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**CareSearch, NSAP, PCOC: evaluation of the Working Together Change
Framework workshops**

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CareSearch, NSAP, PCOC: evaluation of the Working Together Change Framework workshops

Abstract

There is increasing interest in the relationship between EBM and QI and in how evidence can inform choices made and processes used in QI activities (1 - 2). Other researchers have highlighted the need to establish functional goals, develop action plans, implement specific actions and monitor progress when undertaking change activities (3 - 4).

Keywords

pcoc, evaluation, working, nsap, together, workshops, change, caresearch, framework

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WORKING TOGETHER

EVIDENCE : STANDARDS : OUTCOMES

CareSearch, NSAP, PCOC: Evaluation of the Working Together Change Framework Workshops



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Introduction

There is increasing interest in the relationship between EBM and QI and in how evidence can inform choices made and processes used in QI activities (1-2). Other researchers have highlighted the need to establish functional goals, develop action plans, implement specific actions and monitor progress when undertaking change activities (3-4).

Services can face many challenges when trying to undertake, or maximize the value of, quality improvement activities. They may receive a PCOC report, create their NSAP action plan, or find new evidence about an issue in clinical practice, all of which can identify areas for improvement. But, how are these taken forward?

In 2012, workshops entitled 'Working Together Change Framework' were developed by the NSAP, CareSearch and PCOC to assist palliative care professionals. The workshops were designed to support attendees to identify a problem, analyse the cause, source evidence and measures, create an implementation plan and review what happens. The model was developed and presented at 3-hour workshops held in Adelaide, Melbourne, Perth, Launceston and Dubbo in 2012. A further two workshops were held in Sydney (Paediatrics) and Brisbane in early 2013.

Aim

To report on the findings of the 2012 and 2013 workshop evaluations, and

To outline the findings of a study of those who consented to a follow up survey eight weeks after the workshop.

Method

This study received ethics approval through Flinders University (No. 5707).

Workshop Evaluation

Workshop participants from 2012 and 2013 were invited to complete a workshop evaluation on the day. Participants received email updates and further information relevant to the themes at 3 weeks and 6 weeks post workshop. One hundred and four people attended the seven workshops. Seventy seven (or 77.9%) completed a workshop evaluation form.

Follow Up Study

Those who attended a workshop in 2012, and who completed the workshop evaluation, were eligible to participate in a follow up study. They were sent a further survey at eight weeks to look at how services used the information to make changes in their service. Of those eligible to participate, 23% (13/ 56) completed the follow up survey at eight weeks.

Overview of the WTCF

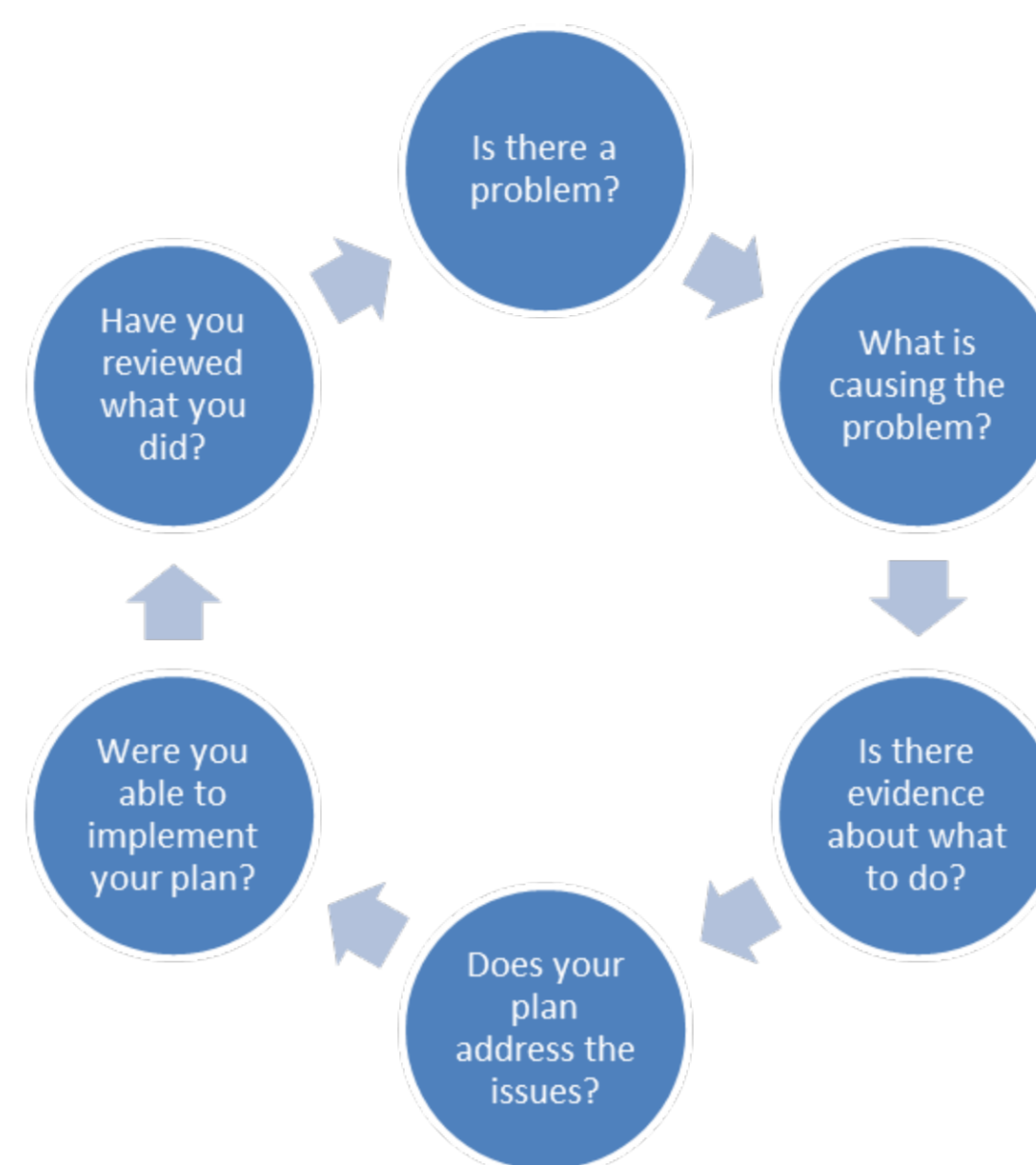


Figure 1: Six phases of the WTCF

Workshop Evaluation

Across the seven workshops, 89% of respondents agreed, or strongly agreed, that the workshop had met their needs.

Unless we can intelligently assess and respond with evidence-based practice then report it, we cannot expect to improve practice except individually (DW5004)

Eighty one percent agreed or strongly agreed that they were more confident in applying an evidence-based approach to problem solving.

Very helpful to work through the "Butterfly Service". Combining the 3 standards, evidence and outcomes. Self-awareness of not utilising CareSearch enough (PW4005)

I like the concept of prioritising problems and quality cycle (PW4006)

Across all workshops, 70% of participants agreed, or strongly agreed, that after this workshop they felt more confident in implementing changes in their organisation.

Change management is difficult however this workshop has provided basic tools to assist me (PW4006)

I am not in a position to implement change however I feel confident to offer suggestions and discuss issues that may need changing (PW4008)

A number of participants commented on the value of having all of the three programs involved in the workshop.

Using NSAP, PCOC and CareSearch data to build a plan (AW1001)

How the national /state data can be used on the ground (MW2013)

To be able to see how NSAP, PCOC and CareSearch can work together to improve and assess palliative care (PW4010)

Variabilities and aspects of service outcomes which can be extracted from PCOC and NSAP data (DW5010)

Finally, 80 participants rated their overall satisfaction with the workshop, with 77.6% satisfied or extremely satisfied.

Follow-up Study

Of the 13 who completed the follow up survey at 8 weeks, 11 (84.6%) had discussed the workshop with colleagues and 10 (76.9%) had discussed the role of evidence in change activities.

Feel more confident I am on the right track (DW5025-2)

Seven of the respondents (53.8%) had identified a problem that they wanted to change and six of them (46.2%) had already identified or developed strategies for implementation.

However, only 4 (or 30.8%) had identified measures that could be used to assess the success of the intended change activity.

Pre and post audits. Nurse surveys (PW4013-2)

Improvement in PCOC stats (LW30103-2)

Around 70% of respondents indicated that there were problems in implementing change within their organisation.

Complex entrenched cultural issues (DW 5024-2)

Limited services. Transient staff (PW4002-2)



Conclusion

Recognising and addressing problems in clinical practice and service delivery is an important part of ensuring quality care for patients. Staff and service need support in developing the skills and knowledge that are essential to successful quality improvement activities.

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