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Evaluation of Two Knowledge Transfer Strategies to Improve Knowledge and Use of Outcome Measures

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Introduction

The importance of measuring outcomes after therapy intervention is recognized yet actual use of outcome measures in practice remains low. Evaluation of innovative strategies to transfer knowledge about outcome measurement is required.

Objectives

This study compared the effectiveness of two knowledge transfer (KT) interventions to change knowledge and behavior (utilization and clinical reasoning) related to the use of health outcome measures.

Methods

Occupational and physical therapists (n = 78) in musculoskeletal practice were allocated through minimization to one of two different KT interventions with the same curriculum: 1) Stakeholder-Hosted Interactive Problem-Based Seminar (SHIPS), and 2) Online Problem-Based course (e-PBL). SHIPS consisted of face-to-face problem-based learning (PBL) for 2 1/2 days with content expert tutors. The e-PBL consisted of a 6-week web-based course facilitated by content experts. Trained evaluators conducted chart audits and chart-stimulated recall. Baseline predictors measured demographics, knowledge, attitudes/barriers regarding outcome measures, and Readiness to Change was assessed by self-report. Immediately post-intervention and 6 month evaluations were performed. Preliminary quantitative evaluations are completed.

Results

39 participants were enrolled in SHIPS (8 males, 31 females, mean years of experience=17.9 (SD=11.0)) and 39 participants were enrolled in e-PBL (5 males, 34 females, mean years of experience=17.4(SD=10.9)). SHIPS had a 100% completion rate, whereas ePBL had a 39% completion rate. Immediate post-session improvements in self-efficacy to use outcome measures were noted for the SHIPS (4.9-5.1; $p < 0.01$) but not e-PBL (4.2-4.4; $p > 0.01$). The knowledge scores of SHIPS participants also showed a marked improvement (baseline = 45.5%; post-session = 63.8%, $p < 0.001$) in comparison to the e-PBL participants (baseline = 51.2%, post-session = 55.6%; $p > 0.05$). Prior to the intervention, 69.4% of SHIPS participants and 67.6 % of e-PBL participants reported that they had started making plans to change their use of outcome measures. Post-session, 89.1% of the SHIPS participants and 65.5% e-PBL participants reported that they have started making plans to change their use.

Conclusion

While online access was valued, completion of a face to face intervention was superior in facilitating changes to knowledge, intent and confidence regarding outcome measure use.