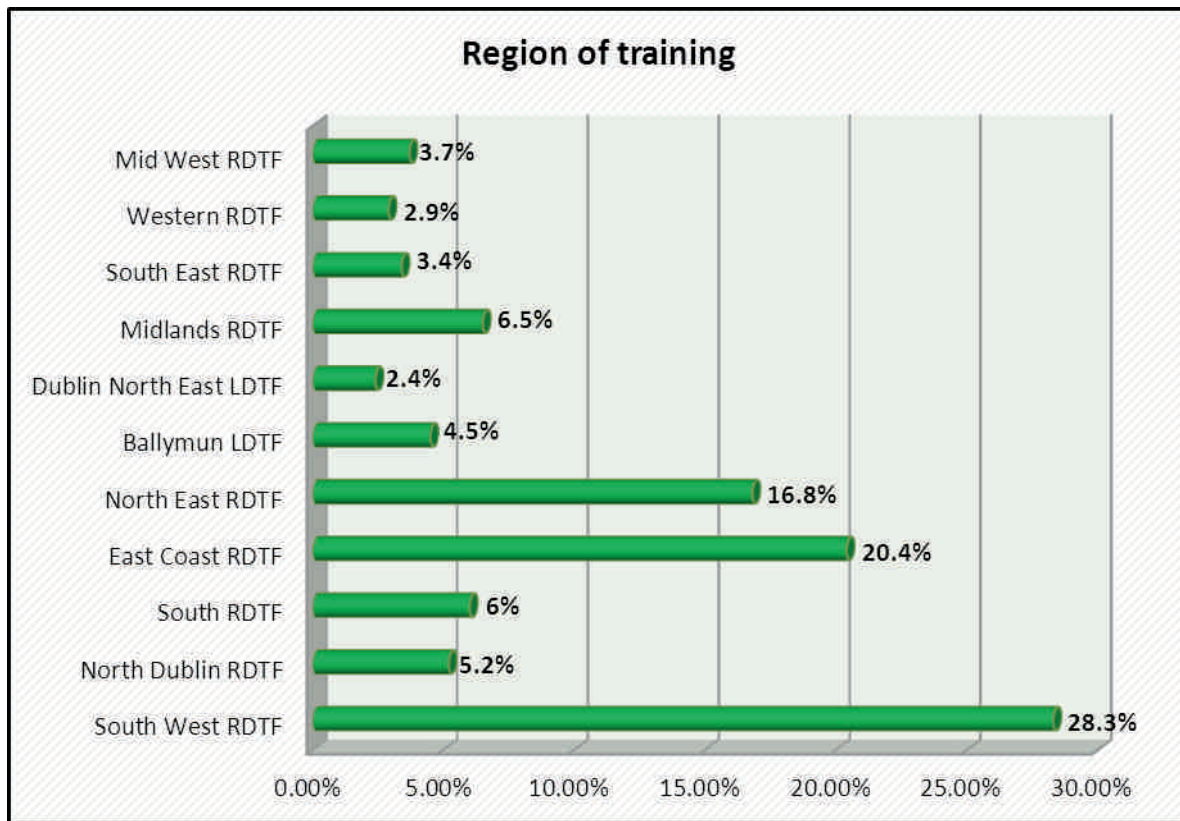


Figure 3.2

Three hundred and eighty two participants answered this question. Over a quarter (28.3%) of the training was conducted in the South West and 20.4% (n=78) occurred on the East Coast. 16.8% (n=64) of the training occurred in the North East, 6.5% (n=25) in the Midlands, 6% (n=23) from the South RDTF. 5.2% (n=20) of the training occurred in the North Dublin region and 4.5% (n=17) from the Ballymun area. The remainder of the training consisted of 3.7% (n=14) from the Mid-Western area, 3.4% (n=13) from the South Eastern area, 2.9% (n=11) from the Western area and 2.4% (n=9) from Dublin North East.

3.3 UNDERSTANDING OF MANUAL

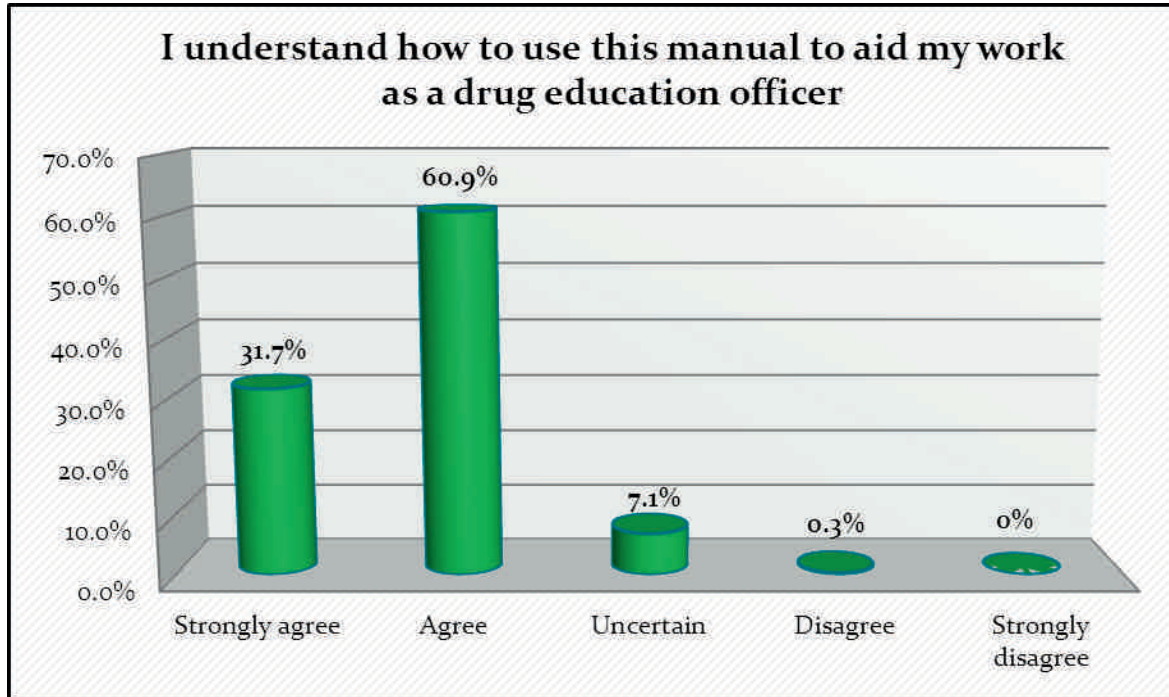


Figure 3.3

Three hundred and seventy nine people answered this question. Over 90% of participants agreed that after the training they now understood how to use the manual to aid their work as a Drug Education Officer with 60.9% (n=120) of participants agreeing and 31.7% (n=231) strongly agreeing in this case. 7.1% (n=27) of participants were uncertain while one person (0.3%) disagreed with the statement. No respondent strongly disagreed with the statement.

3.4 CONFIDENCE IN USING SKILLS LEARNED DURING TRAINING

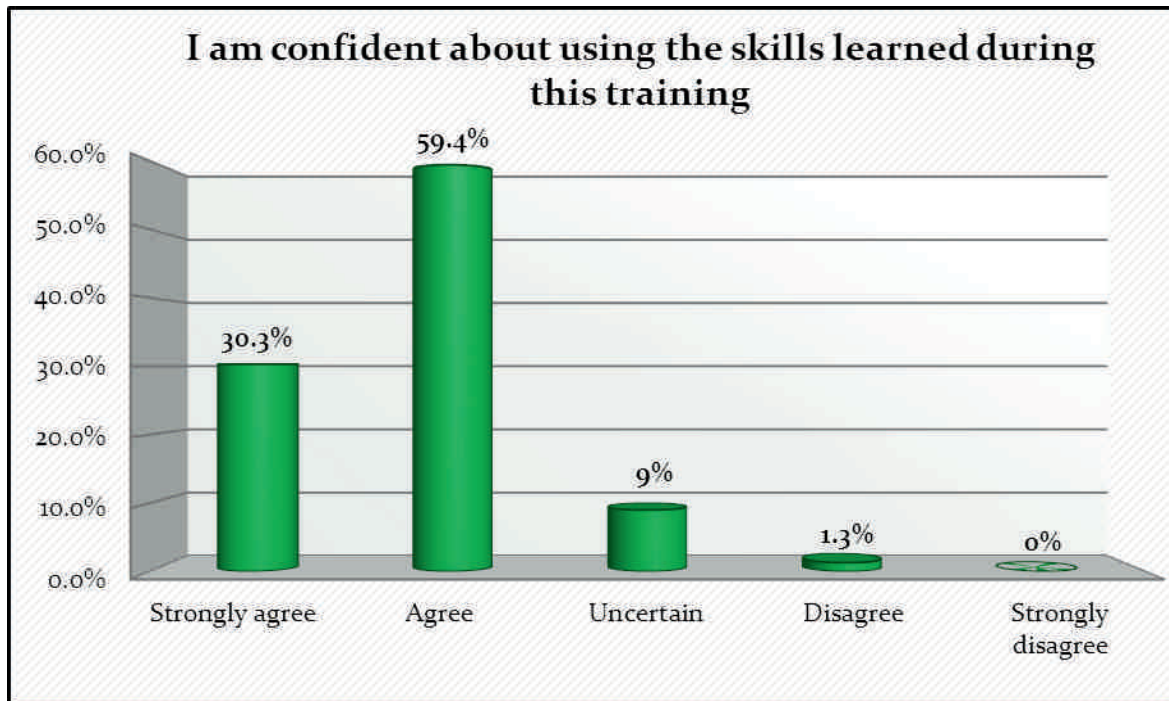


Figure 3.4

A total of 379 participants answered this question. The efficacy of the training is evident in the significant positivity of responses to this question, with the majority of participants (89.7%) agreeing or strongly agreeing with the statement 'I am confident about using the skills learned during this training' (115 respondents strongly agree while 225 respondents strongly agree with the statement). 9% (n=34) of participants were uncertain while 1.3%(n=5) disagreed. No respondent strongly disagreed with the statement.

3.5 AWARENESS OF PRINCIPLES BEHIND THE DEVELOPMENT OF THE QS MANUAL

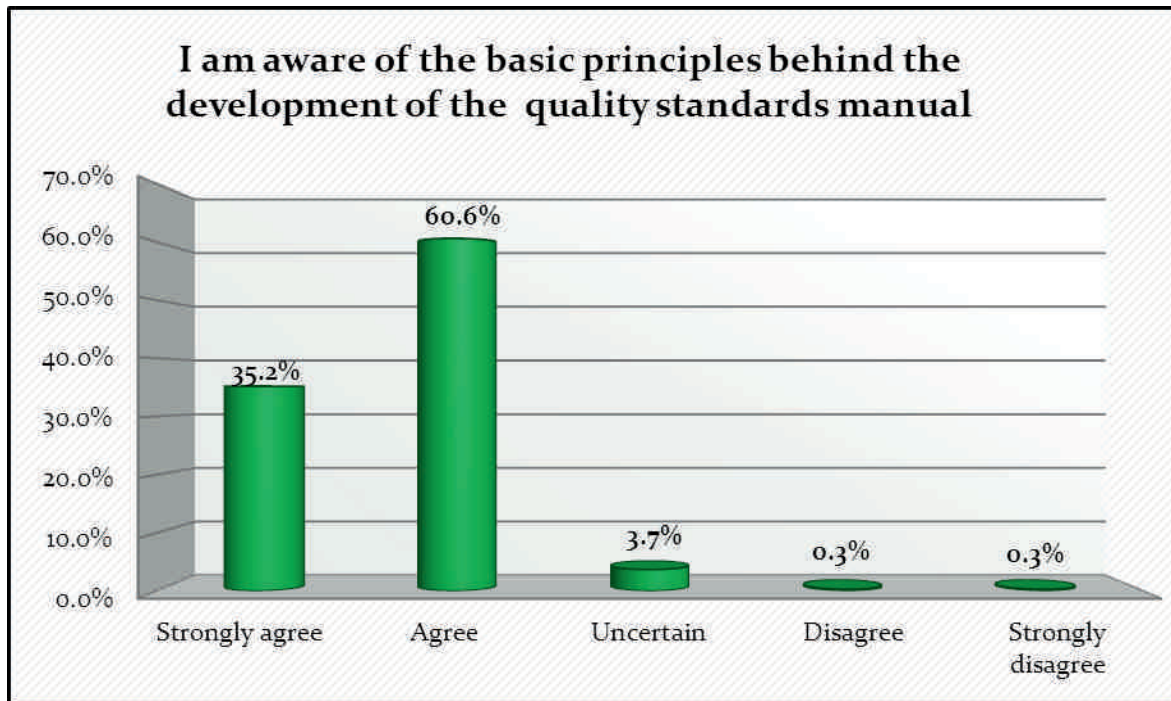


Figure 3.5

In total, 381 participants answered this question. Again the responses to this question are positive with 95.8% answering affirmatively. Sixty per cent (60.6% n=231) agreed and 35.2% (n=134) strongly agreed that post training they were now familiar with the principles underpinning the quality standards. 3.7% (n=14) of participants were uncertain while 0.3% (n=1) of participants disagreed and strongly disagreed respectively that they were familiar with the underlying principles.

3.6 USEFULNESS OF TOPICS COVERED IN TRAINING

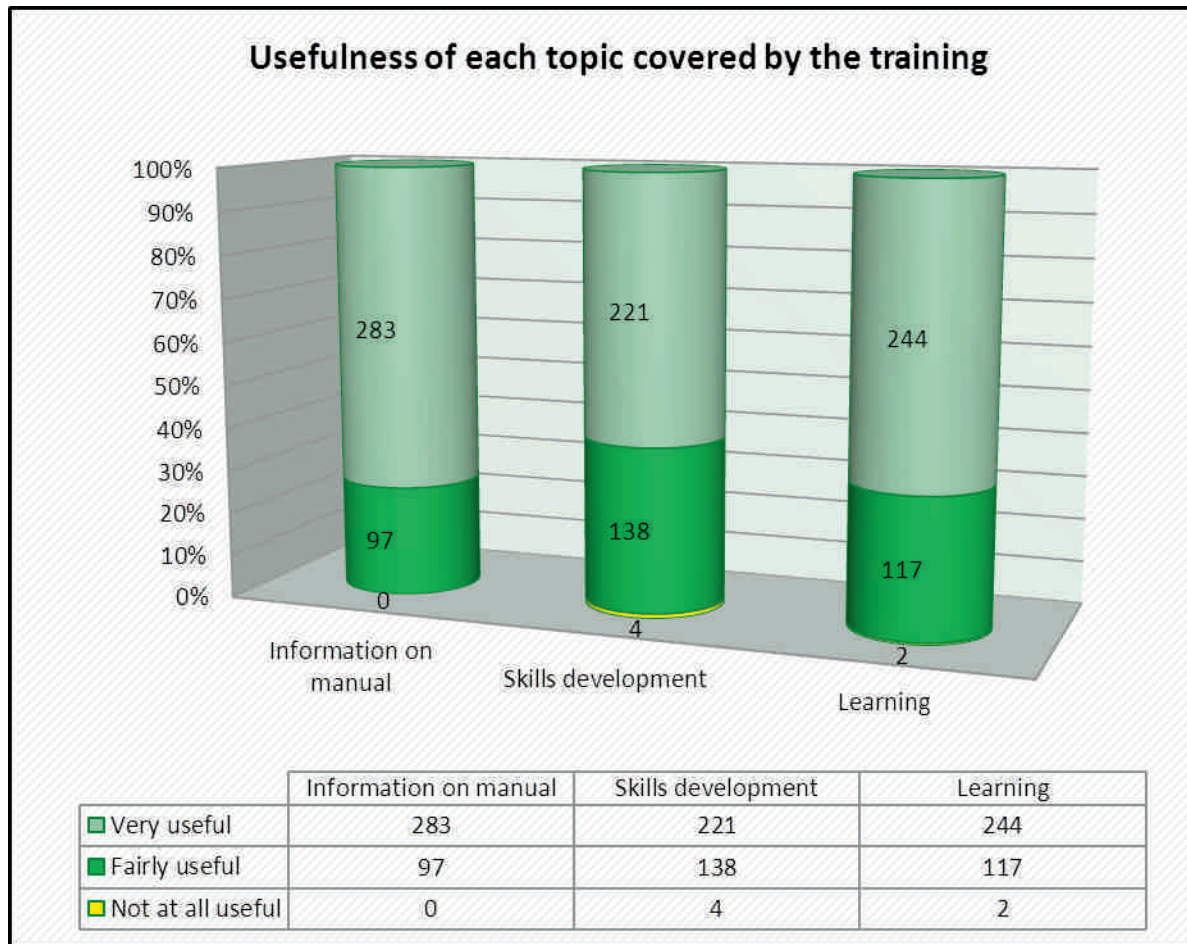


Figure 3.6

In total, 380 participants responded to the usefulness of training specific to information on the manual, 363 participants answered the section on the usefulness of the topic of skills development and 363 participants also answered on the usefulness of the topic of learning. Respondents were also given the opportunity to expand on their responses and the qualitative comments received for this section were varied. Again positive responses were very evident.

3.6.1 INFORMATION ON MANUAL

Seventy four per cent (n=283) of participants indicated that the information on the manual was very useful and over a quarter of participants (n=97) identified it was fairly useful. No participant felt that it was not at all useful. Some emphasised that there was *"too much information"* (Q.R. 61) and also stressed the difficulty of comprehending the language used in the manual *"terms and language use,*

not in terms everyone can understand" (Q.R.5).

3.6.2 SKILLS DEVELOPMENT

For the section on skills development, a total of 363 participants answered the question. 61% (n=221) of participants identified it as *'very useful'*, 38% (n=138) rated it as *'fairly useful'* with 1% (n=4) rating this section as *'not at all useful'*. Positive feedback included comments such as: *"excellent training and practical use of manual very relevant" (Q.R. 36); "extremely usable and excellent in delivery" (Q.R. 44);*

3.6.3 LEARNING

A total of 363 participants answered the section on learning during the training. Again very positive responses were elicited with 99% reacting positively. Sixty seven per cent (n=244) found it *'very useful'*, 32% (n=117) found it *'fairly useful'* while 1% (n=2) found it *'not at all useful'*. Comments on learning included: *"the course has really helped me in focusing, preparing, delivering and evaluating any programmes I may deliver" (Q.R.42).*

It is noteworthy to mention that the majority of the comments received for this section were positive, commending the manual, the training, as well as the training delivery. Some of the comments received for this question were as follows;

"very clear and informative. Need to make more user/reader friendly versions" (Q.R. 27)

"I feel the manual is fantastic and I will definitely use it in my work" (Q.R. 37)

"great piece to refer to and applicable to my role" (Q.R. 57)

One respondent experienced ambiguity in the question, *"don't really understand what you're asking re skills dev and learning" (Q.R 26).*

3.7 USEFULNESS OF METHODS USED IN TRAINING

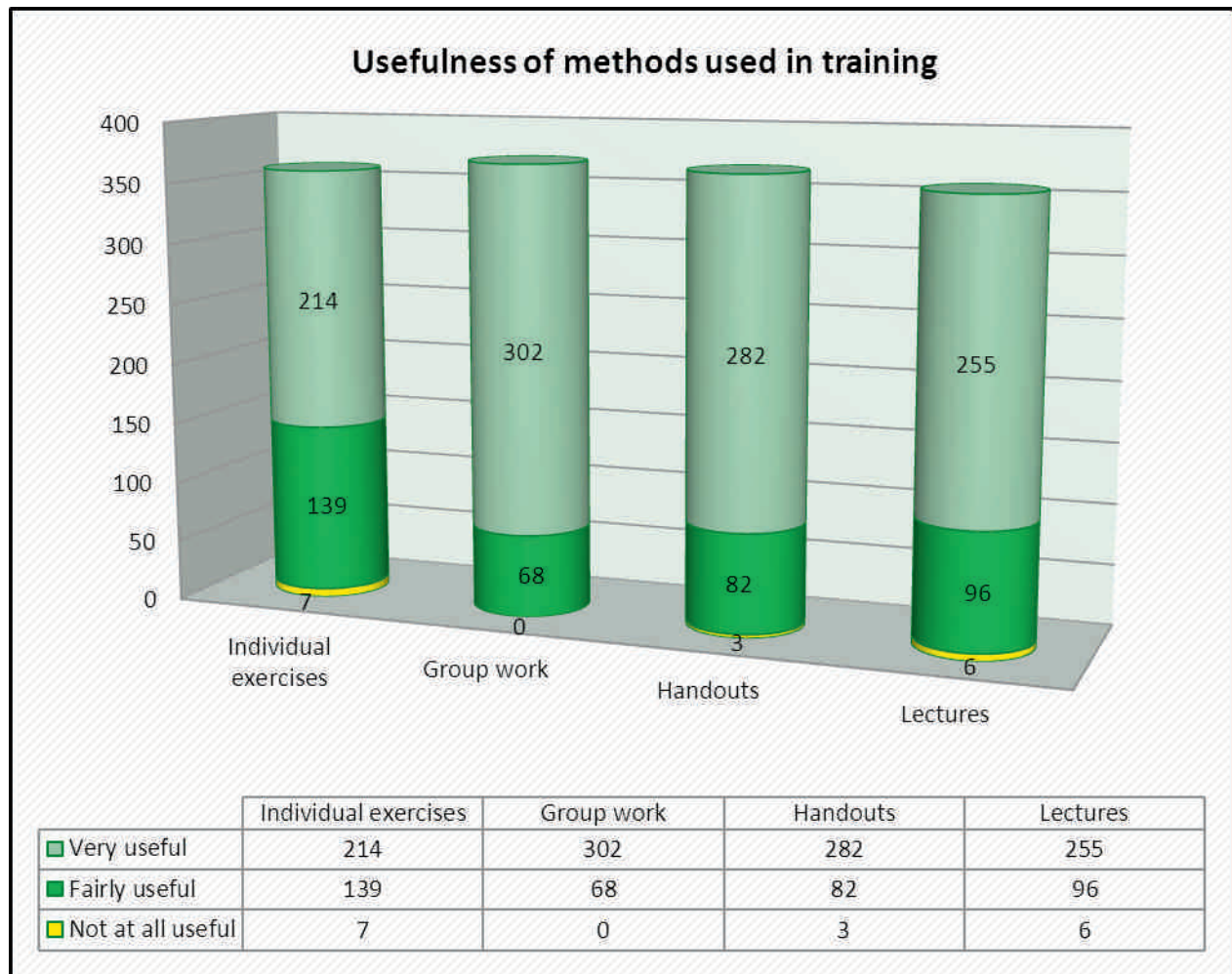


Figure 3.7

This question sought to determine how useful participants found the various methods used during the training. These methods comprised individual exercises, group work, handouts and lectures. Additional space was also provided for respondents to elaborate on their answers. Seventy two participants utilised this opportunity.

3.7.1 INDIVIDUAL EXERCISES

In total, 360 participants answered this question. 59% (n=214) of participants found the individual exercise method 'very useful', while 39% (n=139) found it 'fairly useful', 2% (n=7) of participants did not find it useful. Some participants indicated a desire for more exercises as well as more times for this aspect of the training, as was evident in comments such as ; "need more exercises" (Q.R. 4);

“more time needed for exercises” (Q.R. 17)

3.7.2 GROUP WORK

In total, 370 participants answered this question. The majority of participants (82%) found the group work exercises *'very useful'*, 18% (n=68) found these *'fairly useful'* while no respondent rated these as *'not at all useful'*. Comments included: *“the group work component was best in understanding” (Q.R. 3)* *“group work and facilitator far better than lectured approach” (Q.R. 29)*; *“some of the group exercises went on too long” (Q.R. 46)*; *“found case studies most beneficial” (Q.R. 16)* *“case studies were very good – allowed useful discussion” (Q.R. 37)*

3.7.3 HANDOUTS

In total, 367 participants responded for this part of the question. Over three quarters (77%) of participants found the handouts *'very useful'*, 22% (n=82) of participants identified them as *'fairly useful'* while 1% (n=3) of participants identified them as *'not at all useful'*: *“some handouts were confusing 1& 2 more explanation would help when giving it out, as materials new to people” (Q.R. 26)*.

3.7.4 LECTURES

In total, 357 responded to this section of the question. 71% (n=255) of participants found the lecture method *'very useful'* and over a quarter (26%) found it *'fairly useful'*. 2% (n=6) found it *'not at all useful'*. *“Lectures too long more exercises would be better” (Q.R. 52)*.

3.7.5 ADDITIONAL COMMENTS

The conduciveness of the variety of styles of learning was a frequent theme and many participants commented positively on the variety of learning methods used; *“good balance between all methods” (Q.R. 36)*; *“the practical application of the manual in cases was very beneficial” (Q.R. 34)*; *“Variety essential to hold people’s attention” (Q.R. 35)*; *“I felt the mixture of methods was fantastic and clearly delivered” (Q.R. 38)*; *“good mix of methods used” (Q.R. 49)*; *“I have discovered I learn better with a number of different styles all of which were met today” (Q.R.70)*.

Some of the comments received were constructive in nature, offering some recommendations on the facilitation methods used during the training.

“some of the presentations were all over the place, flicking from different sections too much” (Q.R.

1);

“overall very good, but a lot to take in during one day” (Q.R. 19);

“a lot was covered, manual huge, need time to digest it – but very useful tool to have” (Q.R. 57);

“a lot of information given – obviously reading is required in spare time” (Q.R. 66);

“all afternoon ones were useful, v.useful. The morning less so” (Q.R. 68).

Feedback for the facilitators was also a frequent theme: *“excellent facilitator” (Q.R. 5); “one of trainers didn’t seem that familiar with slides on powerpoint – delivery slow and unsure” (Q.R. 7); “both facilitators were very good” (Q.R. 11); “facilitators were very reflective” (Q.R. 12); “I felt that a clearer explanation of the task would help stop confusion” (Q.R. 15); “facilitators were very good. Knew manual and kept everything going. Made learning fun as well as getting messages across” (Q.R. 23); “excellent facilitation skills” (Q.R. 28); “facilitators seemed very comfortable with material and very knowledgeable” (Q.R. 32); “facilitators were excellent! All worked very well and naturally together” (Q.R. 41); “fantastic facilitators worked so well together created a lovely respectful atmosphere” (Q.R. 42).*

3.8 RECOMMENDATIONS FOR FURTHER TRAINING

This was an open ended question in which respondents could make recommendations for future training. Two hundred and twenty eight participants responded to the question. Of this two hundred and eighty three, eighty three did not make recommendations and this was evidenced in comments such as: *“nothing”* or *“n/a”* as their answer. Many of these respondents used the opportunity to make positive comments regarding the training for example: *“The training was brilliant. Don’t need anything else” (Q.R. 86).*

The remaining responses made recommendations in relation to a variety of areas. Twenty five respondents wrote specifically about time issues and twenty four of these articulated the need for more time for the training indicating that it was too much material to cover in one day.

3.8.1 MANUAL

Respondents used the recommendations space to complain about the language of the manual which participants viewed as difficult and ‘too wordy’. Because of the perceived complexity of the language used, some participants felt it would have been more beneficial if they had use of the manual before the training, so that they had time to become familiar with the content and thus potentially would be better equipped on the day of training. *“By giving out manuals sooner, you might generate discourse quicker instead of reading out what’s already on a powerpoint presentation on screen” (Q.R. 13).* Another suggestion was a guide be created for how to use the manual so that the content is easier to understand.

3.8.2 CONTENT

Respondents also used the comment space to make reference to the content of the manual. Case studies emerged frequently as a positive methodology that respondents would like to experience more and they were perceived as facilitating understanding of the manual content: *"The case studies were most relevant to the understanding of using the manual"* (Q.R. 3).

The need for more practical examples of how to use the manual was cited by many as something that should be added to the training: *"a more practical based way of planning activity using QS"* (QR 14); Another practical suggestion given was to *"look at existing programmes to see do they meet the standards. It would have been realistic"* (QR. 66).

Four participants articulated the perception that the training would have benefitted from a more individualised approach for those who have varying roles in different organisations: *"should have got background of area people were working - and do a short piece on how manual could be individualised to different roles"* (Q.R. 36).

Two participants suggested that role play would be a good addition to the training. *"role play from scenario cases"* (Q.R. 198).

3.8.3 PRACTICAL SUGGESTIONS

In relation to the venue some practical suggestions for the training included having tables put in the room to put the manuals on, as well as providing water throughout. The CD's and DVD's that were used in the training were considered useful and one respondent indicated that participants should get the *"use of CD or DVD for short period"* (Q.R. 228). Another respondent suggested that a handout be provided of various *"sites and links providing up to date info"* (Q.R. 213) on drug/addiction issues. The value of condensing the amount of sheets handed out during the training into more concise fact sheets was also suggested as being potentially of more benefit. Respondents suggested that it would be beneficial to have further information given to them in relation to follow on training they can do as well as more information on *'other standardised manuals'* (Q.R. 225).

3.9 PARTICIPANTS RECOMMENDATIONS FOR REMOVAL FROM THE TRAINING

This was also an open space comment section which 151 respondents utilised. However of these comments, 104 did not cite anything that should not have been added to the training, they simply wrote comments such as *"nothing"* or *"all was useful."* Thus only 47 participants made a recommendation for this section.

Some suggested that the training was quite repetitive and could be reduced. *"It was extremely repetitive. Same stuff over and over while not learning anything"* (QR. 1); *"The time allocated to the training could have been reduced to 1/2 day"* (QR 6); *"The training could have condensed to make a shorter day. Manuals can be gone through locally in team meetings, self-explanatory in a lot of ways"* (Q.R.7); *"A lot of time spent on topics that wasn't really required. The manual is fairly straight*

forward" (Q.R. 8); One person specifically suggested that the "*competencies checklist should be left for people to do at home or afterwards*" (Q.R. 11).

Others suggested changes to the manual itself indicating that the manual itself needed changing as it was "*too big*" and "*It can be hard skipping from section to section*" and so a "*more simplistic version of QS would be very useful*" (Q.R. 20). It was also recommended that the language of the manual be changed, "*the big words - as it is not everyday language*" (Q.R. 53)

In relation to the training methods a number of comments were made: "*not sure of relevance of flip chart exercise to rest of training*" (Q.R. 30); "*maybe one set of case studies would have been sufficient*" (Q.R. 35); "*bits could be shorter - reading through slides*" (Q.R. 37); "*a bit too much time spent explaining manual*" (Q.R. 46); "*less lectures and more experiential work around working with the manual*" (Q.R. 74); "*long explanations*" (Q.R. 75)

"*reduce time spent on PowerPoint*" (Q.R. 79); "*slight over-reliance on PowerPoint*" (Q.R. 151)

"*the information in relation to the manual done via projects was unnecessary, the practical work enabled me to learn easier*" (Q.R. 76); "*lecture on how to use the manual, layout was too long - repetitive*" (Q.R. 135); "*didn't like continuously being broken into different groups, bit unsettling*" (Q.R. 143).

3.10 ASPECTS OF THE TRAINING THAT COULD BE COVERED DIFFERENTLY

This was an open comment question. One hundred and eighty five respondents answered this question. However, 96 of these did not provide any specific feedback, comments included "*none*"; "*nothing*" "*too new to the subject area to comment*" "*all very relevant*" etc.

For those people who provided constructive feedback a variety of suggestions were provided. Some suggested that the explanation of the manual could have been better; "*the way of explaining the pack, I felt it was all over the place*" (Q.R. 1); "*the manual- it jumped from section to section, one bit at a time would have made more sense*" (Q.R. 2); "*either go through manual by hand with group or use powerpoint to do it. Not both*" (Q.R. 12).

Again, the difficulty of understanding the language in the manual emerged as a problem for many participants: "*language could be simplified in the manual*" (Q.R. 16); "*de-mystifying the language, too much jargon in the manual*" (Q.R. 20); "*cater for people with literacy difficulties*" (Q.R. 86).

When participants wrote about the individual exercises in the training they suggested the use of more specific contexts: "*should use more specific scenarios*" (Q.R. 24); "*more realistic scenarios*" (Q.R.84); "*possibility of more open discussion and real life examples and resources*" (Q.R. 90). Participants also indicated that the "*Individual exercise was a bit confusing*" (Q.R. 26) and suggested that more emphasis be put on group exercises in order to better comprehend the manual because "*group work and case studies very helpful*" (Q.R. 162).

3.11 MEETING EXPECTATIONS

Respondents were asked if the training met their expectations. This question was also an open-ended question. Three hundred and thirty eight participants responded to this question. Two hundred and sixty six participants (78%) were affirmative in their responses as was evidenced in answers such as 'yes', 'absolutely' or 'exceeded' Some of the reasons that participants stated were: "I now have a greater knowledge and understanding of substance misuse education" (Q.R. 26); "It gave the knowledge and provided the opportunity to practice the skills" (Q.R. 72); "exceeded my expectations, training relevant to work in which I am involved in relation to policy" (Q.R. 142).

Nine participants (3%) disagreed that the training met their expectations. For those who cited 'no' in their answer, some of the reasons include; the lack of clarity around explaining the pack, the belief that the training should be aimed more at managers and policy makers, an expectation that there would be definite specific guidelines for the delivery of substance use education and also that the training was too intensive and done too quickly. The remaining participants made comments about the training and some stated that they weren't too sure what to expect but were positive about the outcome. "My expectations were not clear at the beginning but I took something out of the workshop" (Q.R. 178); "Some. I do feel we could have stayed on one specific point instead of moving from youth to community" (Q.R. 3); "I always expect something different but it met the objectives" (Q.R. 237); "not enough info- but that was my fault. Manual & training were excellent and very important for youth workers" (Q.R. 328).

3.12 ADDITIONAL COMMENTS

The final section of the questionnaire was an open comment space. In order to represent the scope of these comments they have been coded into positive comments; negative comments; constructive comments and other. From the following table it can be seen that 271 comments were coded.

Type of feedback	Number of comments	Percentage of comments
Positive	166	61%
Negative	38	14%
Constructive	52	19%
Other	15	6%
Total	271	100%

Table 3.1

The positive comments included thanking the facilitators for very worthwhile training as well as commending the manual. For example: "It's good to have a quality manual, and will be good to apply to developing future programmes" (Q.R. 3) "well done good delivery and very informative" (Q.R. 32).

The negative comments predominantly centred on the difficulty of the language used in the manual.

For example: *"the language used was very confusing and open to multiple interpretations. This was frustrating and very off putting"* (Q.R. 72); *"manual is a bit long winded and use of language is quite difficult, at times would put you off unless you have practice in it"* (Q.R. 21), *"the manual was very hard at times until it was simplified by the trainers"* (Q.R. 43).

Many of the participants offered constructive feedback in relation to the training and the manual. *"I would suggest that you could add a jargon buster section to the manual - so that people can use in tandem with the manual"* (Q.R.30); *"What might be useful is a follow-up couple months later to see how everyone gets on with the materials, anything then that might need clarifying etc."* (Q.R.104); *"The terminology and words could be more user friendly"* (Q.R. 100).

Some participants indicated a sense that the potential of the manual will increase for them once a period of digestion occurs, for example, *"I'm sure on further inspection will have a greater understanding"* (Q.R. 42), *"hopefully in time it will be easier to navigate"* (Q.R. 45), *"the manual itself is beneficial once you get passed the barrier of language"* (Q.R. 79).

3.13 CONCLUSION

In summary, three hundred and eighty two evaluations were received from one day training sessions, evidencing a comprehensive roll out of training covering an extensive geographical area. Responses to the training are overwhelmingly positive as the data indicate. That the training was effective and met the goals, is evidenced in the data that 90% of participants understood how to use the manual to aid their work as drug education officers post training. The efficacy of the training is further evidenced in 89.7% of participants indicating confidence in using the skills learned in the training. Communication of the principles of the manual was also clearly successful with 95.8% affirming their awareness of the manual's underpinning principles post training. It is also noteworthy that 99% of participants found the information contained in the manual useful with the same percentage of participants identifying the usefulness of the skills development contained in the training. Also noteworthy is that 99% of participants responded positively to the learning facilitated during the training. The types of training activities also elicited similarly positive responses.

Of note in terms of improvement was the recurring theme of the complexity of the language contained in the manual. This was the main theme specific to improvement that emerged frequently throughout the responses. The explanatory comments provided by participants with regard to potential improvements also made reference to the process of going through the manual with suggestions for more simplistic approaches, but these comments were in the minority. Without doubt therefore, participants found the one day training experience to be useful and informative. The training experience clearly was successful in clarifying and disseminating the manual as the particularly high percentages of positive responses indicates.

4. TWO DAY TRAINING EVALUATION

4. TWO DAY TRAINING EVALUATIONS

This section details the results from the two day training of trainers in QSSE. These training days took place in 2007, 2008, 2009, 2010 and 2011. In total, 104 participants attended this training. After the training, participants were asked to provide feedback via questionnaire in order to evaluate the training. One hundred and three participants returned a questionnaire form on the day.

4.1 YEAR OF TRAINING

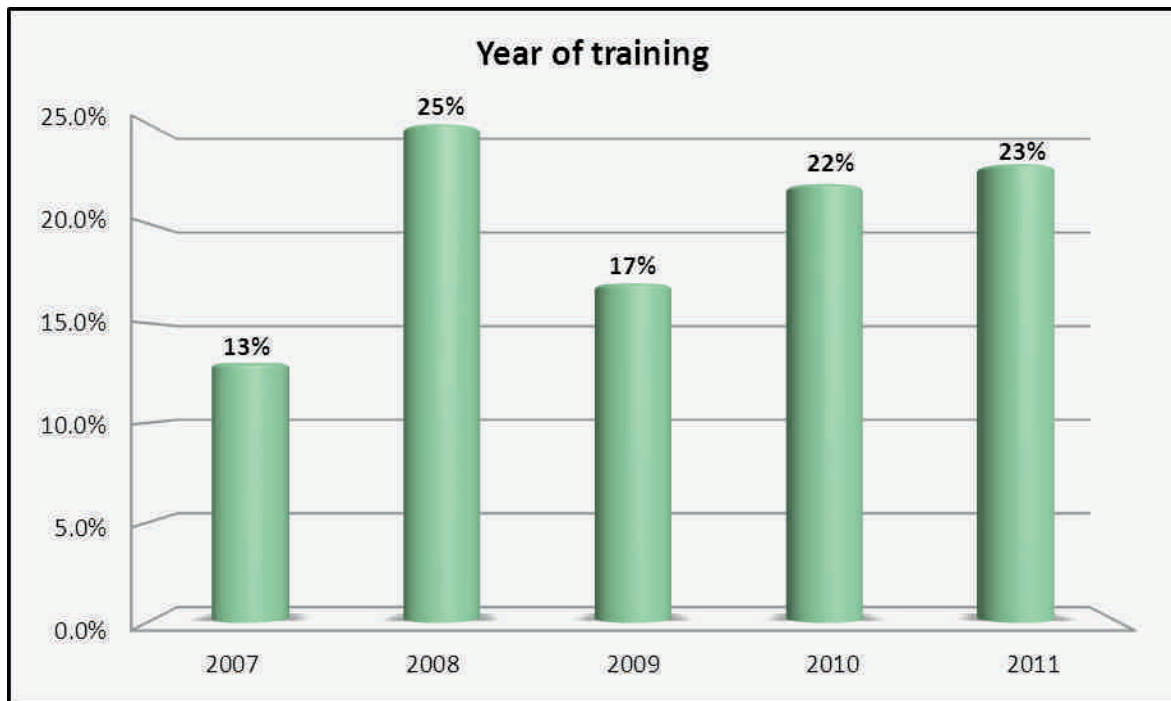


Figure 4.1

As can be seen from Figure 4.1 a quarter of all evaluations ($n=26$) were received in 2008. The years of 2010 and 2011 showed a similar uptake in the course, 22% ($n=23$) and 23% ($n=24$) respectively. In 2009, 17% ($n=17$) of people participated in the training and 2007 saw the smallest cohort of trainers as this was the first year of its implementation with 13% ($n=13$) of people participating in the course.

4.2 GEOGRAPHICAL LOCATION OF TRAINING

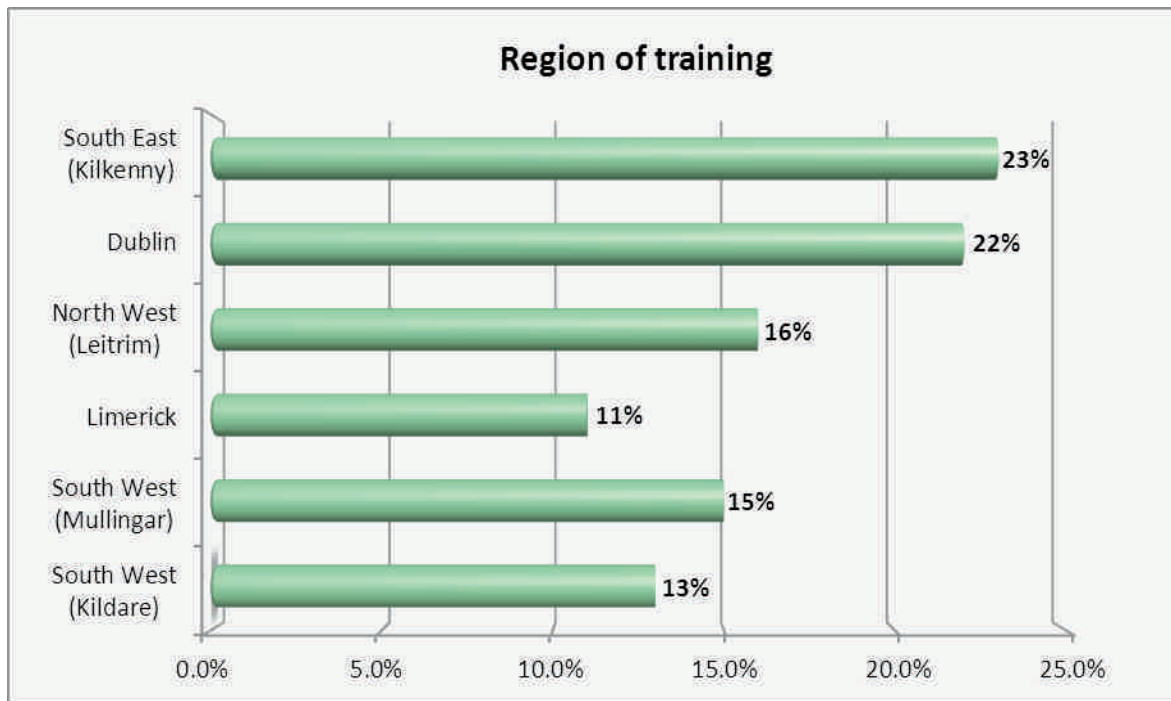


Figure 4.2

The two day training of trainers courses were conducted in six locations around the country, Kilkenny, Dublin, Leitrim, Limerick, Mullingar and Kildare. Kilkenny and Dublin were the regions where there were the most participants, 23% (n=24) and 22% (n=23) respectively. The North West area (Leitrim) accounted for 16% (n=17) of the participants while the South West (Mullingar) and South West (Kildare) training centres had 15% (n=15) and 13% (n=13) of participants, respectively. Limerick was the training centre with the least amount of participants with 11% (n=11) training here.

4.3 UNDERSTANDING OF MANUAL

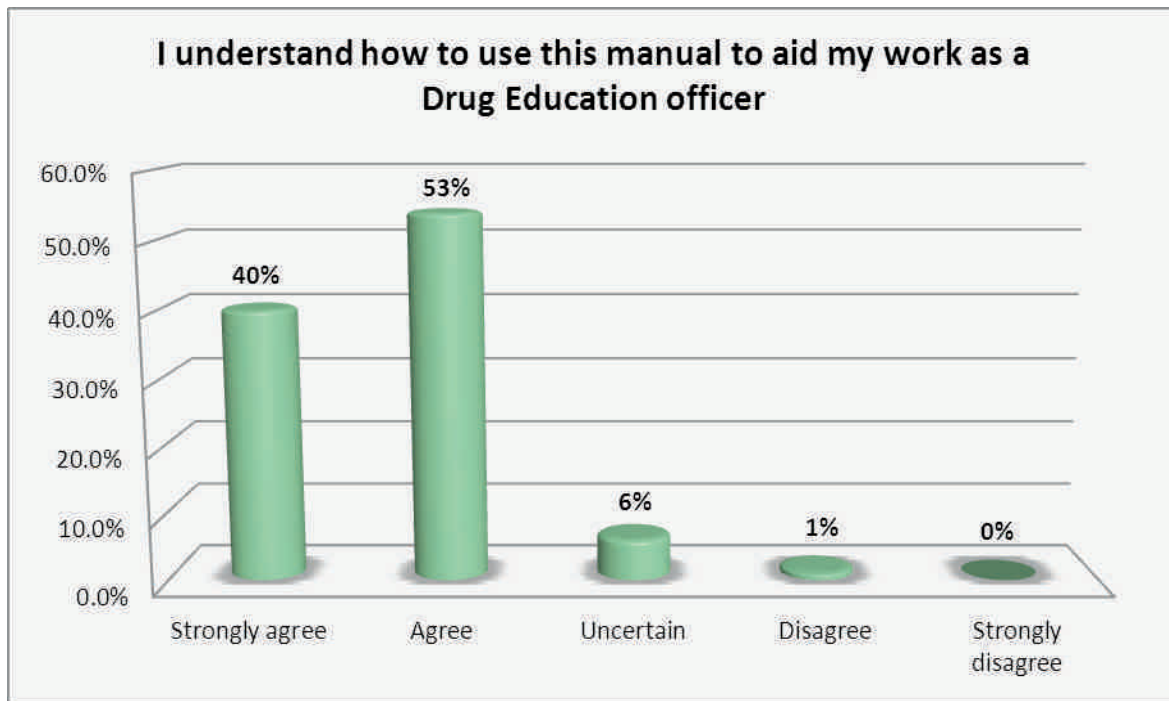


Figure 4.3

One hundred and one participants answered this question. The majority of participants agreed (93%) with the statement "I understand how to use this manual to aid my work as a Drug Education Officer" with 53% (n=54) 'agreeing' and 40% (n=40) 'strongly agreeing'. Only 6% (n=6) of participants were 'uncertain' and 1% (n=1) chose the option 'disagree'. No participant 'strongly disagreed' with the statement.

4.4 ABILITY TO DELIVER MANUAL TRAINING

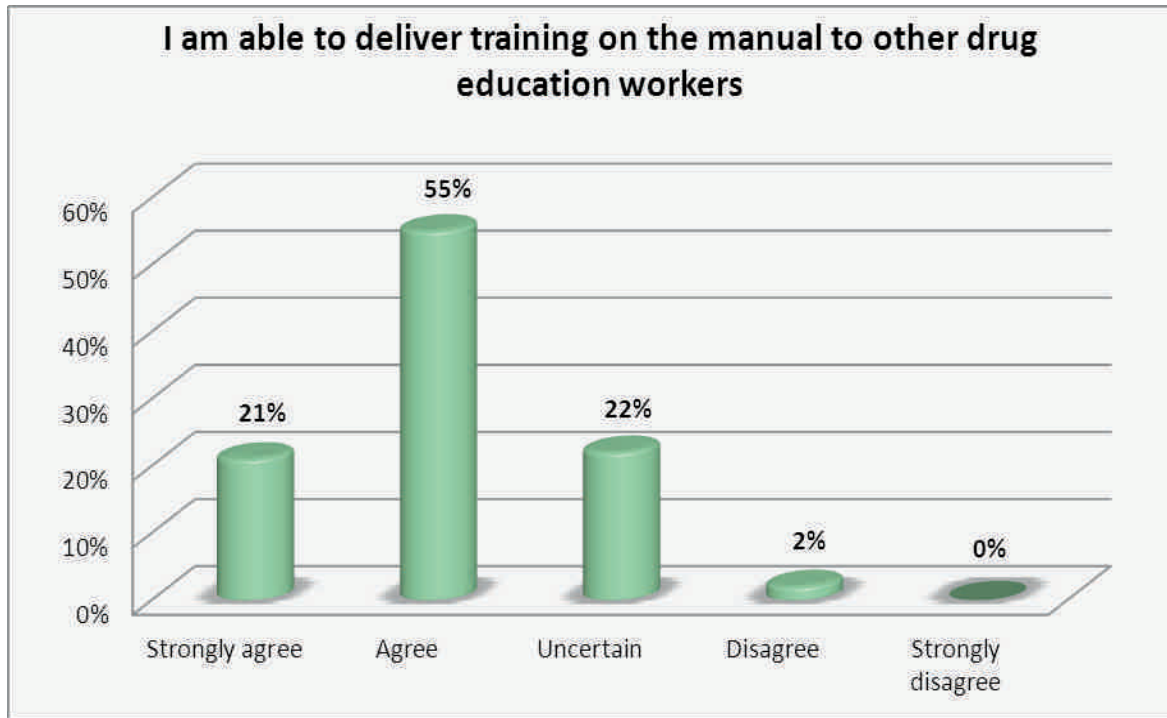


Figure 4.4

In total, 103 participants responded to the statement "I am able to deliver training on the manual to other drug education workers". The majority of the participants agreed with the statement with 21% (n=22) 'strongly agreeing' and 55% (n=56) 'agreeing' that they are "able to deliver training on the manual to other drug education workers". 22% (n=23) of participants were 'uncertain' and 2% (n=2) 'disagreed' with the statement. No participant "strongly disagreed" with the statement.

4.5 CONFIDENCE IN USING SKILLS LEARNED

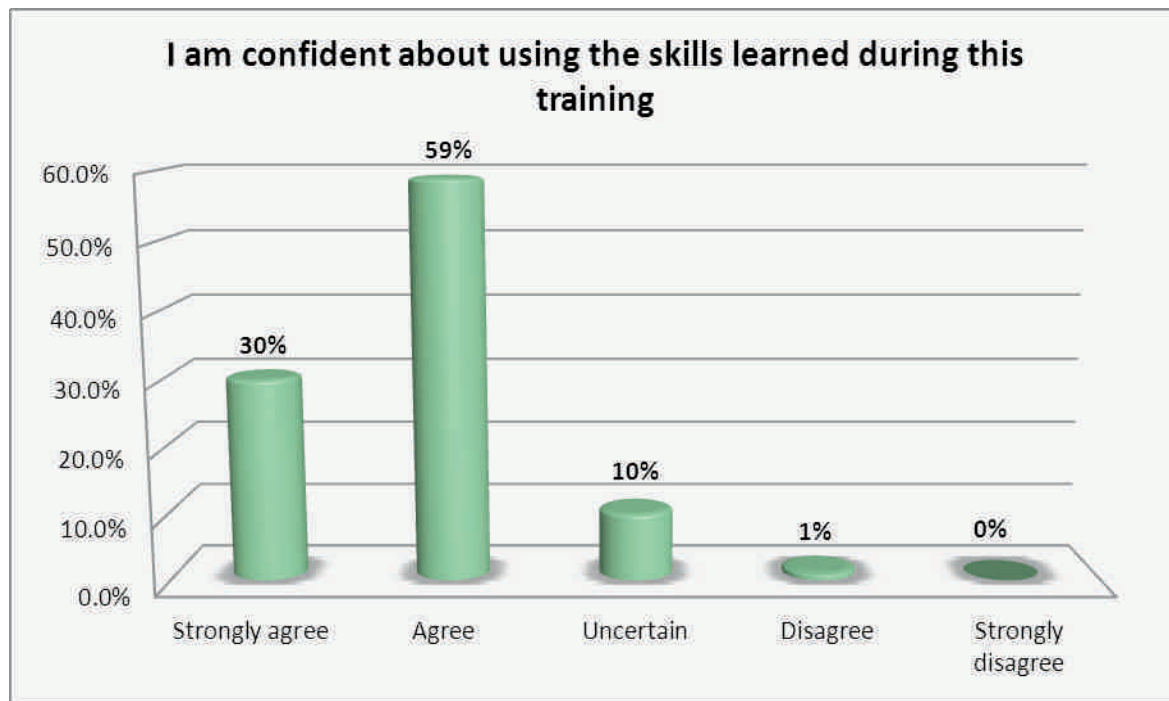


Figure 4.5

In total, 102 participants answered this question. The majority of participants agreed with the statement, 'I am confident about using the skills learned during this training' with 59% (n=61) 'agreeing' and 30% (n=30) 'strongly agreeing'. There were 10% (n=10) who were 'uncertain', 1% (n=1) who 'disagreed' and no participant that 'strongly disagreed' with the statement.

4.6 AWARENESS OF PRINCIPLES BEHIND THE DEVELOPMENT OF THE QS MANUAL

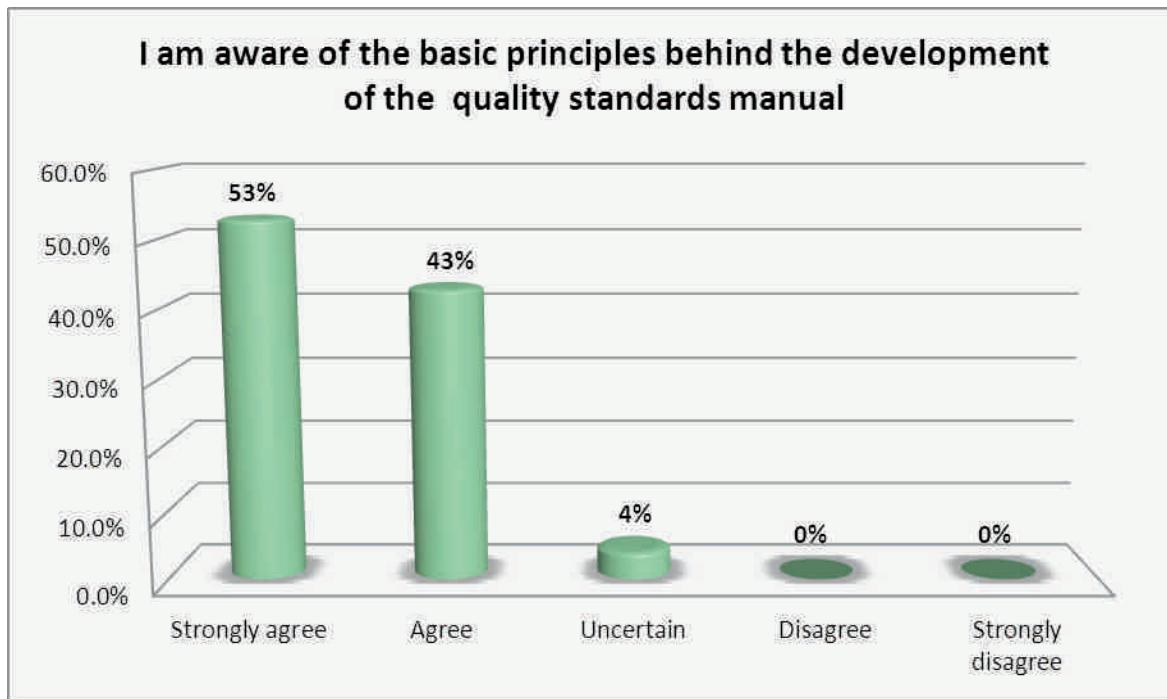


Figure 4.6

In total, 103 participants answered this question. In answer to the statement 'I am aware of the basic principles behind the development of the quality standards manual' 53% (n=55) 'strongly agreed' and 43% (n=44) of participants 'agreed'. 4% (n=4) of participants were 'uncertain' while no participant 'disagreed' or 'strongly disagreed' with the statement.

4.7 USEFULNESS OF TOPICS COVERED IN TRAINING

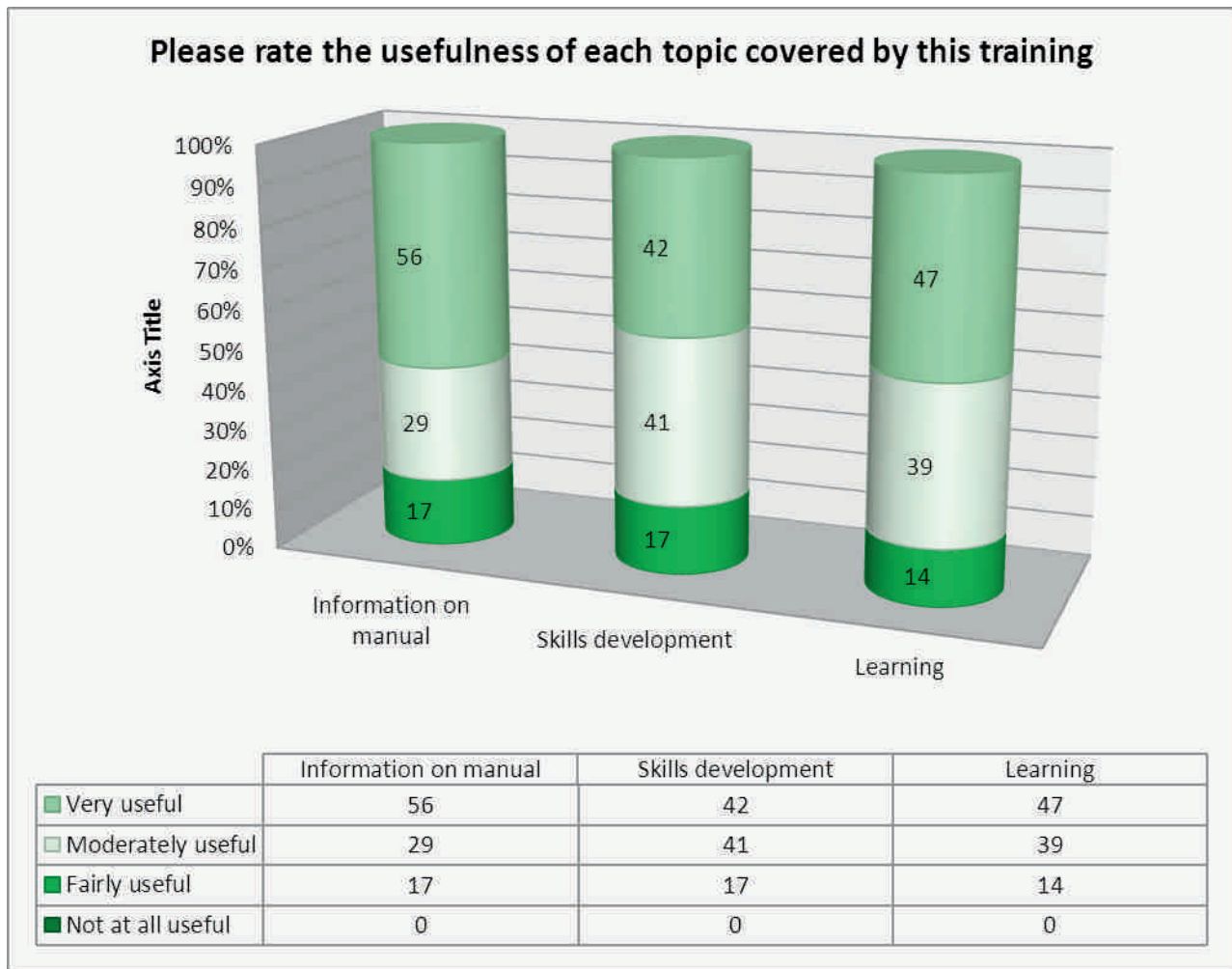


Figure 4.7

Participants were asked to rate the usefulness of the specific topics covered in training and these included: information on manual, skills development and learning.

4.7.1 INFORMATION

One hundred and two participants answered this section of the question on 'information'. Over half of the participants (n=56) found the information on the manual 'very useful', while 28% (n=29) found it 'moderately useful', 17% (n=17) found it 'fairly useful' and no participant rated the

information on the manual as 'not at all useful'. *"Maybe keys points of should be given out in summary, it's so big they may get lost/diluted"* (Q.R. 5) *"I could have done with more time in understanding case studies not in my area of work"* (Q.R. 10).

4.7.2 SKILLS DEVELOPMENT

One hundred participants answered this aspect of the question. In relation to skills development, 42% (n=42) of participants found it 'very useful' while 41% (n=41) chose 'moderately useful' and 17% (n=17) felt that it was 'fairly useful'. No participant chose the option 'not at all useful' when commenting. *"Mainly to be well competent in manual was achieved"* (Q.R. 7). *"Probably need more practice in manual to build self-competence"* (Q.R. 9) *"probably still needing to work out clarity for myself- will come with the use of the manual"* (Q.R. 11).

4.7.3 LEARNING

One hundred participants answered the final part of this question. When participants were asked to comment on the usefulness of 'learning', almost half (47%) found it 'very useful', 39% found it 'moderately useful' and 14% found it 'fairly useful'. No participant chose the option 'not at all useful' when responding.

4.7.4 ADDITIONAL COMMENTS

Additional comments provided by participants for the question included *"good connection through 2 days of information"* (Q.R. 15) *"delivery of each topic was excellent"* (Q.R. 14). *"very good facilitated discussions"* (Q.R. 8). The constructive feedback proposed that the language in the manual be simplified for ease of use *"Too much jargon"* (Q.R. 1).

Suggestions included that the manual should include a summary at the end highlighting the key points and include a *"draft needs assessment"* (Q.R. 1). The suggestion in relation to the training was that *"a more step by step walk thru of the manual and a little bit more time given to absorb it would have been useful"* (Q.R. 13).

4.8 USEFULNESS OF METHODS USED IN TRAINING

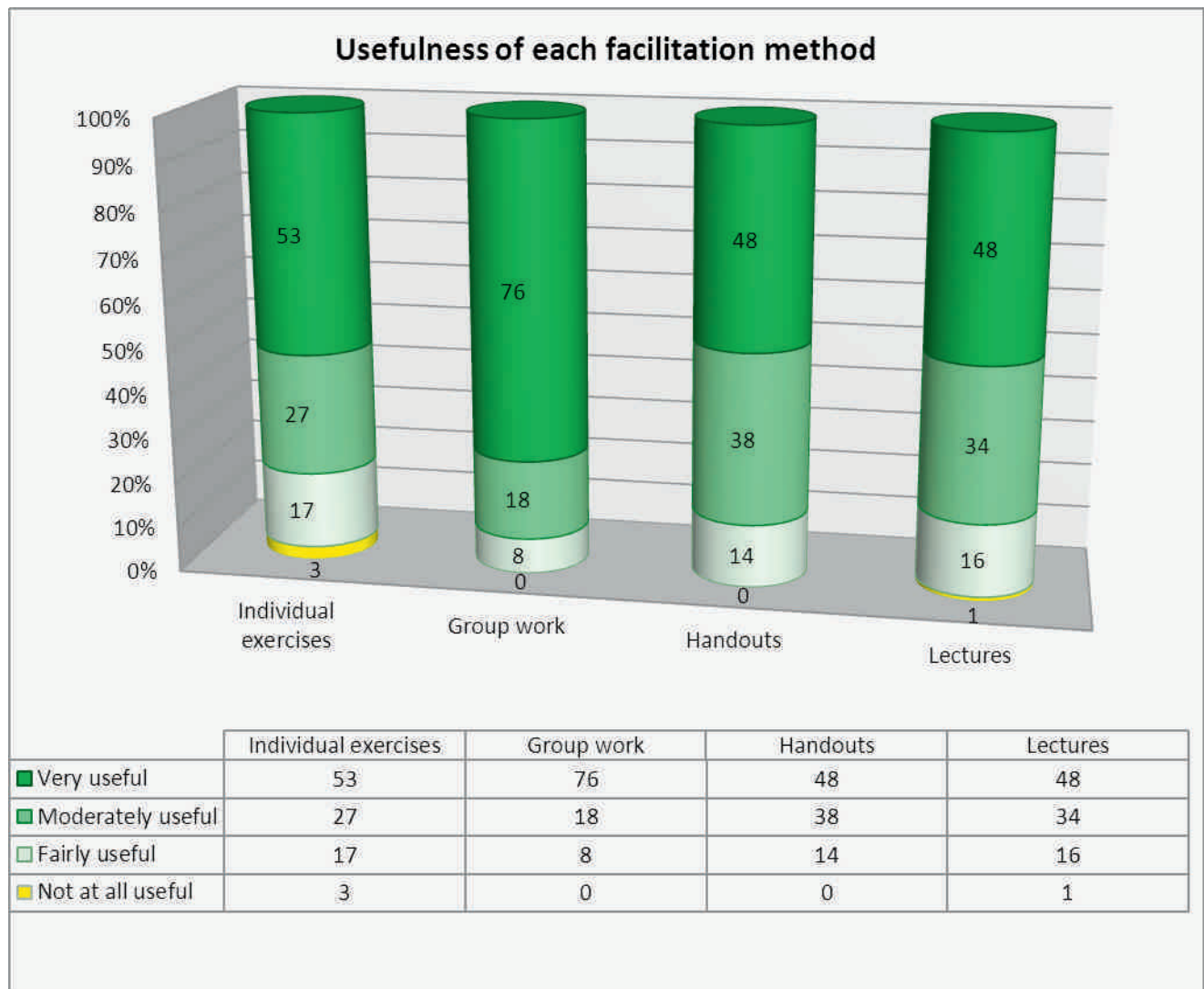


Figure 4.8

This question sought to determine how useful participants found the various facilitation methods used during the training, those being; individual exercises, group work, handouts and lectures.

4.8.1 INDIVIDUAL EXERCISES

In total, 100 participants answered this section. 53% of participants found this facilitation method

'very useful', while 27% found it 'moderately useful, 17% found it 'fairly useful' and 3% chose 'not at all useful'.

4.8.2 GROUP WORK

In total, 102 participants answered this section. The majority of participants (74%) found the group work exercises 'very useful', 18% found these 'moderately useful' and 8% found it 'fairly useful'. No participant rated these as 'not at all useful'.

4.8.3 HANDOUTS

In total, 100 participants responded to this section. Almost half (48%) of participants found the handouts 'very useful', 38% found them 'moderately useful' and 14% of participants felt these were 'fairly useful'. No participant felt these were 'not at all useful'

4.8.4 LECTURES

In total, 99 responded to this section. Almost half (49%) of participants found the lecture facilitation method 'very useful' while 34% found it 'moderately useful' and 16% found it 'fairly useful'. One person found it 'not at all useful'.

4.8.5 ADDITIONAL COMMENTS

Participants were given space to add a comment to their answer and 24 people responded. Four of those commented positively on the variety of approaches used,

"A good mix of styles and approaches" (Q.R. 10)

"Overall very good balance between "lecture" and "group work" (Q.R. 12)

"Well structured and a variety of tools keep training interactive" (Q.R.23)

"I feel that by using all the above methods enhanced my learning" (Q.R.24)

Six of the comments focused positively on the facilitators of the course, *"very well presented and coordinated between all presenters" (Q.R. 9)* and also that it provided a *"good opportunity to reflect on the manual" (Q.R. 4)*.

For those participants that made positive comments on the facilitation methods, often specific

examples were given:

“manual walk through was beneficial” (Q.R.1)

“the group work exercise showing the example was good to get where others are coming from” (Q.R. 2)

“Resource handout was v.useful” (Q.R.21)

“Open discussion was very beneficial as understanding manual from other people’s ideas and views” (Q.R. 22)

The constructive feedback that was received in relation to the different facilitation methods focused on individual preference in relation to the methods and also the time spent on the various methods.

“It would have been better if we fully worked through each exercise instead of just starting them” (Q.R. 6)

“Prefer the work in small groups/ allowed a chance to tease things out” (Q.R. 7)

“Very rushed, particularly the group work” (Q.R. 15)

“Would look at the group exercise done on first day – very broad, more learning when it became more focused” (Q.R. 20).

Some conflicting views were also articulated for example; *“Found 1st exercise excellent – as to how to apply manual” (Q.R. 11)* and yet another participant stated that the *“1st exercise as a group on Monday, was not useful or explained properly- unclear as to how to carry it out” (Q.R. 18)*

4.9 RECOMMENDATIONS FOR ADDITIONS TO TRAINING

Eighty seven participants responded to the question. However, 18 participants stated that they were happy with the training or wrote 'n/a' into the space, so 69 participants provided suggestions of what could be added. The answers were very varied and ranged from the methods that were used, to information on how the Q.S. was developed, to the inclusion of more information on conducting 1 day training. The recommendations have been categorised thematically, below.

4.9.1 PRIOR KNOWLEDGE

For eight of the participants the prior knowledge and awareness of the course content was a priority. It was suggested that clearer aims and objectives should be established and transmitted to intended participants so that they know what they are to expect and what the training will cover.

“prior to the course, participants should be fully aware of the contents of the forum” (Q.R.1)

“Prepare people beforehand what they are coming to” (Q.R. 66)

4.9.2 TEACHING METHODS

The teaching techniques for the training were a recurring theme for many of the participants' comments. One participant suggested *"more variety of techniques used in the delivery of the training"* (Q.R. 14).

In relation to the various teaching methods used, case studies were alluded to by eight respondents. Participants appeared to find this method of facilitated discussion and learning helpful and called for more case studies to be used as well as using it in groups more as opposed to individually.

"an example of a case study gone through step by step by facilitators" (Q.R. 75)

"I found the initial case study undertaken individually a little difficult to get to grasp with and felt group case studies were much more useful and informative" (Q.R. 51)

"maybe more specific case studies" (Q.R. 30)

Other facilitation methods cited by respondents of interest were the use of role play and drama for scenarios;

"role play scenarios application of QS to situations" (Q.R. 16)

"Maybe a bit more creative using drama to give an example when contacting an organisation about doing a piece of work" (Q.R. 60)

One participant also suggested *the "competency section being undertaken as a workshop"* (Q.R. 79) and another was the use of a check list during the training, *"exercise sheets i.e. photocopied lists to tick during exercise to aid use of manual"* (Q.R. 61)

Three participants wrote specifically about including more group discussion and experience into the training.

"more group experience and input – adult education should be 80% group input, 20% facilitators" (Q.R. 20)

"more opportunity to share opinions in groups" (Q.R. 32)

4.9.3 ONE DAY TRAINING

Some participants suggested that the core elements of the one day training should be clearly stated and more structured.

"Structure for one day training would have been helpful" (Q.R. 66)

"Core elements in delivering one day training in bullet form, step by step guide" (Q.R. 13)

Participants also wanted to know about how to recruit people for the one day training.

"more info on recruitment of participants for 1 day course" (Q.R. 31)

Another suggestion was for the training to provide more opportunities to discuss how the one day training would be run.

"more opportunities to work out how facilitated sessions might run" (Q.R. 47).

Two participants suggested that the one day training pack would have been beneficial to be included in the course for training of trainers.

4.9.4 BEST PRACTICE AND QUALITY STANDARDS

For five of the participants, the focus of their comments specific to the need for definition of what constitutes best practice.

"a manual/paper on what is best practice would be very useful" (Q.R. 4)

"literature outlining exactly what constitutes good practice, there is an assumption that the concept is widely understood" (Q.R. 8)

Participants suggested that there was need for the training to provide *"more information on the process of developing the quality standards"* (Q.R. 83) and also to provide a *"background on the quality standard areas"* (Q.R. 46).

4.9.5 MANUAL

Many participants made suggestions in relation to the manual. One of the recommendations was that a better examination of the manual be provided during the training as well as providing the aims and objectives. Four participants specifically stated the need to include a practical example of using the manual in the training, e.g. *"a walk through with a practical example"* (Q.R. 72). For one participant, the view expressed was that the current manual should be replaced with *"a completely new manual"* as *"this one is nothing short of appalling"* (Q.R. 26). For others, the suggestions put forward in relation to the manual focused on language which they perceived should be changed to aid peoples understanding. Suggestions of a glossary of terms, summary, resource lists and referral paths were also made:

"more information on the lang. A glossary of terms/words" (Q.R. 38)

"summary key points" (Q.R. 39)

"a list of resources on services or referral paths relevant to the area" (Q.R. 61).

4.9.6 OTHER

Six participants made reference to time in their answer emphasising that there should have been more time given to the training and that more time should also be given to networking during the

course.

4.10 RECOMMENDATIONS FOR REMOVAL FROM TRAINING

For this question, 57 participants wrote a comment. However of these comments, 31 did not cite anything that should not have been added to the training. They simply wrote comments such as *"nothing"* or *"all information was relevant"*

The remaining comments made a variety of suggestions of what should not have been added to the training. Two participants suggested that the training be conducted in one day. Three of the participants specifically mentioned the ice-breaker and felt it was a poor choice and not very well facilitated.

"lots of standing, one voice in the room, people got bored and the question about thinking of when you were 10 was inappropriate - highly emotive for training" (Q.R. 24)

Seven of the participants wrote about the confusing nature of the first exercise of the training and felt that it was difficult to understand.

Three participants commented on the walk through of the manual and suggested that it *"should be more interactive...maybe a computer graphic walk through to "up the energy" of this part"* (Q.R.30).

Two participants wrote specifically about the PowerPoint presentations which they felt were too time consuming as well as being *"very boring and heavy content"* (Q.R. 37). The other exercise that participants felt need not have been added was *"the breakout session for teaming up with co-facilitators seemed a bit redundant since these were covered in our challenges"* (Q.R. 26).

Due care and consideration needs to be given to the exercises included in the training and this is made pertinent in the quote,

"some exercises on first day were scary - and put doubt in my competencies to deliver QS manual" (Q.R. 42).

4. 11 RECOMMENDATIONS FOR COVERING TRAINING IN A DIFFERENT WAY

There were 74 comments left for this question. Eighteen of the participants wrote *"none"*, *"n/a"* or *"all covered"* into this section.

Of the remaining comments received, the walk through of the manual and the case studies were the aspects that were cited most often as ones that should have been covered in a different way. Sixteen participants wrote about how the manual was covered and requested for it to be covered in an alternative way.

"It was too much looking at the manual, the powerpoint and listening at the same time" (Q.R. 71).

"On how to apply the manual - initially maybe individual tasks firstly to get familiar with its use when group tasks" (Q.R. 54)

"Manual - going through it - could have used more concrete examples" (Q.R. 29)

Fourteen of the comments stated that the case study should be covered differently.

"maybe have more clearly defined case studies - with examples to compare answers" (Q.R. 13)

"case studies could have been given more time and also facilitators input into this section could have been more" (Q.R. 26).

The remaining comments dealt with a variety of issues such as making changes to the PowerPoint which had *"too much text"*, a suggestion for more creativity within the lesson, more group discussion time as well as breaking the *"programme into useable separate modules to suit"* (Q.R. 14). There was also a recommendation given in relation to the expectations and rules section. *"doesn't need this to be too long and it led to a bit of a slow start"* (Q.R. 53).

4.12 MEETING EXPECTATIONS

This question was open ended and 100 participants responded. It appeared that the majority of participants felt that the training did meet their expectations as 68 of the comments said "yes", "absolutely" or "exceeded expectations" and many left a positive comment after, explaining why it did meet expectations.

"Yes, I had hoped to leave the training with a concrete set of guidelines for best practice – I got all of that and much much more" (Q.R. 91)

"Training exceeded my expectations in that it provided information and some mechanisms for moving onward with work" (Q.R. 58)

"Yes, I feel more aware of the standards and better able to discuss them now I think of the bigger picture" (Q.R. 43)

There were nine answers that stated "no" specifically and gave reasons for their answer. *"No – I expected more about protocols and the do's and don't during the training of drug/sex ed programmes" (Q.R. 19)*

"No I am still not confident in using the manual" (Q.R. 32)

"No...I thought it would be an education resource folder for workers to go back to deliver drugs ed to groups using best practice and quality standards" (Q.R. 66)

Four of the participants included both yes and no in their answer some stating specifically what did

meet their expectations and what didn't.

"Yes, in that competencies and planning. No, in that thought would have been greater use of evidence as to why we work this way" (Q.R. 12)

"Yes- I feel confident and competent to use and deliver training on using the manual. No – I'm fuzzy on who should do/be responsible for drug ed. on using the manual" (Q.R. 52).

The remaining participants (n=19) left comments that suggested they were unsure and they did not state specifically whether their expectations were met. Both positive and negative comments were received for that section.

"I enjoyed it – manual needs a lot of study and adaptation to 'ordinary' persons academic ability" (Q.R. 25)

"I don't know – my expectations were unclear" (Q.R. 38)

"My expectations were initially different as I didn't really understand the content of the course" (Q.R. 63).

"Would have liked more training in actually using the manual but will come hopefully when using in own organisation. Would have been preferable to have 1 day training plan available today for any questions" (Q.R. 87)

4.13 ADDITIONAL COMMENTS

In total, 70 participants wrote a comment for the last question.

Fifty one of the participants left a positive comment on the experience expressing their enjoyment of the course as well as using the space to simply say "thank you".

"I found the course to be very informative and extremely well presented. The course content was factual. A very positive experience" (Q.R. 3).

"V. useful training - objectives clear - manual well structured - delivery v. informative and relaxed v. good modelling. Thank you" (Q.R. 32).

The remaining comments centred on a request for the language in the manual to be made "more user friendly" (Q.R. 53) as well as needing more time to familiarise themselves with the manual in order to increase confidence to be able to utilise it and also a request for more clarity around what is involved in the course and who it is aimed at.

Participants called for a follow up on the learning:

"possibility of re-cap/refresher morning or perhaps afternoon (2/3 hrs) to check up on and support application of manual" (Q.R.37).

Participants also suggested a desire to get information back from the evaluations *"I hope to get the feedback from groups (flipcharts) via e-mail?? and the evaluation of this training group"* (Q.R.39).

4.14 CONCLUSION

In summary, one hundred and three evaluations were received from the two day training sessions, evidencing a large roll out of training across a range of geographical areas. Similar to participants' experiences of the one day training sessions, responses were generally very positive. Ninety per cent of participants indicated that as a result of the training they now understood how to use the manual to aid their work as drugs education officers. Seventy six per cent identified feeling capable to deliver training on the manual as a result of their participation on the two day training of trainers' sessions, with 22% uncertain. Only 2% indicated not feeling confident in this regard. It may be of interest to follow up with these participants to ascertain the reasons behind this lack of efficacy with regard to training delivery. In terms of confidence in using the skills learned during training 90% of participants answered affirmatively, and 96% were aware of the principles underpinning the module post training evidencing success in delivery.

In terms of the usefulness of information on the manual 83% of participants found it useful with 17% fairly useful. 105 of participants found the skills development useful to some degree with the majority finding it very useful, with similar responses to the question asking about the usefulness of the learning experienced during the training.

Some areas of improvement included better clarity with regard to what to expect prior to attending training; more clarity and experience of case studies and enhancement of the group/experiential activities.

The training clearly met the expectations of the participants and the extremely positive response figures evidence a successful rollout of training.

5. FOLLOW UP SURVEY

5. FOLLOW UP SURVEY ON QUALITY STANDARDS MANUAL AND TRAINING

A follow up survey was distributed to all participants of QSSE training that had provided contact details, in 2012. The anonymous survey was uploaded on to the electronic software Survey Monkey and was distributed via e-mail. This section details the results of this survey. Ninety eight people responded to the invitation to participate in the follow-up survey.

5.1 GENDER

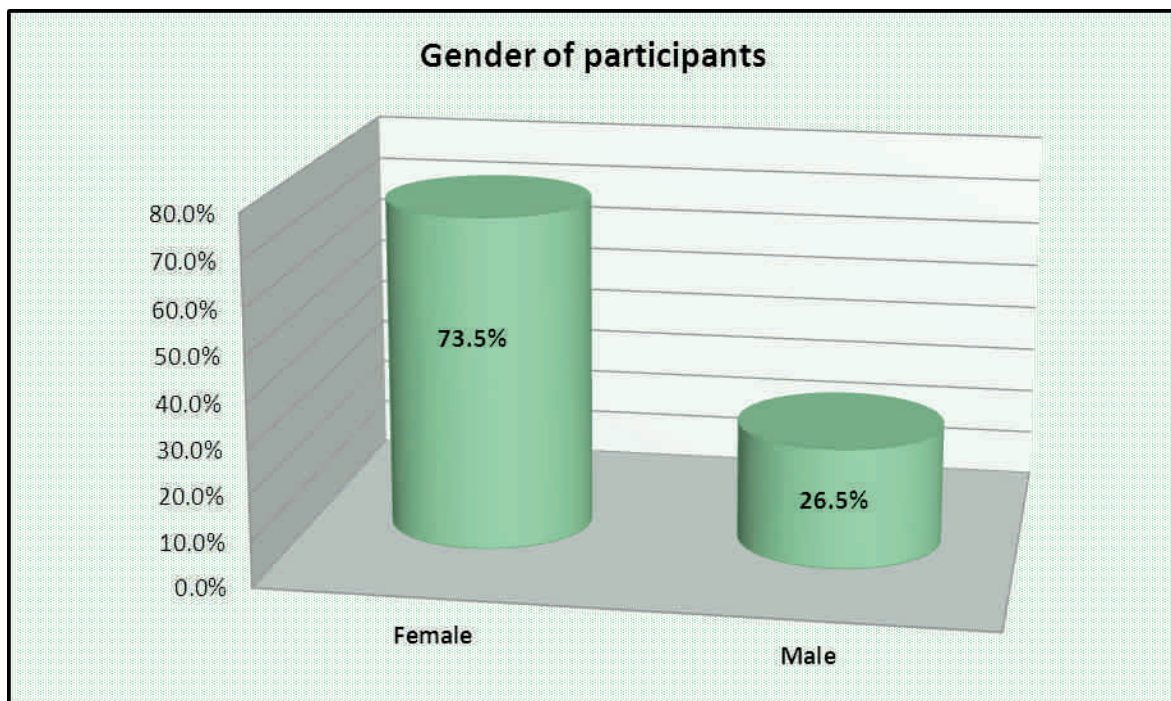


Figure 5.1

Ninety eight participants answered the first question, "What is your gender?" Almost three quarters of the participants (73.5%) were female while the remaining 26.5% (n=26) were male.

5.2 AGE

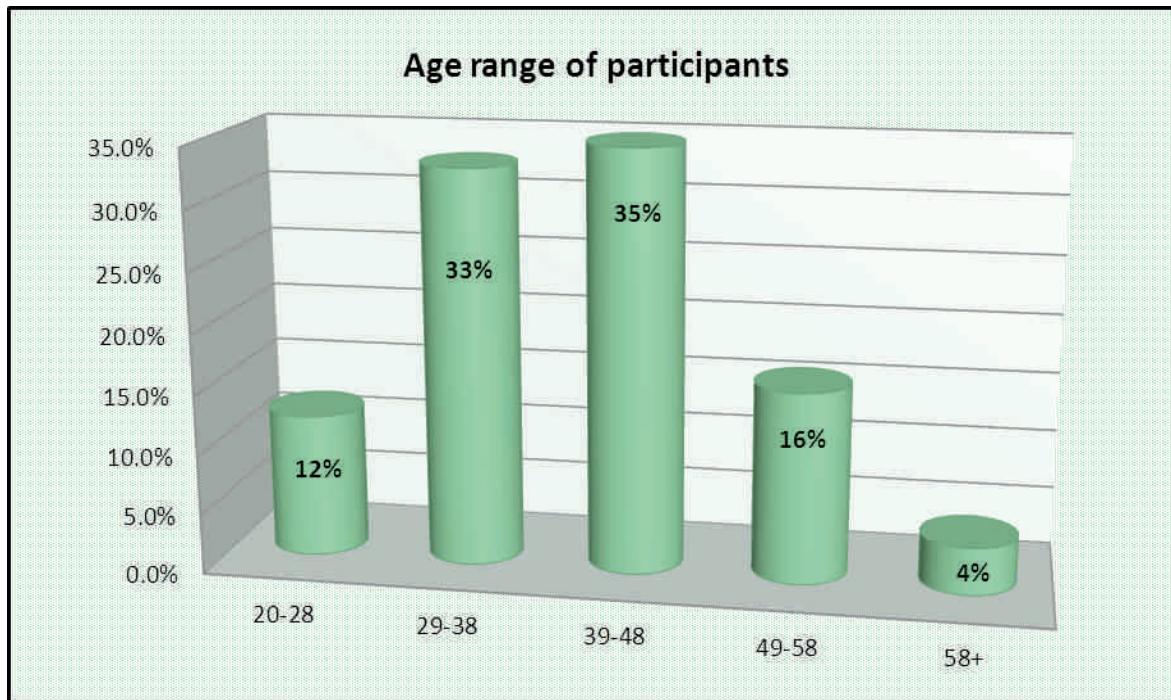


Figure 5.2

In total, 97 participants answered this question. Of the five categories that participants could choose from, 35% (n=34) were between 39-48 years old. The second most popular age category was from 29-38 years old with 33% (n=32) of participants choosing this option. 16% of participants (n=15) were aged between 49-58 years of age and 12% (n=12) were aged between 20-28 years of age. The remaining 4% (n=4) of participants were in the oldest age category, 58+.

5.3 YEAR OF TRAINING

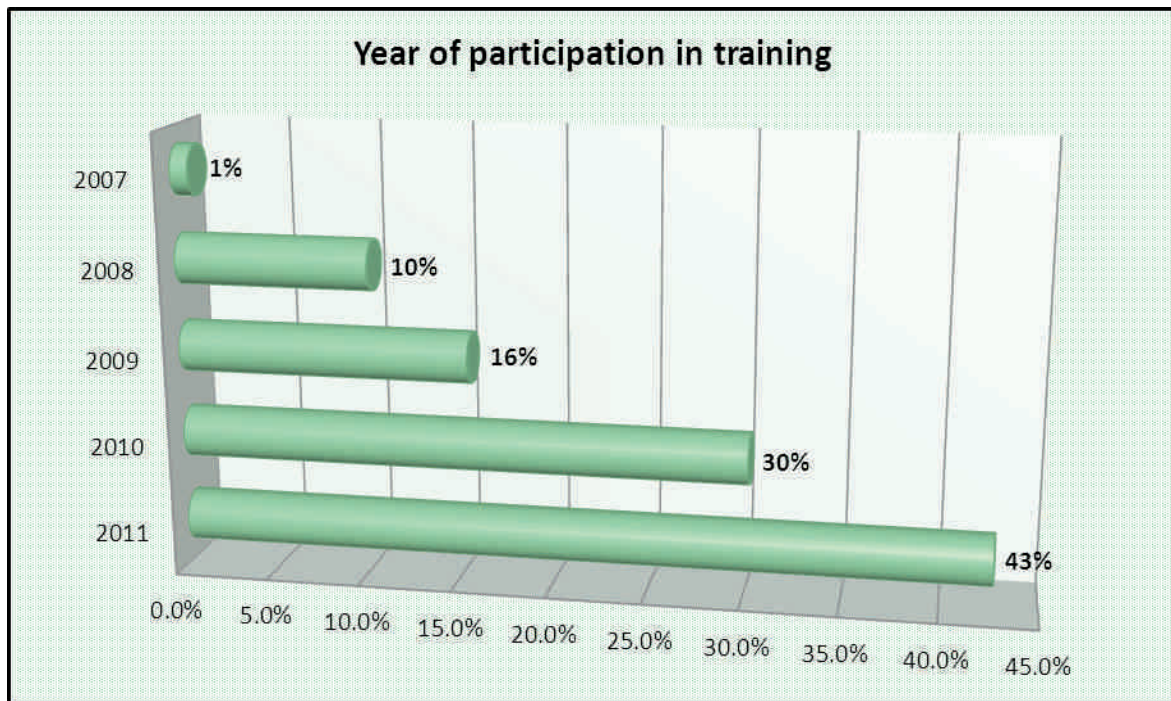


Figure 5.3

In terms of year of training participation, 96 people responded to the question. The majority (43%) of those who completed the follow up questionnaire had undertaken the training in 2011. 30% (n=29) of participants had participated in the DEWF training in 2010, while 16% (n=15) of participants had undertaken the training in 2009. 10% (n=10) of respondents had completed the training in 2008 while 1% (n=1) had completed it in 2007.

5.4 GEOGRAPHICAL LOCATION OF TRAINING

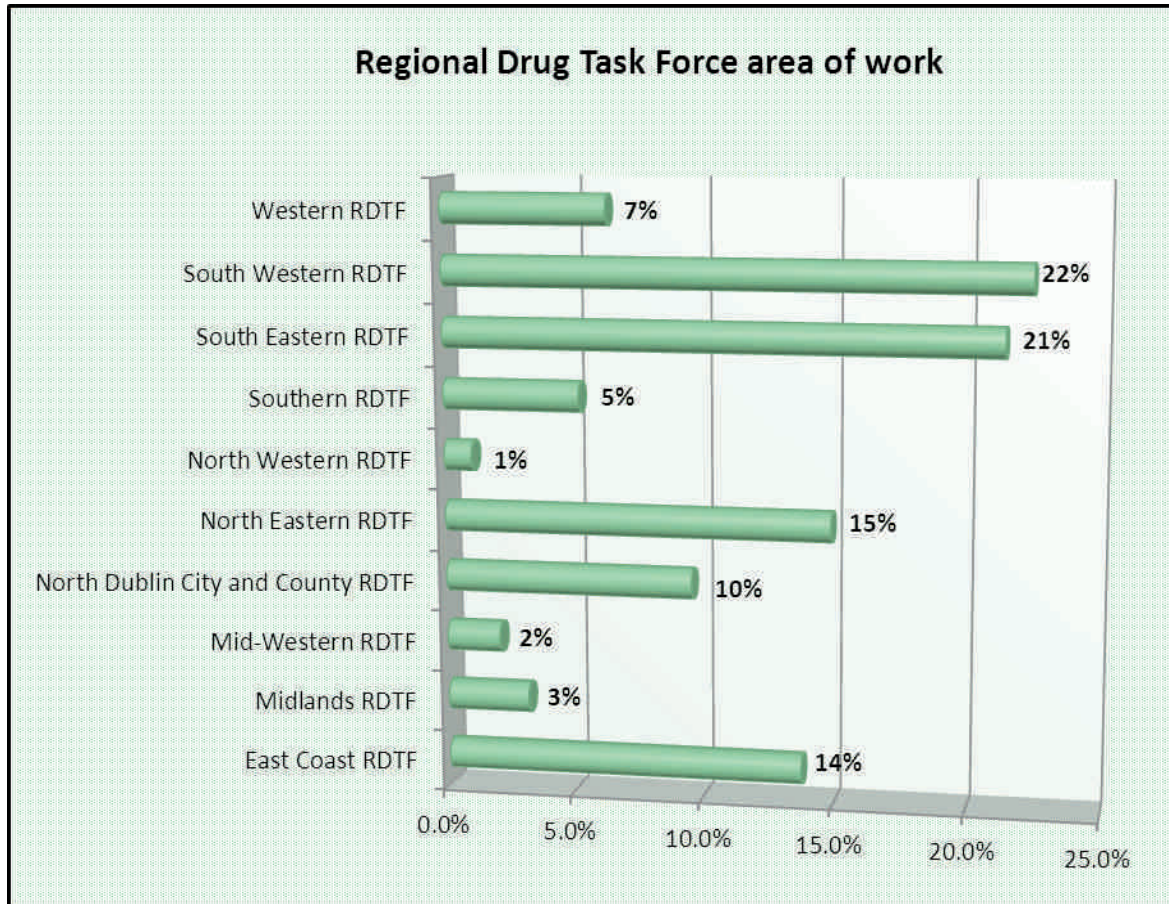


Figure 5.4

The training took place in ten geographical regions. In total, 94 participants answered the question. 22% of the participants were working in the South Western RDTF, 21% in the South Eastern RDTF, 15% in the North Eastern RDTF, 14% in the East Coast RDTF and 10% in the North Dublin city and county RDTF. Of the remaining participants, 7% were working in the Western RDTF, 5% in the Southern RDTF, 3% in the Midlands RDTF, 2% in the Mid Western RDTF and 1% from the North Western RDTF.

5.5 WORK SETTING

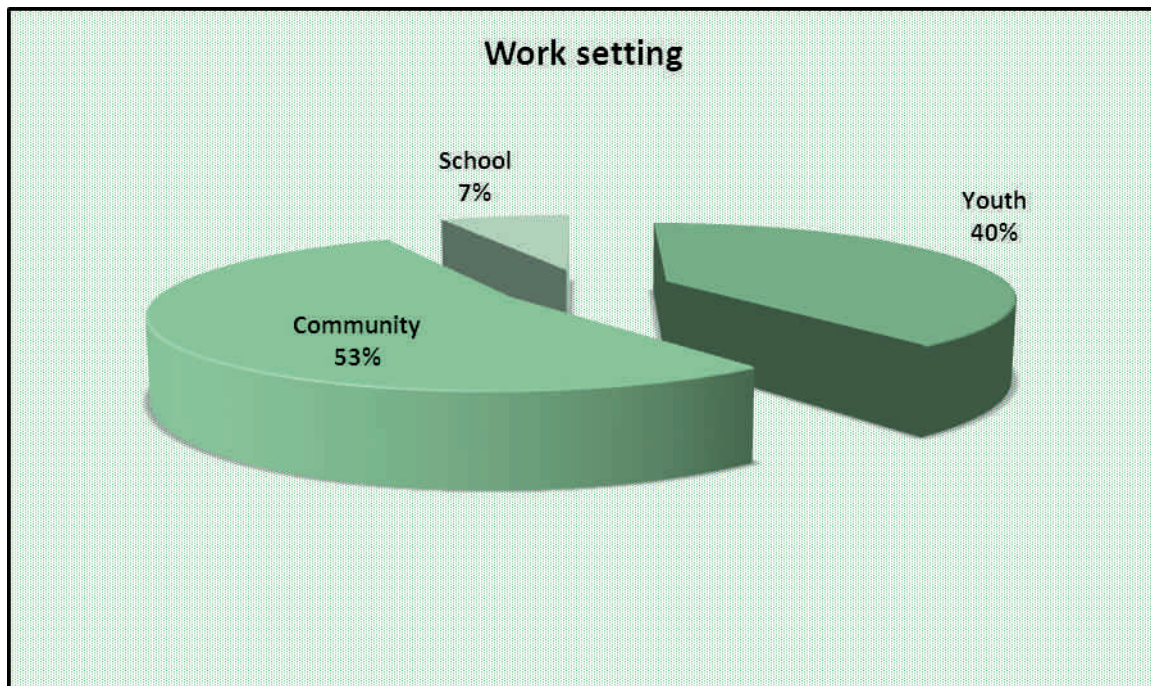


Figure 5.5

For question 5, participants were asked to identify the setting in which they work. Participants were given the option to choose any combination of answers. Ninety two participants answered the question. From the answers received, 53% of participants were working in the community, while 40% were in youth settings and 7% were in schools.

Forty eight participants chose the 'community' setting only while 33 chose 'youth' only and 1 person chose 'school' only. Seven participants chose all three options, 'youth', 'community' and 'school' while three people chose 'youth' and 'community' together.

When asked to specify the role further, 64 participants responded, and the roles were very diverse. Many were community drugs workers, addiction counsellors, childcare workers, educators, youth officers. In addition some training included a member of an Garda Síochána, a psychologist, a psychotherapist and a youth justice worker.

5.6 USE OF QUALITY STANDARDS

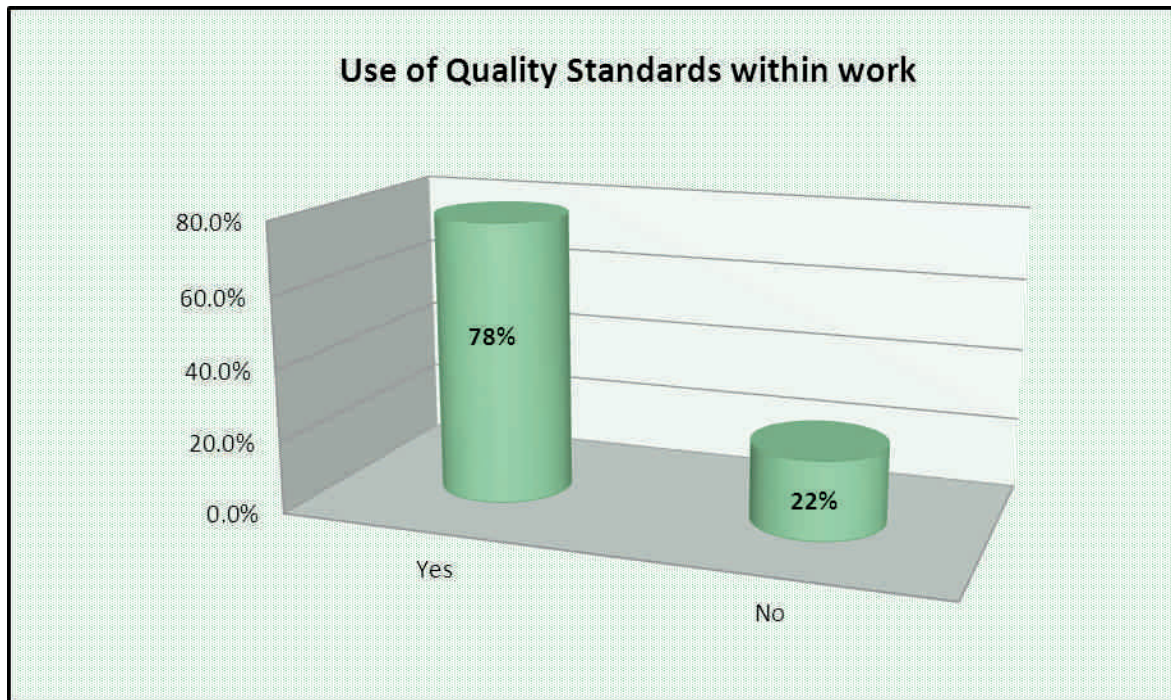


Figure 5.6

When participants were asked, 'Have you used the Quality Standards within your work?', 96 people responded. Over three quarters of participants had used the Q.S. within their work while 22% had not. If the participant chose 'no', they then exited the survey as the remaining questions in the survey centered on their use of the manual, thus leaving 75 participants to answer the remaining questions.

5.7 INFLUENCE OF QUALITY STANDARDS

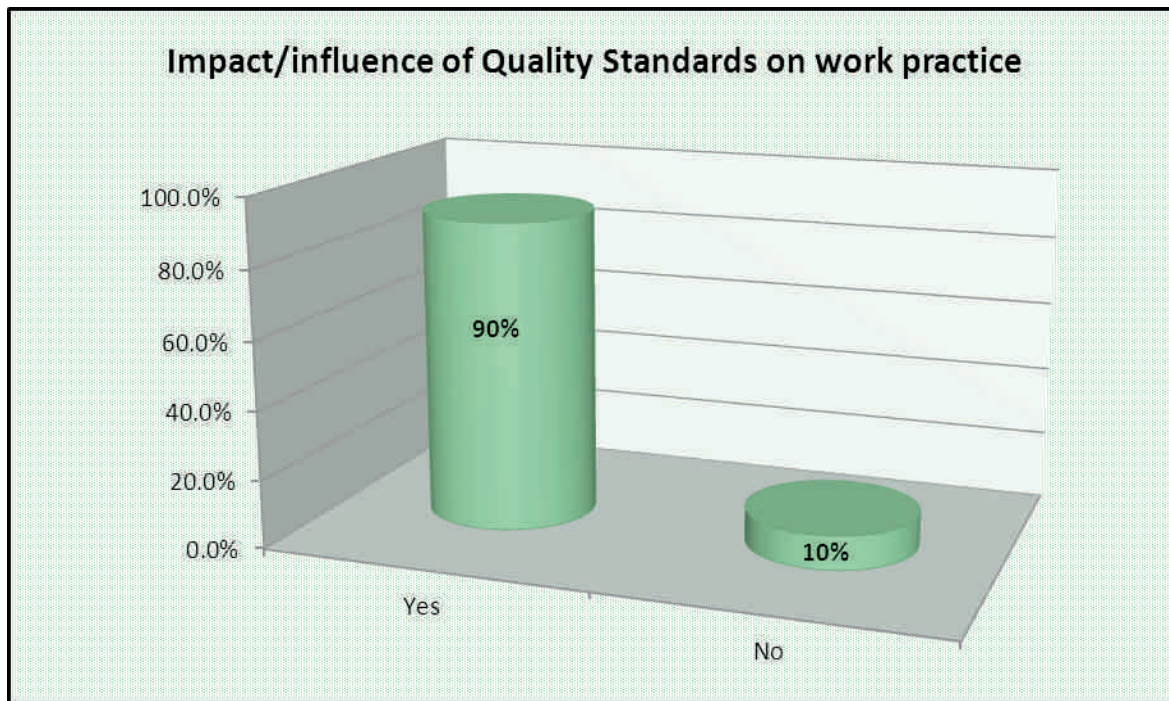


Figure 5.7

In total, 50 people responded to this question. The majority of participants (90%) felt that the QSSE impacted/influenced their work practice. The remaining 10% (n=5) felt that the QSSE had not impacted on their work practice. For those who answered yes (45), they were asked, 'in what way?' A total of 40 participants left an open ended answer for this question. There were a range of reasons given for how it had impacted on or influenced their work practice, including QSSE acting as a reminder for best practice and evidence based practice. It was also perceived as helpful, according to participants, in the planning, delivering and evaluation of programmes. It provided a clear framework of which to operate out of and has been useful in updating organisation policies. Participants also commented that it has given them more confidence when responding to requests. The following are a selection of comments received for this question:

"The QS has provided a robust and easy to follow structure which enables better performance in respect of training and development" (Q.R. 8).

"It has helped me to deal with a number of requests from agencies and schools to ensure that all work is carried out in accordance with best practice" (Q.R. 19)

"QS informs my work daily - from delivery of training, programme planning, support & consultation with other services etc." (Q.R. 24)

"I have used it when revising and updating my organisation's drug policy and guidelines, when planning staff training and when guiding staff and volunteers in programme design, implementation

or evaluation" (Q.R. 27)

"given a quality based framework to frame the work in" (Q.R. 40)

5.8 INFORMING POLICY DEVELOPMENT/CRITICAL INCIDENTS

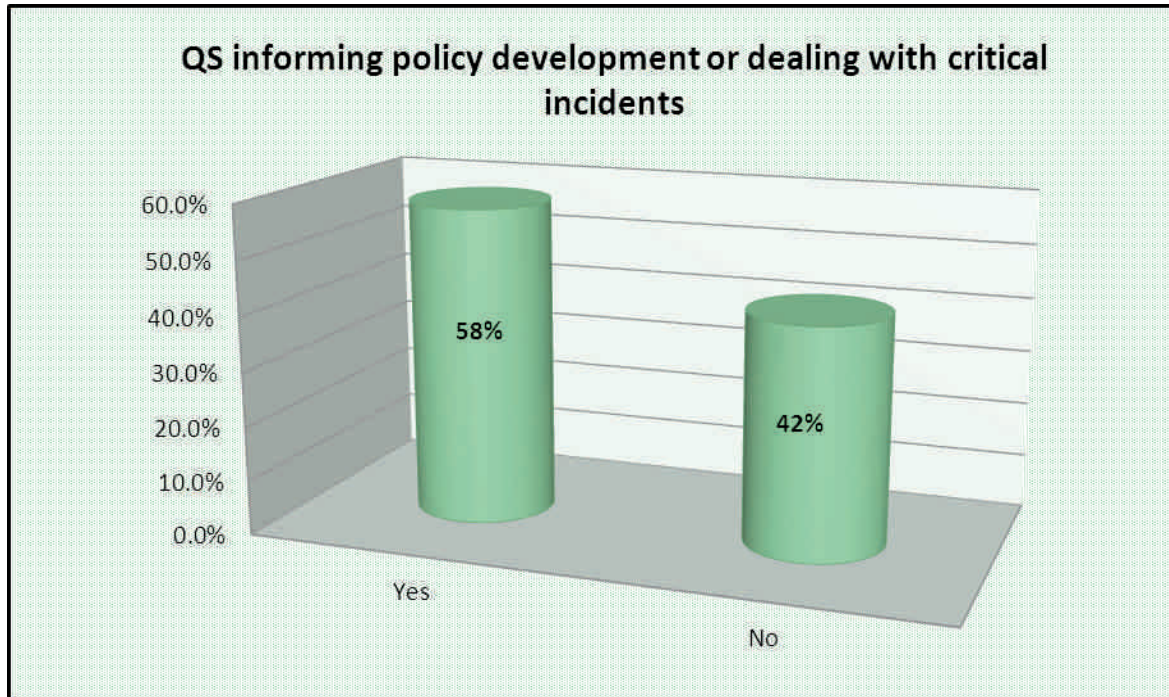


Figure 5.8

In total, 50 participants answered the question, 'Has the QSSE informed policy development or dealing with critical incidents?' Over half (58%) of the participants chose 'yes' and 42% (n=21) of participants felt that the QSSE had not informed policy development or dealing with critical incidents. Participants were given the opportunity to further explain their answer and 32 participants responded to this request. Some of them explained how "no critical incidents have occurred" (Q.R. 9), or how it had in "some ways" but they "mostly refer to QUADS in this area" (Q.R. 13). Others reasons for answering 'no' to the question were, "time" (Q.R. 12), "Policy completed at management level" (Q.R. 20), "Already had training from my organisation in relation to dealing with incidents etc." (Q.R. 23). The majority of the comments explained how it had informed policy development;

"in working with schools around developing drugs policy it was very useful" (Q.R. 2)

"we are currently using this pack while developing/updating a new substance use policy" (Q.R. 6)

"It has provided people with a better understanding of procedures and protocol and allows for better

and more successful outcomes when dealing with incidents" (Q.R.8)

"I use QS to facilitate policy development workshops with other agencies. QS informs the development of organisational policy and guidance/support provided to staff to manage substance related incidents" (Q.R. 19)

"Used as pointers for development of policy documents for third level institution" (Q.R. 24)

"Yes has helped with the formation of drug policies for the organisation at a local level" (Q.R. 31)

5.9 SUBSTANCE USE EDUCATION PROGRAMME DEVELOPMENT

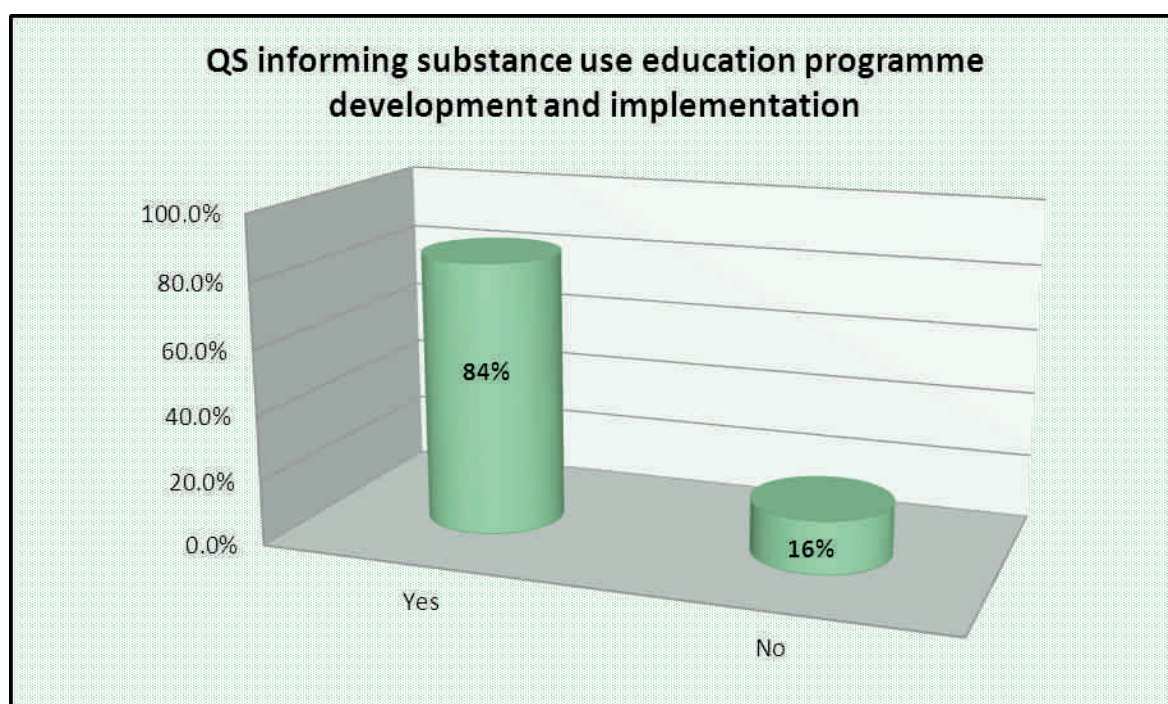


Figure 5.9

Forty nine people answered q.9, 'Has the QS informed substance use education programme development and implementation?' 84% (n=41) chose the 'yes' option while 16% (n=8) chose 'no'. Participants were asked to 'please explain' their answer and 35 participants contributed to this section.

Two of those that had answered 'no' the reasons given were "it has not been applied specifically to the above context" (Q.R. 10) and "not as yet" (Q.R. 17). The remaining comments went on to explain why they had chosen to answer 'yes', it had informed substance use education programme development and implementation. The reasons why it had informed programme development and implementation were wide ranging, from "presentations around the effects of certain drugs" (Q.R. 9)

to "a guide when assisting staff and volunteers in drug awareness programme development, implementation and evaluation" (Q.R. 21), to "event planning" (Q.R. 28) and giving "more clarity in the delivery of programmes in terms of proper needs assessment development prior to delivery" (Q.R. 35).

The QS is now providing the bedrock for development and implementation of our inhouse programmes and is increasing our QA Standard in this regards (Q.R. 7)

Programmes with young people, parents and Volunteers are developed & implemented in line with QS (Q.R. 19).

It informs it in many different aspects depending on the programme, the needs of the client group and the agencies I am working (Q.R. 30)

5.10 QS AND STAFF NEEDS

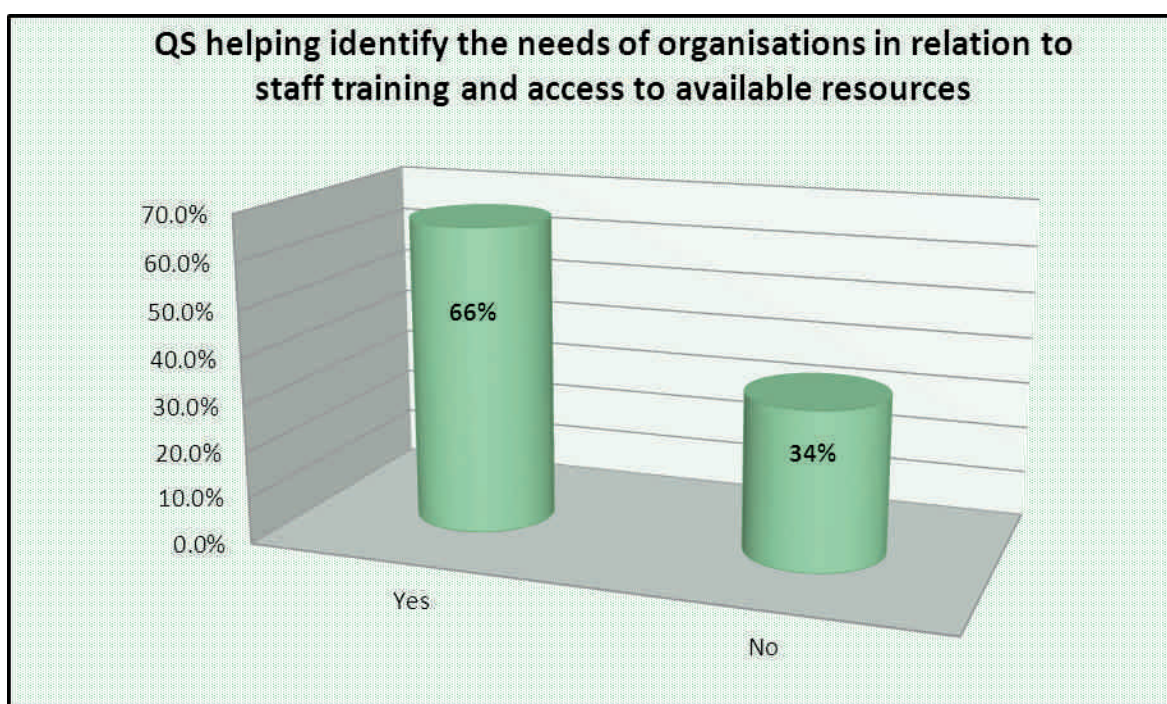


Figure 5.10

In total, 50 people answered this question. When participants answered question 10, two thirds of them said that the QSSE highlighted issues in or helped identify the needs of their organisations in relation to staff training and access to available resources which support use education. The remaining one third of participants (n=17) chose the 'no' option.

Twenty nine participants went on to further explain their chosen answer. Of these, two of the participants indicated that the QSSE had not highlighted issues in or helped identify needs in relation to staff training. The reasons given were *"already happens within my organisation"* (Q.R. 1) and *"No, but I haven't used the standards often enough to adequately say if the QS could do this"* (Q.R. 13). The majority of participants, who answered 'yes', commented that it highlighted issues in relation to staff training.

"Training in my opinion could be rolled out on a larger scale if the resources were available" (Q.R. 4)

"More training for all staff members. Also all staff need to be aware of new policies and legislations" (Q.R. 5).

"It showed gaps in the policy we were using and also that staff needed to be trained and aware of policies and procedures relating to the education of substances with young people" (Q.R. 6).

"Highlighted the need for all team members to access the QS manual training" (Q.R. 7).

"sets standards" (Q.R. 15)

"All projects are now QS trained" (Q.R. 25).

"It has highlighted the need to up skill staff and ensure that everyone is aware of best practice guidelines and adhere to them" (Q.R. 28).

In relation to the access of available resources, two participants commented specifically on this, *"the need for us as an organisation to increase our level of networking with both statutory and voluntary organisations that can provide us with information and resources we may be lacking"* (Q.R. 8) and *"able to call on HSE education workers"* (Q.R. 10).

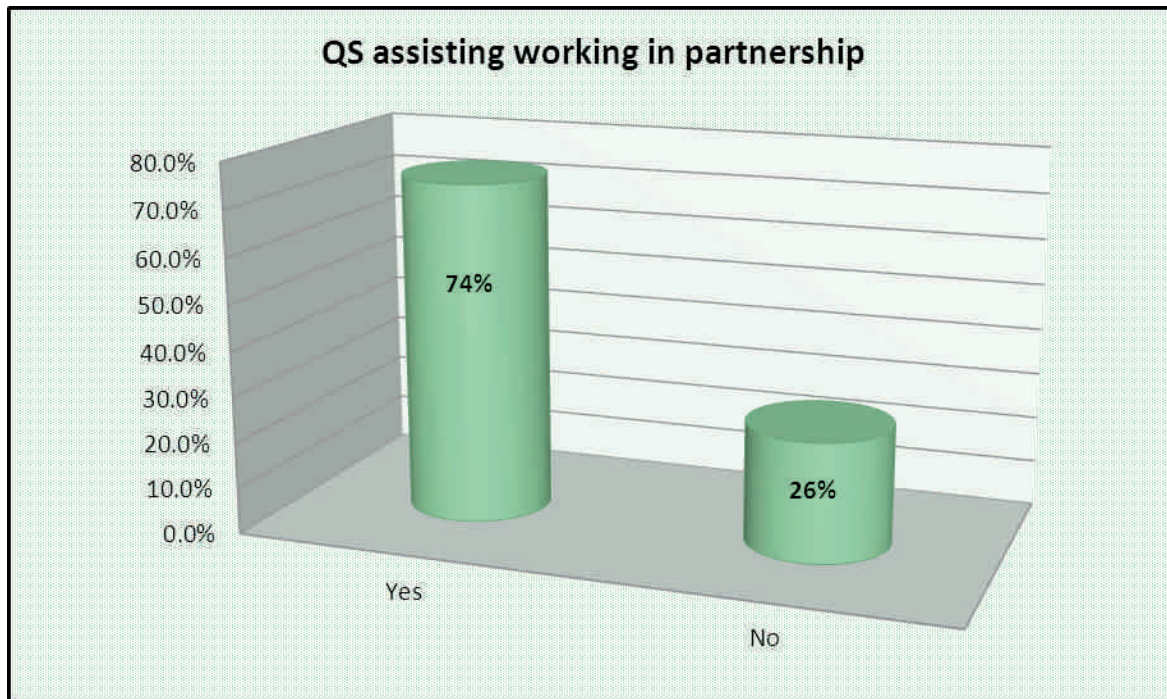


Figure 5.11

Fifty people answered this question. Of these participants, 74% (n=37) said that the QSSE has assisted them when working in partnership or involving external agencies and over a quarter (n=13) chose 'no', that it had not assisted them in this area. Thirty four participants expanded further on their answer in the open ended section to this question, "please explain". Five of the comments were from participants who answered 'no' and the following reasons were given;

"currently only in the early stages of developing this process" (Q.R. 6)

"Carlow Regional Youth Services already had and has a policy on interagency working" (Q.R. 13)

"Not my role" (Q.R. 15)

"Outside agencies found the manual inaccessible" (Q.R. 24)

"Not really, the Nordic process is more valuable in this instance" (Q.R. 26)

The remaining comments were from participants who went on to explain why they had chosen 'yes', it had assisted them when working in partnership. The reasons varied, from highlighting that it "acted as a reminder to work in partnership" (Q.R. 12) as well as, "being useful to be able to refer to

manual when dealing with external agencies" (Q.R. 14).

"it allows both organisations to be singing off the same hymn sheet when working in partnership" (Q.R. 4)

"It is a very useful tool in inter-agency planning" (Q.R. 9)

"Yes the sector on partnership is very useful for organisation to plan before engaging in collaborative work and then supports organisations to work together to identify aims of the partnership and work in way to the meet their objectives this is essential to all organisations to ensure no duplication of work and ensure all working from the same page and giving consistent and clear message in the area of substance use education" (Q.R. 16)

"The QS has proved useful in acting as a guide in identifying areas to be agreed prior to or during working in partnership. Further to this, agencies have expressed confidence in engaging with our project as they are made aware of QS and that we are operating from best practice standards" (Q.R. 17)

"Helps guide direction pieces of work should be delivered in. Can bring about a united team effort. Same focus and purpose" (Q.R. 22)

The various organisations that were specifically mentioned that it has assisted, have been the HSE (Q.R. 8, 27), the Local Drugs Task Force (Q.R. 3), a peer education programme and Foróige (Q.R. 18) and local councils (Q.R. 31). For two participants, it had helped when working with schools on this type of work. *With schools around policies only (Q.R. 2), Clarity around my role in schools (Q.R. 23).*

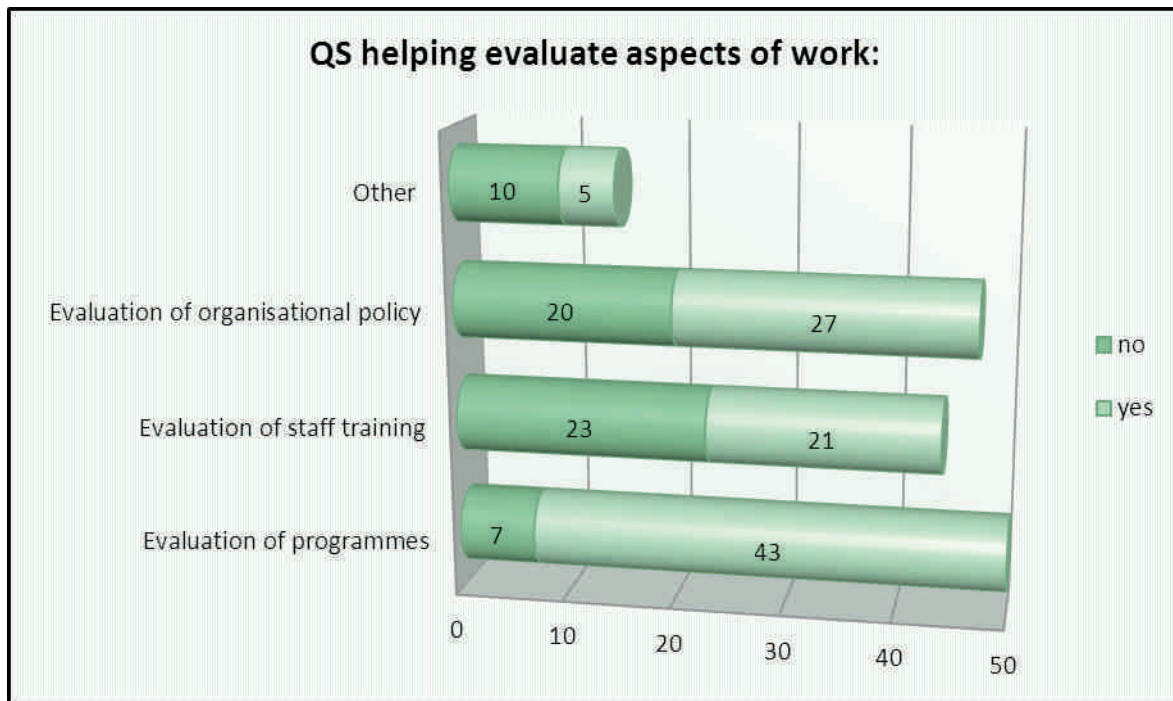


Figure 5.12

Fifty one people answered this question. When participants were asked in what areas the QSSE helped evaluate their work, the most popular area was 'evaluation of programmes', where 43 participants chose 'yes' and 7 participants said 'no'. For the 'evaluation of staff training', 21 participants chose 'yes' and 23 participants chose 'no'. For the 'evaluation of organisational policy' 27 participants said 'yes' while the remaining 20 who answered this aspect of the question said 'no'. In the area of 'other' 5 participants said 'yes' the QSSE helped them evaluate their work in the area and 10 participants said 'no'.

Eleven participants left comments in the 'Please explain' section. Some people specified the context of which it helped them to evaluate their work; *"using tools provided to evaluate training I deliver"* (Q.R. 1) *"clearly outlined elements to be addressed in a thorough evaluation and how to build in evaluation in programme planning from the outset"* (Q.R. 2), *"evaluation of programmes has become more important following on from the training"* (Q.R. 11), *"Really useful for planning and evaluation programmes and trainings"* (Q.R. 4). One person highlighted the importance of evaluating upon completion of the training. Two people stressed the importance of the QSSE when working with other organisations. *"in supporting other agencies/services in region to work in line with QS"* (Q.R. 5). *"Evaluation of how we work with other external organisations"* (Q.R. 6).

5.13 USE OF COMPETENCY SECTION IN MANUAL

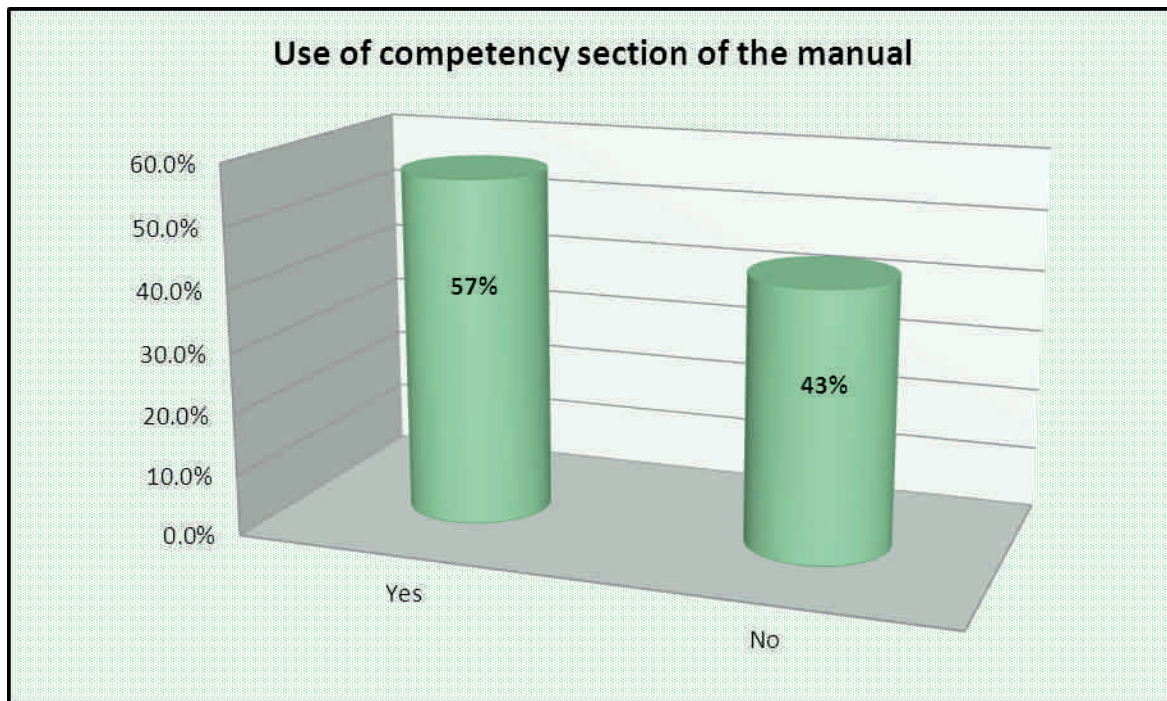


Figure 5.13

In total, 46 participants answered this question and 57% (n=26) said 'yes' they did use the competencies section of the manual while the remaining 43% (n=20) said 'no'.

Of these participants, 19 left an open ended comment in the 'please explain' section of the question.

Comments on what participants found particularly useful included reference to their own professional development. "I found this very useful as it helps assess what training needs I have and what areas I might need refresher training on" (Q.R. 13). "For my own development through supervision" (Q.R. 2) "I found it to be a useful tool to go through before attending supervision in order to identify any training needs etc." (Q.R. 8). Other benefits of this section was increasing "confidence for individuals" (Q.R. 14) and also in planning, however one participant stated that the "Logic model has taken over now" (Q.R. 17). One participants highlighted the weaknesses of this section and stressed that it should be approached with caution, in the following comment, "for some staff it highlights their inadequacies and they can come away from it feeling their skill level is actually quite low, so it needs to be used carefully and selectively" (Q.R. 18).

5.14 OVERALL COMMENTS OF QSSE MANUAL AND ITS RELEVANCE TO SUBSTANCE USE EDUCATION

Forty two participants left a comment for this question. Fifty seven per cent (n=24) of the comments were positive, commending the relevance of the content and its usefulness.

"The contents are comprehensive. The QS manual is good and the concept is good" (Q.R. 33).

"Assists in maintaining standards" (Q.R. 36).

"It is an amazing support and tool" (Q.R. 37).

"Very relevant. Good tool for developing and delivering substance use programmes to a high standard" (Q.R. 38).

Two participants commented negatively on the content and relevance of the QSSE manual, considering it to be *"too complex to be practical on a daily basis" (Q.R. 16)* and *"the manual is too heavy and carries language that is very hard to understand at times" (Q.R. 27)*

Sixteen commented positively on the content of the manual and also provided some constructive feedback in order to improve the relevance and content of the manual. The majority of the recommendations were about making the manual more user friendly and the language more accessible.

"Clear and informative. However, it's very official and even for professionals working in drug education would prefer more relational language/ colour and easier access to key pieces" (Q.R. 8)

"The content is very good and well thought out, however the complex language that it uses is unnecessary right throughout the pack and this becomes a block to referring to the pack more often" (Q.R. 13)

"I think the manual is extremely useful and beneficial to substance use education work, however a smaller version with more simplified language would be better" (Q.R. 17)

"Parts of it are relevant but again it's not user friendly and repeats itself a lot" (Q.R. 22).

5.15 OVERALL CLARITY OF THE STANDARDS AND PERFORMANCE INDICATORS INCLUDED IN THE QS MANUAL

Type of feedback	Number of comments	Percentage of comments
Positive	17	45%
Negative	14	37%
Constructive	6	16%
Not sure	1	2%
Total	38	100%

Table 5.1

Thirty eight participants commented on this question. Seventeen participants gave positive feedback on the clarity of the standards and performance indicators, citing them as "very clear", "very easy to follow" and "excellent".

"Useful for reporting structures" (Q.R. 33)

One person was unsure how to comment as they had "not used them yet" (Q.R. 17). Fourteen of the participants commented negatively on the clarity of the standards and the majority cited the reason as the language used. "Very poor. Clarity suffers due to inaccessible language" (Q.R. 27). "Unclear. Too much time in training spent trying to decipher it" (Q.R. 15).

Six of the comments had constructive feedback with a positive aspect included.

"Level of detail very useful. Glossary very useful. Some of language overly complicated" (Q.R. 11)

"I find the manual text heavy though and offputting . Maybe that explains why I haven't used it a huge amount. I am so busy and then looking up d manual seems like more work but I know I'm shooting myself in the foot...the more I use it, the more familiar I am with it..." (Q.R. 14)

"The layout of the manual is great. Some of the language is very weight in jargon some of this language could be improved" (Q.R. 19)

"Overall, guidelines are fairly user friendly when you become familiar with manual. However, at first it can appear difficult to manage, language can be off-putting - this may result in some not feeling confident in using manual" (Q.R. 20).

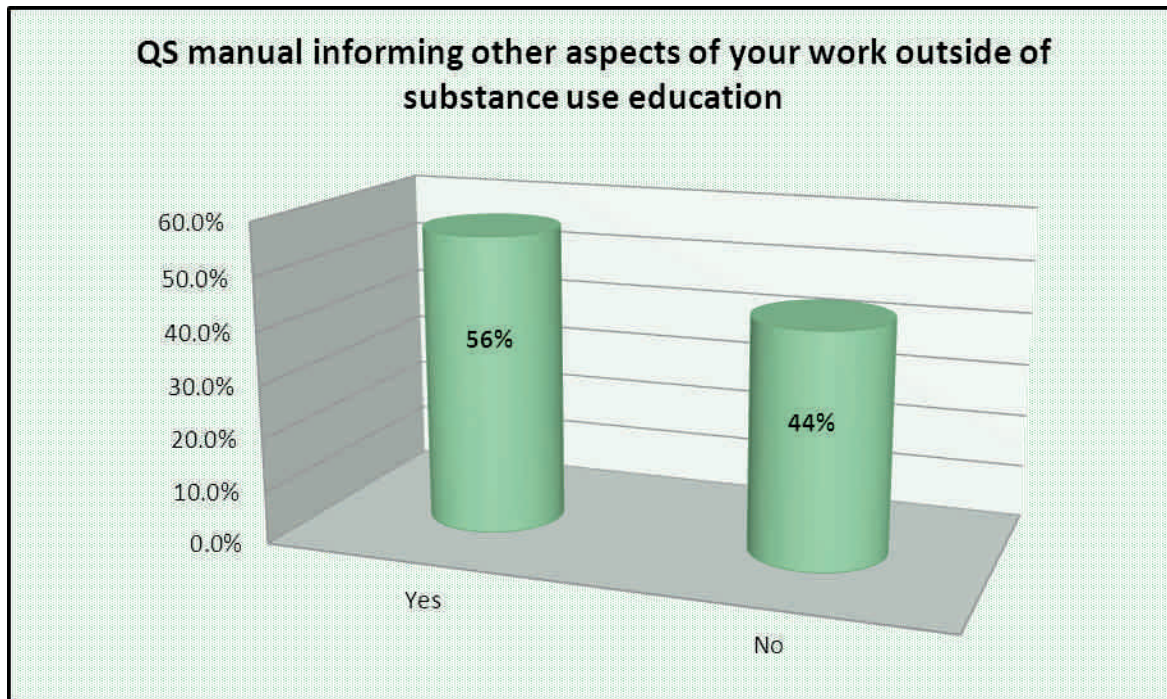


Figure 5.16

Over half of the 48 participants who answered this question answered that the QSSE had informed other aspects of their work outside of substance use education. The remaining 44% (n=21) felt that it had not informed other aspects of their work.

Twenty of the participants went on to further explain their answer. Half of these participants commented that the manual had helped in terms of using it with other programmes and the standards can be applied to other areas also; *"using it with other programmes to access planning, delivery and evaluation of programmes"* (Q.R. 1). *"It is a resource pack that could be used for other education programmes run with young people"* (Q.R. 2) *"A lot of the standards can be applied to other areas in our field of employee assistance"* (Q.R. 4). *"Can be useful in developing and maintaining high standards of practice for all health promoting issues and topics"* (Q.R. 5). *"A lot of the principles can be used in other areas of education eg. sexual health etc."* (Q.R. 9). *"Helped us to develop standards with youth programmes"* (Q.R. 15). For some of the participants, the manual had specifically informed their partnership work; *"Very useful for working in partnership and considering policy development"* (Q.R. 12). *"Working in partnership section can support all work with others, not solely in the area of substance use education"* (Q.R. 14). Other comments were more specific in what areas it had informed, *"group work with people in recovery"* (Q.R. 3), *"self-esteem, healthy life choices, work for kids"* (Q.R. 6), *"inter agency planning and delivery across services for children and families"* (Q.R. 7), *"misuse of various items outside of drugs i.e. internet, mobile telephone"* (Q.R. 7)

and "college and general good practice" (Q.R. 10).

5.17 RECOMMENDATIONS FOR IMPROVING THE MANUAL

When answering the question above, 45 participants commented. Thirteen of these comments did not suggest recommendations; they simply stated "no", "nothing obvious", "not at present" "it was very thorough". The majority of the comments focused on the recommendation that it should be made more user friendly by simplifying the language and also changing the colours in the document. The following table is a breakdown of the comments received for this section.

Theme	Comments
Language	<p>"improve on the language so that it is simple and clear" (Q.R. 3)</p> <p>"plain English, less wordy" (Q.R. 6)</p> <p>"simplify the language, not relevant to all parts of my work" (Q.R.8)</p> <p>"more relational language, user friendly, more narrative" (Q.R. 9)</p> <p>"Change the language so that it more user friendly, you can do this without changing the meaning of the sentences used" (Q.R. 14)</p> <p>"make the language simpler" (Q.R.16)</p> <p>"smaller more condensed version of the manual with more simplified language" (Q.R. 18)</p> <p>"make it more user friendly. Lots of jargon" (Q.R. 19)</p> <p>"Some of the language could be clarified" (Q.R.21)</p> <p>"language reviewed to ensure it is accessible to those with low literacy" (Q.R. 22)</p> <p>"Put into non jargon language, that is user relevant and easy to access" (Q.R. 24)</p> <p>"The language in the manual could be simplified" (Q.R. 25)</p> <p>"The language is very academic and the info is very dense and not especially practical" (Q.R. 28)</p> <p>"Change of language to make more user friendly" (Q.R. 30)</p> <p>"Language more user friendly. Less wordy" (Q.R. 31)</p> <p>"It needs simplification, and put into plainer English" (Q.R. 33)</p> <p>"Language is very jargonistic" (Q.R. 35)</p> <p>"Needs to be more user friendly" (Q.R. 36)</p> <p>"Make it more user friendly, amend the language (simplify)" (Q.R. 41)</p> <p>"The language needs to be modified to make it more user friendly" (Q.R. 43)</p>
Visually appealing	<p>"change the colour, green on white hard to read" (Q.R.4)</p> <p>"colour and layout could be adapted - colour does not make it easy to use" (Q.R. 22)</p> <p>"Different colours - green is repetitive. Maybe different colours for each setting" (Q.R. 38)</p> <p>"make it visually appealing" (Q.R. 41)</p>
Addition/changes to sections	<p>"more sections could be added, such as, working with individuals with intellectual disability or cultures...depending on needs but there is scope to develop some pieces here" (Q.R. 21)</p> <p>"further development of manual to include working with minority groups, implementation of secondary prevention programmes with young people" (Q.R. 22)</p> <p>"some sections clarified to ensure less ambiguity in either QS or best practice/performance indicators. I think the manual could have a section on substance use education for new communities taking into account all cultural variations, prisoners. sex workers etc" (Q.R. 25)</p> <p>"The QS for each section could be listed first, so that it is clear first off, what the guidelines are and then describe each. This could be potentially more useful and engaging if programme content (and QS in terms of programme content) were included (Q.R. 38)</p>

Other	<p>"training given before access to manual should be adapted to needs/experiences of trainees" (Q.R. 1)</p> <p>"application of it to projects" (Q.R. 2)</p> <p>"would push CD, alot more user friendly" (Q. 10)</p> <p>"ensure it is easy to find pages and relevant sections (include page numbers or see section X etc) (Q.R. 41)</p> <p>"the manual is completely unrealistic and needs to be re-done" (Q.R. 44)</p> <p>"more clarity" (Q.R. 45)</p>
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Table 5.2

5.18 IDENTIFICATION OF RESEARCH PAPERS

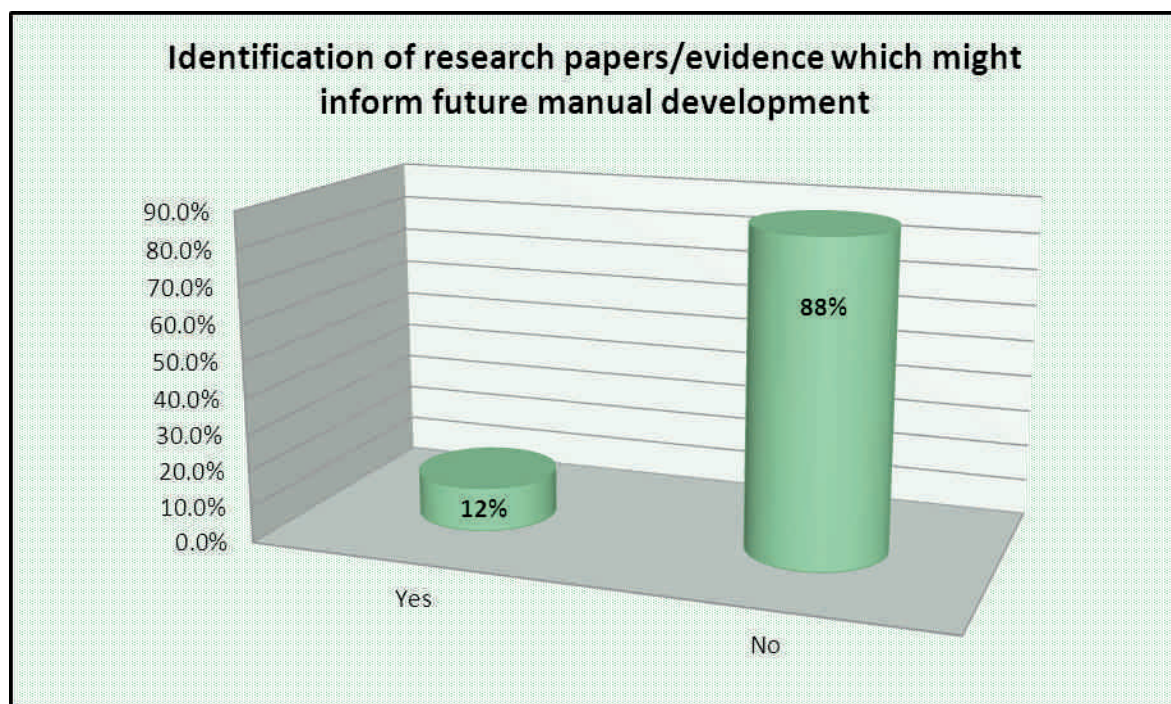


Figure 5.18

In total, 57 participants answered this question. The majority (88%) of respondents said they could not identify any research papers or evidence which might inform future sections when developing the manual. The remaining 12% (n=7) said yes they could and went on to specify what these were:

"Alcohol work by Minister Roisin Shortall"

"National framework for health promotion, possible section on family support (McKeown)",

"Pavee Pathways, recent research by Pavee Point",

"NACD - Risk & Protective Factors (2011)",

European Quality Standards in Drug Education (2012)",

"Community Work Tools for Change",

"Report from BYAP recent celebration re ago of attitude change in young people towards alcohol and substance use. In the light of the inclusion of alcohol in the new drug strategy maybe have alcohol mentioned more strongly where appropriate".

However, one participant did not provide any examples but stated that the role of education is questioned in the literature, in the effectiveness of drug prevention;

"The role of education in drug prevention is questioned by international research?" (Q.R. 5)

5.19 DELIVERY OF ONE DAY TRAINING

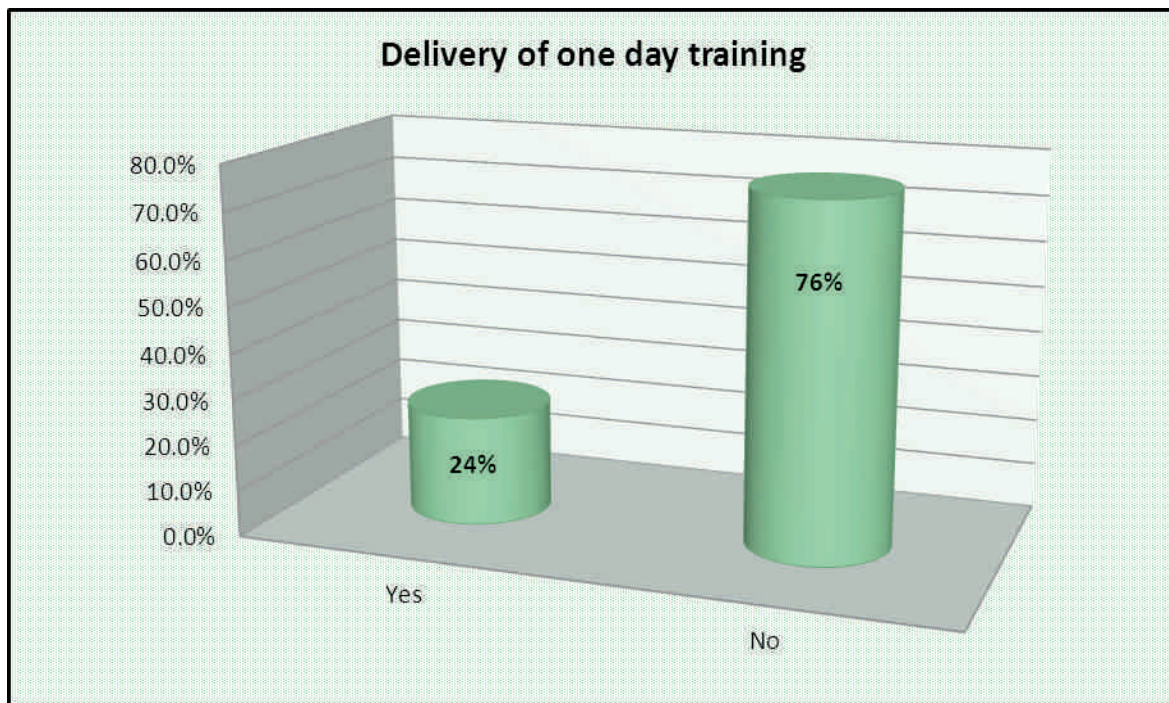


Figure 5.19

In total, 67 participants answered this question. Over three quarters (n=51) of the participants had not delivered the training while the remaining 24% (n=16) had delivered the training. Both one and two day participants answered this question, however, it was not possible to distinguish between them for this question. One day training participants were never expected to carry out the training, so this may be the main reason that the 76% of participants who answered the question had not delivered the training. For those who had delivered the training, they were asked a further four questions in relation to the planning and delivery of the training.

5.19.1 ADMINISTRATIVE SUPPORT

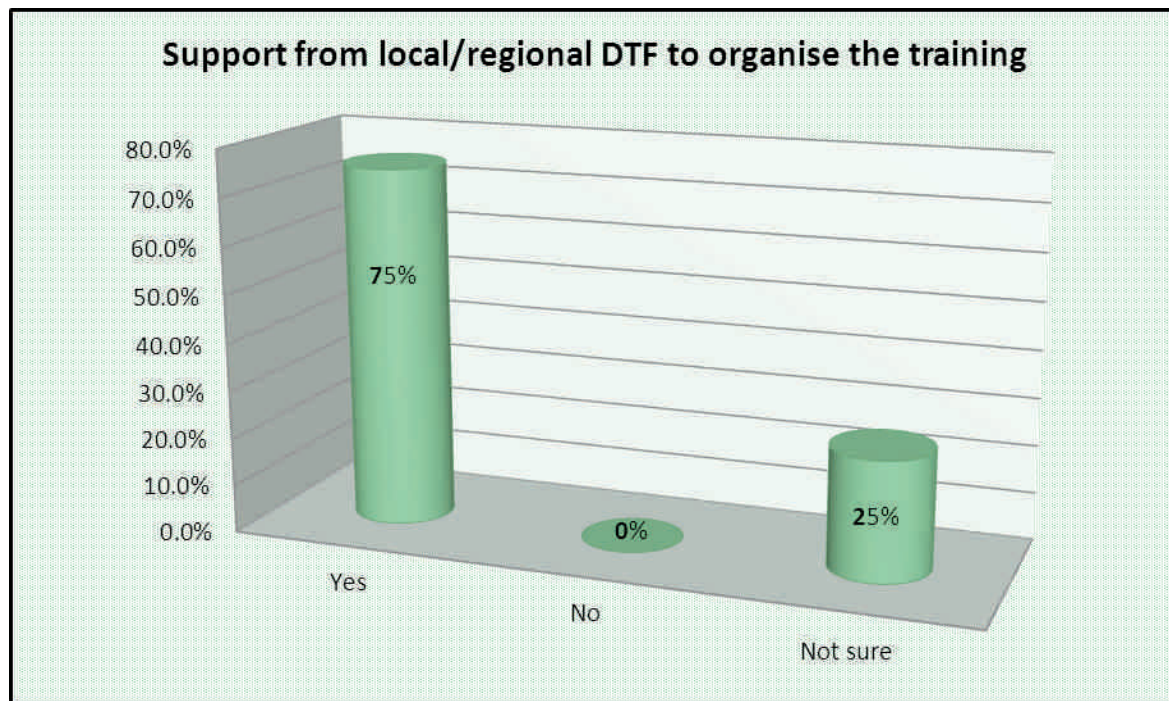


Figure 5.19.1

Of the 16 people who had delivered the one day training, three quarters of them (n=12) said 'yes' they did receive support from their local/regional DTF, while the remaining 4 participants were 'not sure'. Five people went on to further explain their answer. Four of the comments appeared very positive about the support they received from their local/regional DTF. "The SERDTF arranged everything" (Q.R. 1). "They advertised, promoted and sourced venue for the training. My employment freed me to do the training" (Q.R. 5). One person who was 'unsure' left the following comment, "Apart from agreeing and signing application form - all recruitment and organisation was undertaken by trainers" (Q.R. 3).

5.19.2 TARGETING OF PARTICIPANTS

Fourteen participants commented on this question. Six wrote that they targeted through the task force; "through task force mailing lists and sub-groups, local organisations, my own organisation, other trainers in the region" (Q.R. 7). "LDTF letters, emails, texts to those who have done Putting the Pieces Together Training, internal staff emails" (Q.R. 12). A further five participants commented on identifying key people in their work and targeting them; "identified key people likely to deliver substance use education either voluntarily or in their services" (Q.R. 2) "invited those known to be involved in drugs education in the area" (Q.R. 11). Two of the comments related to recruiting participants who had done previous training in the area; "identify various participants from other

training we run, such as, for those

who have completed 'Putting the Pieces Together' (Q.R. 4). "Within my role to deliver a range of training. DEWF training was offered to any staff who had engaged in previous training with project and had attended Putting the Pieces Together" (Q.R. 5).

5.19.3 TYPES OF ISSUES THAT THE TRAINERS FOUND THAT THEIR PARTICIPANTS DISCUSSED IN ONE DAY TRAINING

When trainers were asked what participants discussed in the training, eleven participants commented on this question. Two of these participants "can't remember". While one person wrote 'none'. The remaining 8 comments raised various issues, one of the main ones being, asked to do once off talks, three of these spoke specifically about schools and SPHE. "Issues around some of the requests being not in line with best practice such as one off talks, ex users speaking, being asked to work in schools even though the SPHE is the curriculum that should be followed and implemented" (Q.R. 3). "Testimonials in schools, implementation of SPHE in schools, programme development & implementation with young people & parents" (Q.R. 5). "SPHE and teacher involvement was an area of confusion" (Q.R. 8). "Being asked in to do once off sessions. Being requested for a contact for a speaker in recovery. Expectations very high for what being asked for a once off session" (Q.R. 7). The remaining issues consisted of "integration of families, parenting issues, fear of suicide" (Q.R. 1). One participant spoke about organisations needing to value investing in best practice issues and not 'quick fixes'.

"Staff on the ground need support to hold firm on what is best practice. Difficulty in measuring outcomes in drug prevention is an issue. Respect and value given to this type of work when placed opposite treatment and rehabilitation services is low in most Task Forces around the country. Schools need more support and teachers require more training to implement the drug prevention programmes as part of SPHE primary and post-primary levels. The ineffectiveness of testimonials from recovering drug or alcohol users, needs clearer explanation and more research highlighting this might be of benefit" (Q.R. 6)

5.19.4 FEEDBACK THAT THE TRAINERS RECEIVED ABOUT THE RELEVANCE OF THE TRAINING

Thirteen participants commented on the feedback they received on the relevance of the training. Five of the participants spoke only positively about the feedback they received. "Feedback was very positive...many felt that guidelines reaffirmed their work, others highlighted its usefulness as a reminder of areas to address" (Q.R. 5). "Most of the participants thought the manual and training was very good, relevant, supported their work and practice, gave them a framework to support what they do and ways to evaluate their work and project" (Q.R. 7), "Relevant to group needs" (Q.R. 12).

The remaining comments were positive but also gave constructive feedback. Five of the participants commented specifically on the difficulty participants had with the language and wording of the manual. "feedback was critical of wording" (Q.R. 11).

"Overall concept of training itself was very well received. Wordiness and language was almost always an issue for the manual. Hard work to get people to get the grasp of it. A lot of ploughing through to get the hang of it" (Q.R. 8).

One person commented specifically on the placement of the case studies in the training, *"some staff noted case studies could be done in a different way. It would be more useful to start with an example and then work towards identifying a piece of work in your role later in the day when participants are more familiar with the manual and how to use it to support them to work through their work" (Q.R. 4).* One participant noted that there was confusion about what the course would cover.

5.19.5 NON TRAINING DELIVERY

Participants who had not yet delivered training were asked as to why this might be the case. Participants gave a variety of reasons for not having delivered the training and 46 participants answered the question. For many of the participants, they cited that it was not part of their role within the organisation while some had not received the necessary training in order to deliver it. This is understandable as the participants had undertaken the one day training and therefore were not expected to deliver training. Many cited lack of resources and time constraints as the main reason why they had not delivered the training. Others commented that they had not been asked to do the training. For others, the reason they gave was that they didn't believe in it enough or they lacked the confidence to deliver the training. The following are a selection of the comments that participants gave for Q.24:

"current role has changed to more generic health promotion and a move away from specific topics such as drug education" (Q.R. 13)

"Have not participated in train-the-trainer for roll out of QS training" (Q.R. 17)

"It has not been requested yet as part of my role" (Q.R. 24)

"I myself do not feel confident enough to deliver the material and feel that attendees would struggle to understand the language" (Q.R. 34)

"time commitment" (Q.R. 36)

I don't believe in the manual or feel confident enough to deliver it" (Q.R. 45)

"Have not been asked or approached about delivering training" (Q.R.47)

5.19.6 BARRIERS/CHALLENGES IN ROLLING OUT THE ONE DAY TRAINING

For this question, 39 participants made comment. Seven of these comments said there were no barriers/challenges in rolling out the training. Eleven of the comments mentioned *'time'* specifically, while lack of resources was also cited by two people as barriers in implementing the training in their area. Some of the challenges were specific to the context of the area they were working in.

"The ages of the young people involved and also they would not fully appreciate the learning

involved. Also, there is the possibility they would become bored and disinterested" (Q.R. 6)

"Community participation not at that level of intervention yet, at information stage at present" (Q.R. 20)

"It would not be accessible to volunteers or members of the community" (Q.R. 37)

For some participants, they recognised themselves personally as being a barrier to rolling out the training and the following reasons were given;

"difficulty explaining what's involved" (Q.R. 29)

"lack of understanding and not believing in the manual" (Q.R. 38)

"learn the policy clearer and how to implement it and then push for the opportunity to share it" (Q.R. 35)

For some, the content of the training and the manual is the main challenge to conducting the training,

"would need to be more accessible and practical" (Q.R. 29). "It would be more attractive to people if it involved programme content and theories of drug prevention in it too" (Q.R. 34).

One person expressed her confusion that she was expected to roll out the training. *"I did not know we were expected to and I am not sure of the relevance of doing the training as I am still not full of grips with the manual myself" (Q.R. 21).* Two others identified 'training' and 'participation in training' as barriers in conducting the training in their area.

5.20 RECOMMENDATIONS FOR THE DRUG EDUCATION WORKERS FORUM IN TERMS OF THEIR PROGRAMME OF TRAINING IN THE QUALITY STANDARDS MANUAL/PROGRAMME

For the last question on the survey, 28 people commented. Of these comments, eleven participants either had no recommendations or used the space to commend the program and the training. *"it was excellent training and the programme has been well designed to train trainers" (Q.R. 11).* Another 3 people said they had answered that question previously with answers received such as *"see prev answer" (Q.R. 1).* One person said they did not understand the question.

The remaining 13 comments offered some recommendation in relation to the training and manual. Three of these were related to the language used in the manual, which should be made *"more reader friendly" (Q.R. 6)* and *"more accessible"(Q.R. 20).* Another three people left comments suggesting a follow up meeting to support people who had attended the training. *"follow up or refresher sessions might be useful for workers who attended one day training originally to support them to continue to reflect on their work in light of the QS, new evidence etc." (Q.R. 17).* *"There should be a further follow up with a practice manual with examples of programme material and evaluation techniques with training" (Q.R. 21).* One participant recommended that the DEWF "work

with people on implementing it" (Q.R. 8).

Two of the comments received related specifically to the placement of the case studies in the training. *"need to reconsider how the case studies are used. For some participants it was only at the end of the day they could starting using manual on their own" (Q.R. 15).*

"Review outline of training - initial individual case study should come at end of day when staff feel more confident in use of manual and feel they can use QS to support a specific piece of work. If participants walk out of training with this in mind they will be more likely to use manual then they return to their work" (Q.R. 16).

Another suggestion was in relation to making the manual more accessible, *"training needs to be longer with a concise handbook for workers to follow" (Q.R. 22).* *"look at the manual again, it needs to be shorter, easier to use and self-explanatory" (Q.R. 29).* *"Try to simplify initially, maybe a more visual concept where the information can then be put around the bare frame work. We get the framework well-padded out so hard to grasp the simple starting point" (Q.R. 23).*

5.21 CONCLUSION

In summary, the majority of responses to the follow up survey came from the South Western RDTF and the South Eastern RDTF. This is to be expected somewhat as they were strongly represented in the rollout of training. (South Eastern 23% of two day training and 3.4% of one day training: South Western 28% of two day and 28.3% of one day training). Across the national roll out of training participants came from a diverse range of backgrounds including community drugs workers, addiction counsellors, childcare workers, education staff, youth officers, an Garda Shiochana, psychology, psychotherapy and youth justice.

In terms of the QS having an impact on participants work practice 90% responded affirmatively. Fifty eight percent indicated that QS informed policy development and/or dealing with critical incidents. Clearly responses were positive in terms of QS informing substance use education programme development and implementation (84%) and in assisting respondents when working in partnership (74%). The QS have also been influential in highlighting issues or helping identify the needs of respondents' organisations in relation to training/access to resources (66%). In terms of evaluation 86.0% indicated QS helped them evaluate programmes, 44% the evaluation of staff training and 57.4% the evaluation of organisational policy.

Fifty seven percent indicated using the competencies section of the manual with 56% indicating that the QS informed other aspects of their work outside substance use education and the comments supplied showed a range of application.

Twenty four percent of respondents have gone on to deliver one say QS training. Of that number 75% received support from their local/regional drugs task force to advertise, promote and organise

the

training and they went on to add that they had received positive feedback in response to their roll out of the training. In terms of non-delivery some cited lack of confidence but for others it was not part of their role within their organisations. Others cited lack of resources and time constraints or not having been requested to do so as their reasons for not delivering the training. Some also identified barriers and these were detailed on page 69 of this report.

Overall in keeping with the responses to the one day and two day training responses were positive and demonstrated a successful implementation of training.

6. CONCLUSIONS AND RECOMMENDATIONS

6. CONCLUSIONS AND RECOMMENDATIONS

6.1 CONCLUSION

It is evident from the data that the QSSE was well received and useful for participants. The training was beneficial with over 90% of one day training participants and 94% of two day training participants indicating that they understood how to use the manual to aid their work as drug education officers.

The training also had a positive impact on skills confidence with 90% of both one day and two day training participants agreeing that they were now confident about using the skills learned during the training.

The design and implementation of the training clearly met participant's needs with the majority of delivery styles very useful. Clearly the training covered a wide geographical area, including a range of settings, such as, community and youth with participants coming from diverse roles, including drugs work, addiction counselling, education, an Garda Síochána, psychology, psychotherapy and youth justice work.

In the follow up survey, 78% of respondents have indicated using the QSSE within their work with 90% of them indicating that QS had impacted on/or influenced on their work practice. While still remaining high, the results for the influence of QSSE on policy development or dealing with critical incidents are less positive with just over half (58%) indicating that QS has had an impact in this regard. However, it is clear that QSSE has met its primary goal, in that 84% of respondents indicated that QSSE has informed their substance use education, programme development and implementation. Seventy four per cent indicated that QSSE has assisted them in working in partnership and involving external agencies.

6.2 RECOMMENDATIONS

6.2.1 IMPACT OF TRAINING AND MANUAL

The data from the evaluation clearly demonstrates that the training was most effective. The manual was also clearly relevant, appropriate and useful. From the feedback, it is clear that the implementation was extremely beneficial and participants responded very positively to both the training and the manual itself. The training clearly warrants continuation.

6.2.2 SIMPLIFICATION OF THE MANUAL LANGUAGE

While clearly the manual is comprehensive and relevant, a frequently recurring theme was the

complexity of the language used. It would be of benefit to produce a further edition of the manual with some attention to the simplification of language which would clearly be of benefit to the users. In order to enhance readability the colors of the manual might require rethinking (i.e. reading white text on green background is less conducive for visual impairment for example).

In order to increase the potential usefulness of the manual, an executive summary that acts as a guide written in accessible language would also be of benefit to those working in the field of substance use and misuse.

6.2.3 SETTINGS

It is clear that the training targeted a range of settings and that a diverse range of professions attended the training and this is to be commended. The interdisciplinary composition of groups facilitated enhanced learning. It may enhance the impact of QSSE if future roll out of training continues this trend and sought to expand further the range of settings from which the participants originate.

6.2.4 QSSE INFLUENCE OF POLICY DEVELOPMENT

The comments provided by respondents in relation to QSSE informing policy development evidenced the excellent potential of this manual in this regard. This is an area worthy of enhancement.

6.2.5 COMPETENCIES

Fifty seven per cent of respondents indicated that they had used the competency section of the manual. This is an area that could be further enhanced. Several participants found the training and manual effective for their own professional development and it appeared to generally raise confidence for individuals. However, this was not unanimous and therefore, sensitive implementation in terms of ensuring a climate of empowerment for all is essential in QSSE training.

6.2.6 INCLUSIVENESS

Several participants indicated the need for more sensitivity around issues of inclusion for populations such as individuals with intellectual disability, minority groups, prisoners and sex workers for example. Travellers are a specifically designated target group in the QSSE manual (page 110). This is clearly linked to policy priorities at the time of the production of the manual. Given the changing demographics and increasingly multicultural context the manual can be expanded to include a section on specific target groups.

6.2.7 SURVEY TIMING

The timing of the survey may not have been optimal especially for those that had undertaken the training four years previously. It would be more beneficial that each cohort that completes the training receives a follow up survey, one year post training completion.

6.2.8 FOLLOW UP

It is recommended that a follow up/refresher session be carried out six months after receiving the initial training. As resources may be limited, this could take place on an online interactive platform to facilitate participants in their own time.

The training was perceived as content heavy and therefore follow up would enhance the depth of engagement and understanding of participants. It might also provide an opportunity to engage in more expedient evaluation.

6.2.9 PARTNERSHIP

The manual, clearly had benefit in terms of partnership and inter-agency planning. This is a particular strength of the QSSE and can serve as a model of good practice in advocating and facilitating inter agency engagement.

6.2.10 MERIT IN QUALITY STANDARDS TRAINING AND IMPLEMENTATION CONTINUATION

Given the overwhelmingly positive responses to the training and the manual and its subsequent impact on participants work practice and inter agency engagement this manual and training clearly warrants continuation and expansion.

Finally, designing and delivering such a comprehensive education and training resource in substance use education by a voluntary interagency group is no mean feat. While recommendations are made here to continue and indeed even expand this initiative, there is also recognition that resources are clearly limited. However not to invest resources in such a clearly worthwhile and successful initiative would be to lose a unique and important opportunity to provide standards and real quality in drugs education work in Ireland.

APPENDICES

- A. One day training questionnaire
- B. Two day training questionnaire
- C. Follow up questionnaire

One Day Training 2010 Folder 1

What year did the evaluation take place?

- 2007
- 2008
- 2009
- 2010
- 2011

In which region did the evaluation take place?

- Mid West RDTF
- Western RDTF
- South East RDTF
- Midlands
- Dublin North East
- Ballyneal LDTF
- North East RDTF
- South West RDTF
- East Coast RDTF
- South RDTF
- North Dublin
- South West RDTF
- North East RDTF

I understand how to use this manual to aid my work as a Drug Education officer.

- Strongly agree
- Agree
- Uncertain
- Disagree
- Strongly disagree

I am confident about using the skills learned during this training.

- Strongly agree
- Agree
- Uncertain
- Disagree
- Strongly disagree

One Day Training 2010 Folder 1

I am aware of the basic principles behind the development of the quality standards manual.

- Strongly agree
- Agree
- Uncertain
- Disagree
- Strongly disagree

Please rate the usefulness of each topic covered by this training.

	Very useful	Fairly useful	Not at all useful
Information on manual	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Learning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other comments

A number of different facilitation methods were used during this training. Please rate the usefulness of each method.

	Very useful	Fairly useful	Not at all useful
Individual exercises	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Group work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Roleplay	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lectures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other comments

What things do you think should have been added to this training?

What things do you think should not have been added to this training?

What aspect(s) of the lesson do you think should have been covered in a different way?

Did the training meet your expectations? If not, why not?

One Day Training 2010 Folder 1

Other comments

ToT 2 Day Course

What year did the evaluation take place?

- 2007
- 2008
- 2009
- 2010
- 2011

In which region did the evaluation take place?

- South West (Kildare)
- South West (Wexford)
- Limerick
- South West (Laois)
- Dublin
- South East (Kilkenny)

I understand how to use this manual to aid my work as a Drug Education officer

- Strongly agree
- Agree
- Uncertain
- Disagree
- Strongly disagree

I am able to deliver training on the manual to other drug education workers

- Strongly agree
- Agree
- Uncertain
- Disagree
- Strongly disagree

I am confident about using the skills learned during this training.

- Strongly agree
- Agree
- Uncertain
- Disagree
- Strongly disagree

ToT 2 Day Course

I am aware of the basic principles behind the development of the quality standards manual

- Strongly agree
- Agree
- Uncertain
- Disagree
- Strongly disagree

Please rate the usefulness of each topic covered by this training

	Moderately useful	Very useful	Fairly useful	Not at all useful
Information on manual	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Learning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other comments:

A number of different facilitation methods were used during this training. Please rate the usefulness of each method.

	Not at all useful	Fairly useful	Moderately useful	Very useful
Individual exercises	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Group work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Roleplay	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lectures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other comments:

What things do you think should have been added to this training?

What things do you think should not have been added to this training?

What aspect(s) of the lesson do you think should have been covered in a different way?

Did the training meet your expectations? If not, why not?

ToT 2 Day Course

Other comments

DEWF Quality Standards (QS) Manual Evaluation**General Information****1. What is your gender?**

- Female
- Male

2. To what age range do you belong?

- 20-28
- 29-36
- 37-44
- 45-52
- 53+

3. When did you participate in the Drug Education Workers Forum (DEWF) training in substance use education?

- 2011
- 2010
- 2009
- 2008
- 2007

4. Which Regional Drug Task Force area are you working in? If you work in a Local Drug Task Force (LDTF) area please tick the region which the local is based in e.g. Clondalkin LDTF is based in the South Western RDTF area. Ballymun LDTF is in the North Dublin City and County RDTF area.

- East Coast RDTF
- Midland RDTF
- Mid-Western RDTF
- North Dublin City and County RDTF
- North Eastern RDTF
- North Western RDTF
- Southern RDTF
- South Eastern RDTF
- South Western RDTF
- Western RDTF

DEWF Quality Standards (QS) Manual Evaluation

5. Which setting do you work in?

- Youth
- Community
- School

Please specify the role:

6. Have you used the Quality Standards within your work?

- Yes
- No

DEWF Quality Standards (QS) Manual Evaluation

QS Informing your Work

7. Has the Quality Standards (QS) impacted on or influenced your work practice?

Yes

No

If yes, in what way?

8. Has the QS informed policy development or dealing with critical incidents?

Yes

No

Please explain:

9. Has the QS informed substance use education programme development and implementation?

Yes

No

Please explain:

10. Has the QS highlighted issues in, or helped identify the needs of, your organisation in relation to staff training and access to available resources which support substance use education?

Yes

No

Please explain:

DEWF Quality Standards (QS) Manual Evaluation

11. Has the QS assisted you when working in partnership or when involving external agencies?

Yes

No

Please explain

12. Has the QS helped you evaluate your work e.g:

	yes	no
Evaluation of programmes	<input type="radio"/>	<input type="radio"/>
Evaluation of staff training	<input type="radio"/>	<input type="radio"/>
Evaluation of organisational policy	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>

Please explain

13. Did you use the competencies section of the manual?

Yes

No

Please explain

14. Please comment on overall content of the QS manual and its relevance to substance use education work.

15. Please comment on the overall clarity of the standards and performance indicators included in the QS manual

16. Has the quality standards manual informed other aspects of your work outside of substance use education?

Yes

No

Please explain

DEWF Quality Standards (QS) Manual Evaluation

Future editions of the manual

17. Can you identify recommendations for improving the manual?

18. Can you identify any research papers or evidence which might inform future sections when developing the manual?

Yes

No

If yes, please specify:

19. Within your role have you delivered the one day QS training?

Yes

No

DEWF Quality Standards (QS) Manual Evaluation

Delivered the one day QS training

20. Did you receive support from your local/regional DTF to advertise, promote, organise the training?

Yes

No

Not sure

Please explain:

21. How did you target the participants?

22. What were the types of issues (if any) in relation to best practice in substance use education that participants discussed?

23. What feedback did you receive about the relevance of the training?

DEWF Quality Standards (QS) Manual Evaluation

Did not deliver any OS training

24. If you have not delivered any training can you tell us why not?

25. What do you think are the barriers/challenges for you in rolling out the one day training in your area?

DEWF Quality Standards (QS) Manual Evaluation

Recommendations for the future

26. We would love to hear if you have any recommendations for the Drug Education Workers Forum in terms of their programme of training in the quality standards manual/programme?

DEWF Quality Standards (QS) Manual Evaluation

Thank you

Thank you for the time and effort taken to complete the questionnaire. It is greatly appreciated.

evaluation **REPORT**

2013

A Manual in Quality Standards in Substance Use Education

