

Improving the Dementia Education Program: Assessing Diversified Learning Needs of Participants

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Background

Literature and evaluation findings from the UBC CPD Dementia Education Strategy (2007-2010) identified the following areas for ongoing CME program improvement:

1. Increase interprofessionalism;
 2. Adjust length of workshop to allow broader case-based discussion;
 3. Address challenges faced by family physicians in providing dementia care to BC's multi-ethnic population that tends to have a diverse understanding of aging and delayed reporting of cognitive impairment to physicians; and
 4. Offer the session to remotely-located health care professionals who serve this population
- Rampitige *et al.* demonstrated that CME ought to be targeted and that interactive, multifaceted interventions are more effective in bringing about positive changes.

The evaluation findings were collected from 39 workshops delivered to 339 participants in BC between 2009-2010.

Methods

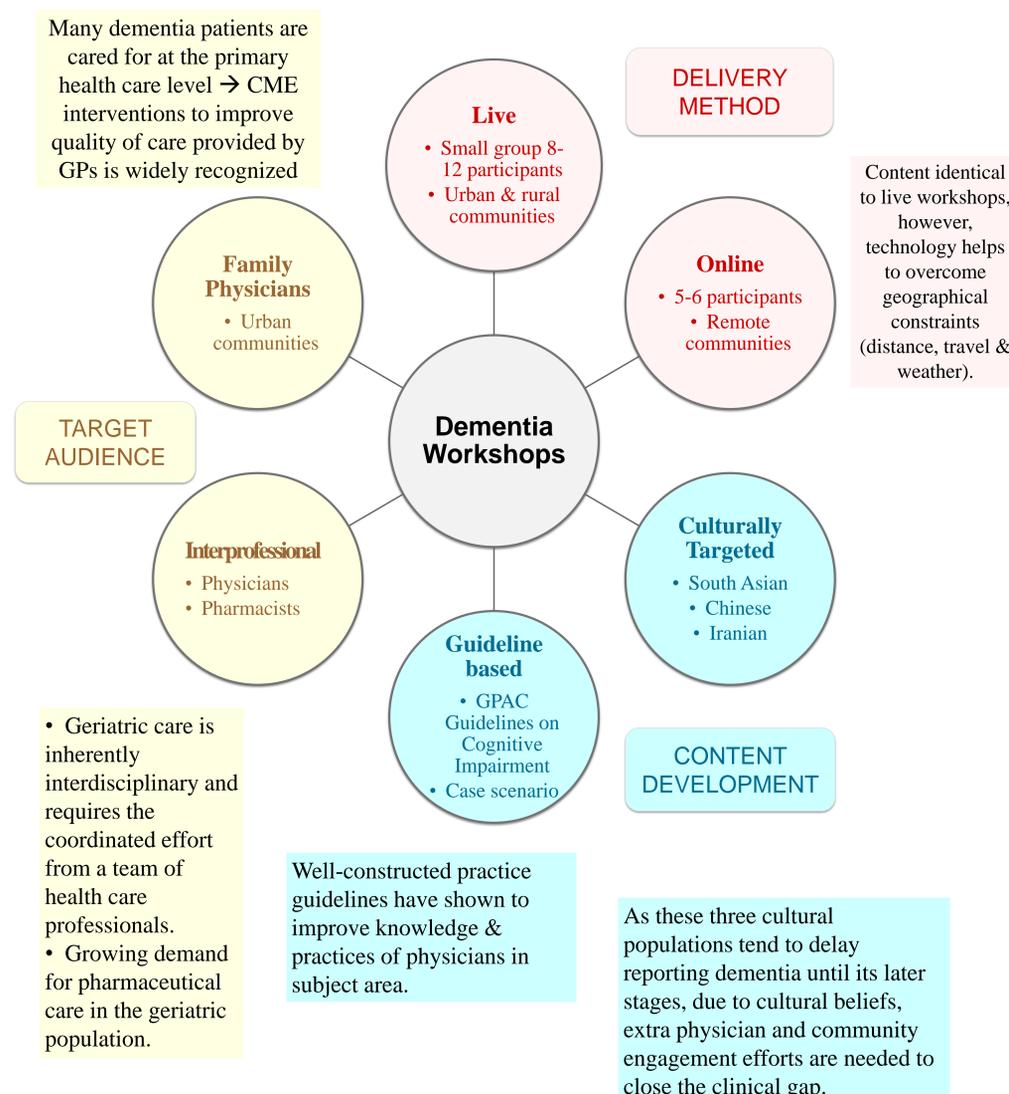
Based on these findings, UBC CPD has developed a unique approach to the workshop component of the current Dementia Education Program that effectively addresses learners needs. See Figure 1.

Workshop evaluations are comprised of two components:

1. Secondary PharmaNet data; and
2. Facilitator & participant feedback:
 - a) pre-workshop survey
 - b) workshop evaluation survey
 - c) facilitator feedback survey
 - d) 2 month post workshop survey
 - e) post workshop interviews & focus groups

Results

Figure 1: UBC CPD's multi-pronged approach to dementia workshops.



Lessons Learned

- Evaluation results will reveal how multi-pronged workshops can effectively address diverse learning needs and clinical gaps in dementia care. They will provide a comprehensive portrayal of the workshop experience as it relates to physician learning and practice changes.
- Current published literature on evaluations of CME activities relating to dementia care and management is limited.
- Significance: This study will inform CME best practices to help physicians and pharmacists on their path of continuous improvement over their professional careers.

References

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Feedback & Questions

Please contact andrea.k@ubc.ca

Further information

More information on this and related projects can be obtained at:
www.ubccpd./programs/DementiaEducation

PDF of poster here: <http://goo.gl/woQz8>

Poster Presentation: Innovation/Work in progress

**Improving the Dementia Education Program:
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Problem: Literature and evaluation of a previous dementia education workshop strategy identified the following areas for ongoing program improvement: (1) interprofessionalism; (2) hindrance of workshop length on broader case-based discussion; (3) addressing GPs challenges in providing dementia care to BC's multi-ethnic population that have a diverse understanding of aging and delayed reporting of cognitive impairment to physicians; and (4) providing the session to remotely located health care professionals.

What is being tried? In order to meet these program gaps, UBC CPD is offering three unique workshop formats including live interprofessional workshops for GPs and pharmacists, online workshops for GPs and pharmacists, and workshops targeted to GPs working with particular cultural populations. The live workshops consist of one case, which address the need for interprofessional learning while discussing the care continuum for patients with dementia. Using the same content as live workshops, the online workshops are delivered to remote communities where no live workshop will be delivered. The targeted live workshops address the needs of GPs who treat patients from South Asian, Iranian and Chinese cultural groups. In order to implement a program wide evaluation, a pre-workshop survey, on-site workshop evaluation, and two-month post-workshop survey are being used.

Lessons learned: The dementia workshop program, consisting of live, online, interprofessional and culture specific workshops, has been adapted to meet learning needs in regards to both content and format. Evaluation results will reveal how these multi-pronged workshops can effectively address diverse learning needs and clinical gaps in dementia care.

Keywords: dementia; medical education; case-based workshop