Evaluation and Credit Tracking Guidelines for Partnered Activities

Evaluation
The Office of Continuing Professional Development (OCPD) requires that an evaluation be conducted for each learning activity. This evaluation provides an opportunity for learners to share feedback about the activity and is a primary mechanism by which Planning Committees measure change in learners’ competence, performance, and/or patient outcomes. The systematic evaluation of OCPD’s activities allow OCPD to assess the degree to which the activities we accredit fulfill the mission of the University of Minnesota, Interprofessional Continuing Education. Evaluation data will be provided to you and is used in the planning of future activities and identifying educational needs.

Credit Tracking
Credit tracking data reflects information provided by each individual learner about the type(s) of credit and number of credits they are requesting. OCPD will only issue Statements of Participation to individuals who submit the credit tracker.

Participation Tracking
Participation tracking data reflects the information of all of those who attended the activity. OCPD will provide you with a template and instructions regarding your responsibilities for tracking participation at the activity and providing that data to OCPD.

If you are not utilizing OCPD’s registration services, be sure that you collect the following information at the time of registration, as these are required data points for participation tracking:

- First Name
- Last Name
- Email Address
- Professional Category (Physician, Nurse, Pharmacist, Social Worker, Physical Therapist, etc.)

You will be required to provide a Participant Data report to OCPD using an Excel template that your Education Team will provide to you. In this report, you will provide the First Name, Last Name, Professional Category, Email Address, Address, and Attendance Status of everyone who attended the activity. This report is due 3 business days following the activity.

Requirements
OCPD requires that all activities utilize OCPD’s online Evaluation and Credit Tracker. OCPD has developed standard evaluation questions that must be used; however, Planning Committees can add questions to assess specific data needs of the activity. See Addendum to see OCPD’s required evaluation questions.

At the conclusion of the evaluation, learners will be asked to indicate which credit type(s) they request and how many credits they are claiming. OCPD will design the tracker based on the specific credit types offered and the final credit count.

The online Evaluation and Credit Tracker is conducted using Qualtrics, a mobile-friendly survey platform. The Evaluation and Credit Tracker will close 2 weeks after the activity concludes. Learners who request CE credits and/or Statements of Participation after the online Evaluation and Credit Tracker closes will be required to pay a $10 late fee. Requests for late Credit Trackers must be received by OCPD within one year from the last day of the activity.
Given learners must complete the Evaluation and Credit Tracker in order to have their credits recorded and receive a Statement of Participation, it is imperative that you communicate this information. OCPD will provide you with relevant language and a link to the online Evaluation and Credit Tracker that you must share with all learners and faculty. We require that this information is included in your onsite materials such as printed materials and/or welcome slides. Additionally, OCPD strongly recommends that you email this information to learners and faculty.

**Evaluation Summary and Raw Data**
Once the online Evaluation and Credit Tracker is closed, OCPD will provide you with a standard evaluation summary report and a file with the raw learner data. Please note that the shared data will not be edited or redacted by OCPD and you may want to review and edit the summary report before sharing it with others.

OCPD will reconcile the Credit Tracker data against the Participation Data you provide to OCPD and will issue Statements of Participation to eligible learners via email 4-6 weeks following the activity. OCPD will provide you with courtesy copies of the Statements of Participation for your records.
Addendum – OCPD Required Evaluation Questions

Relative to where I was prior to participating in this activity, I am confident that this activity:

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Agree</th>
<th>Somewhat Agree</th>
<th>Neither Agree nor Disagree</th>
<th>Somewhat Disagree</th>
<th>Strongly Disagree</th>
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<tbody>
<tr>
<td>Increased my knowledge</td>
<td>O</td>
<td>O</td>
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<td>Improved my skills/strategy</td>
<td>O</td>
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<td>Improved my performance</td>
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Relative to where I was prior to participating in this activity, I am confident that this activity:

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<th>Strongly Agree</th>
<th>Somewhat Agree</th>
<th>Neither Agree nor Disagree</th>
<th>Somewhat Disagree</th>
<th>Strongly Disagree</th>
<th>N/A – I have no direct impact on patient outcomes</th>
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<tr>
<td>Improved my ability to impact patient outcomes</td>
<td>O</td>
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Give an example that you intend to apply in practice to improve patient outcomes.

Give an example of how this activity impacted your ability to function as a member of the healthcare team.

**Date** [This question about presentations is optional]

Rate the following presentations:

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<tr>
<th>Presentation</th>
<th>(Presenter)</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
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Please share any comments about specific presentations, effectiveness of teaching methods, level of active learning, etc.
Relative to where I was prior to participating in this activity, this activity has positively affected my ability to:

1. Objective
   - Strongly Agree
   - Somewhat Agree
   - Neither Agree nor Disagree
   - Somewhat Disagree
   - Strongly Disagree

2. Objective
   - Strongly Agree
   - Somewhat Agree
   - Neither Agree nor Disagree
   - Somewhat Disagree
   - Strongly Disagree

3. Objective
   - Strongly Agree
   - Somewhat Agree
   - Neither Agree nor Disagree
   - Somewhat Disagree
   - Strongly Disagree

4. Objective
   - Strongly Agree
   - Somewhat Agree
   - Neither Agree nor Disagree
   - Somewhat Disagree
   - Strongly Disagree

Were the presentations free of commercial bias?  
(Did the presentations avoid promoting a particular product or service?)

☐ Yes  ☐ No

If the presentations were not free of commercial bias, please explain:

Overall...

My expectations and educational needs related to this topic were met.

☐ Strongly Agree  ☐ Somewhat Agree  ☐ Neither Agree nor Disagree  ☐ Somewhat Disagree  ☐ Strongly Disagree

Teaching and learning methods were effective.

☐ Strongly Agree  ☐ Somewhat Agree  ☐ Neither Agree nor Disagree  ☐ Somewhat Disagree  ☐ Strongly Disagree

This activity gave me the opportunity to learn from, with and about others on the healthcare team.

☐ Strongly Agree  ☐ Somewhat Agree  ☐ Neither Agree nor Disagree  ☐ Somewhat Disagree  ☐ Strongly Disagree

Share any comments about specific aspects of this activity.

As a result of participating in this activity, I will make change in my practice or role.

☐ Yes
☐ Possibly, I am contemplating change, but would need more information and/or education
☐ No, but the content affirms my current behavior/practice
☐ No, I am unable to make changes

If yes, identify any significant changes to your role.

If contemplating changes, please identify additional tools, education, and resources that would be helpful to you.

If no, what barriers may exist to prevent you from making changes?
What suggestions or system changes would you recommend to overcome these barriers?

The Credit Tracker immediately follows and collects:

First Name
Last Name
Email Address
Professional Category
Full/Partial Attendance
Number and Type(s) of Credit Requested
And any additional information OCPD needs to record/issue CE credits being offered for the activity