

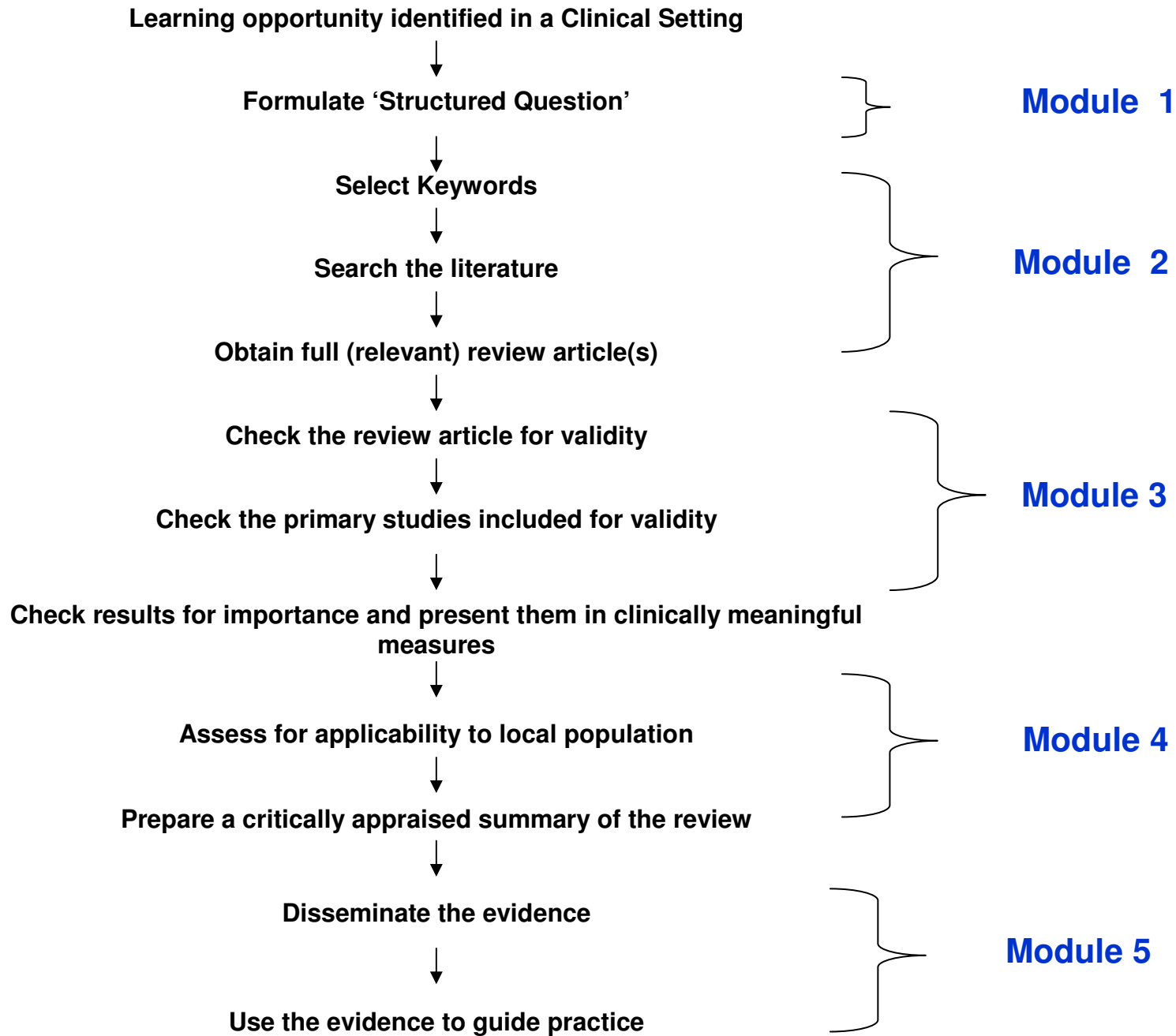
Postgraduate training in evidence based medicine-EU EBM Unity

Evaluation of the e-learning content

EU EBM Unity partnership

- **Development of core curriculum**
- **Piloting and evaluation**

- Partners:
 - Birmingham Women’s Hospital /The University Of Birmingham
 - Aquamed – Germany/Austria
 - Universita Cattolica del Sacro Cuore - Italy
 - AMC Amsterdam – The Netherlands
 - CASPi – University of Birmingham
 - CASP Poland
 - CASP Spain
 - CASP Hungary
 - Basel Institute of Clinical Epidemiology Switzerland
- Steering Committee




Modules

- *clinical setting*
- **e-sessions**
- **assessment**
- *activities and assignments with feedback*
- *handbook*

EBM UNITY Leonardo Project - MODULE 1 (00:56 / 09:19) ATTACHMENTS

euebm
European Union Evidence Based Medicine Unity





MODULE 1

Outline Thumbnails Notes Search

- 1. Evidence Based MedicineModule 1
- 2. Learning Objectives
- 3. Recognizing knowledge gaps
- 4. Prioritising questions in two dimensions
- 5. Classifying clinical questions
- 6. Specific questions = PICO structure
- 7. The clinical process
- 8. Type of research evidence & study design
- 9. An example question
- 10. Module 1: Summary

euebm
European Union Evidence Based Medicine Unity



Leonardo da Vinci

Learning Objectives

At the end of module 1 you will:

- Be able to identify knowledge gaps in your practice and prioritise them.
- Be able to translate your knowledge needs into structured PICO questions.
- Be able to choose the most appropriate study design to answer a given clinical question.
- Know that systematic reviews offer the highest level of evidence.

articulate
POWERED PRESENTATION

SLIDE 2 OF 10 PAUSED 00:10 / 00:52

Done Internet

Assessment: MCQs

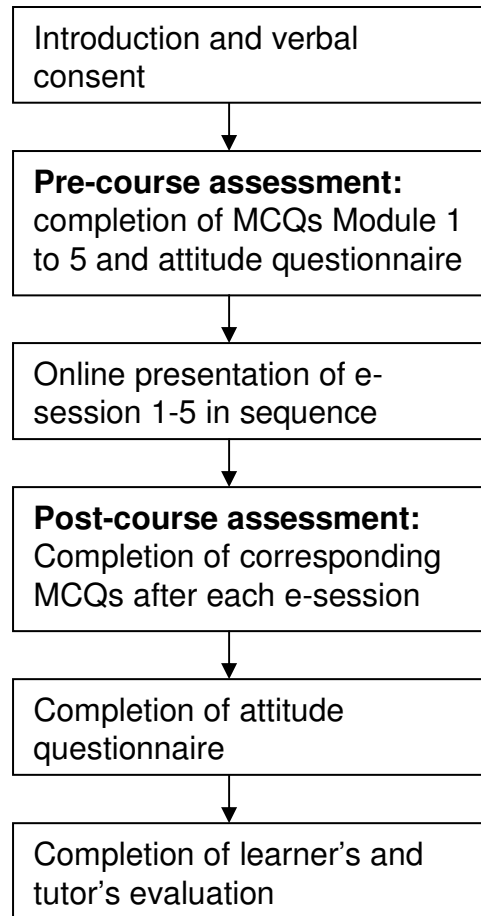
- previously validated, adapted to learning objectives
- 'true' false'
- 'best fitting answer'

- Attitudinal questionnaire

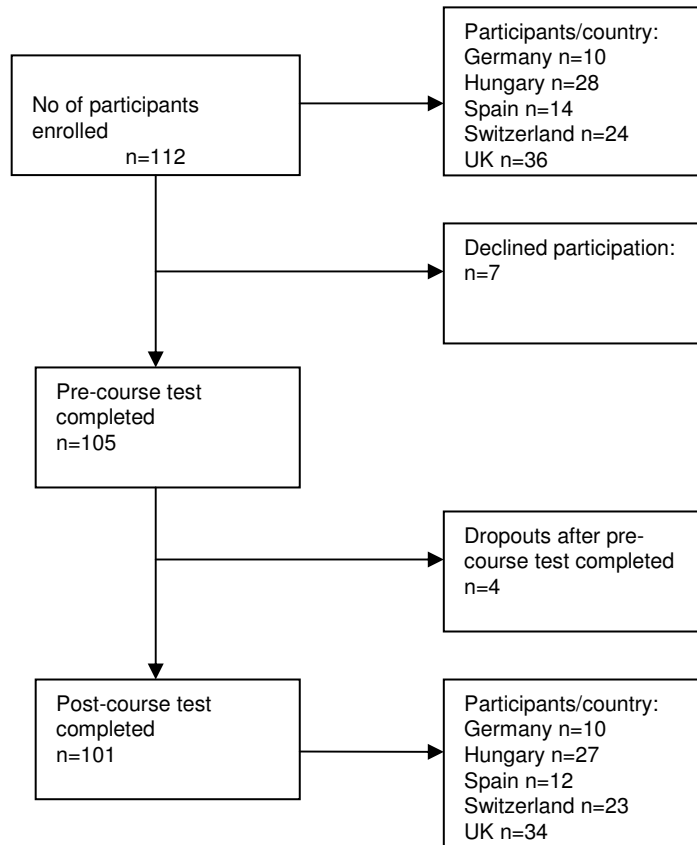
Methods

- March – July 2007
- Before and after design
- Effect of e-learning on
 - knowledge gain
 - attitudinal changes
 - qualitative feedback
- 5 partner countries: Germany, Hungary, Spain, Switzerland, UK
- Translation

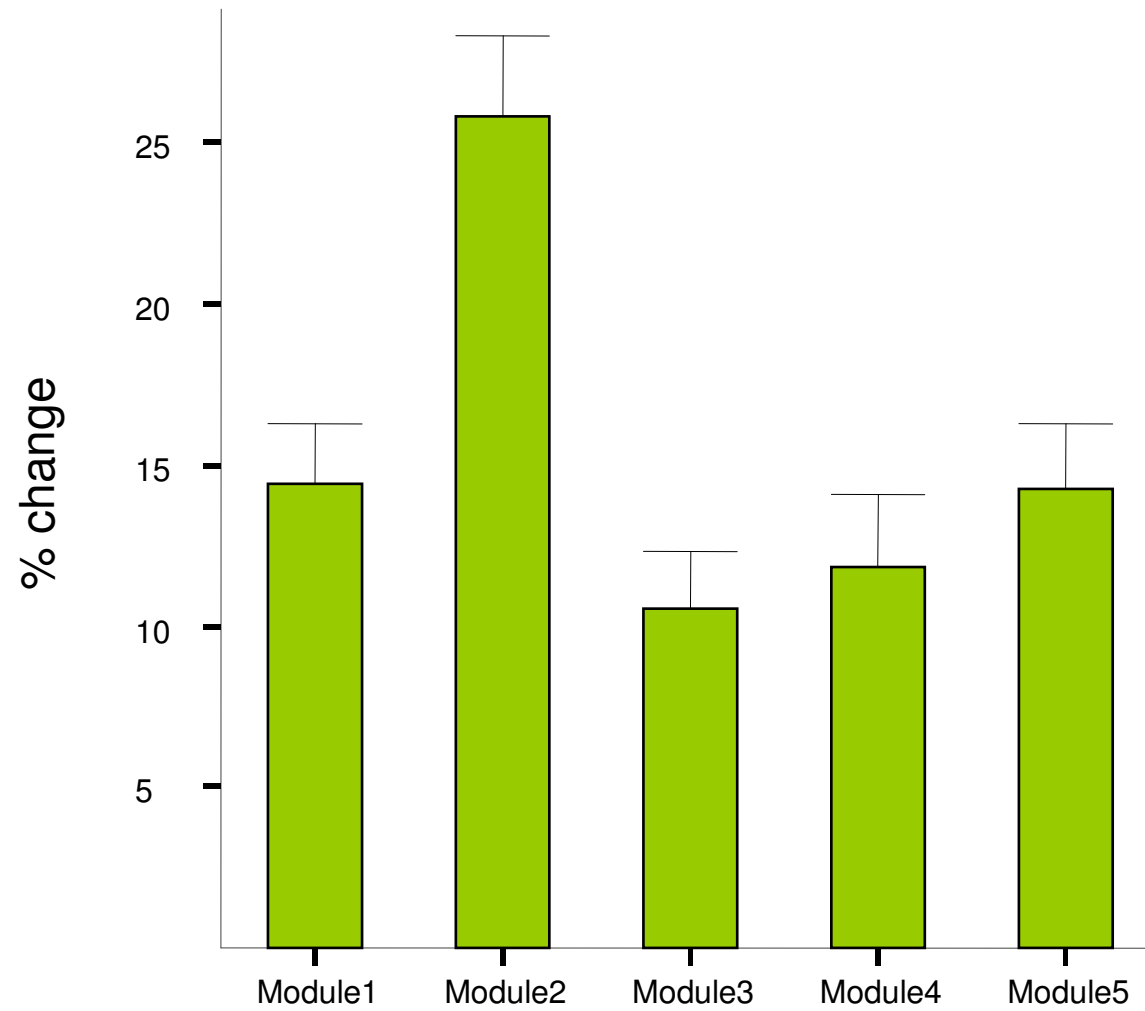
Administration of the course



Flow of participants

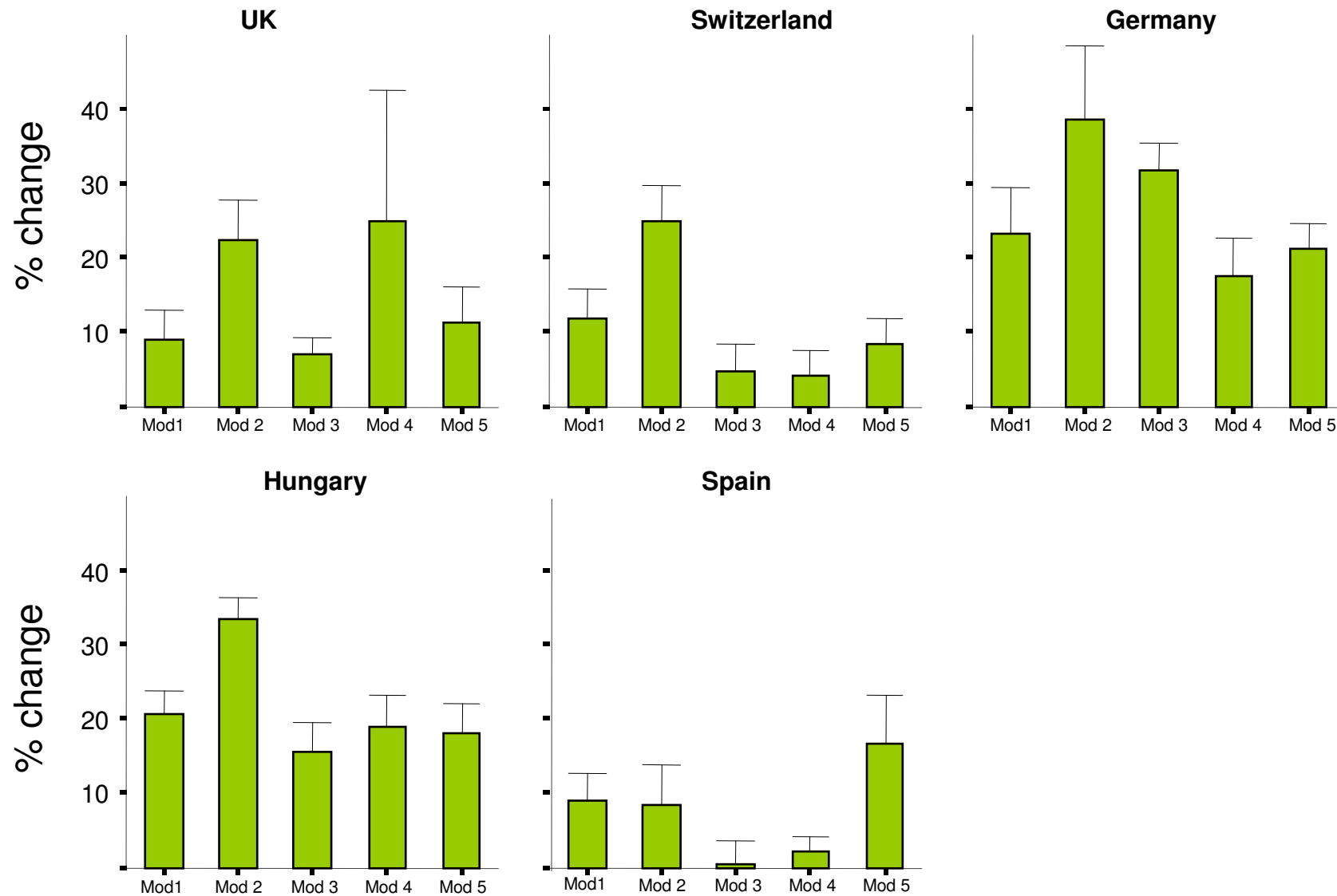


Relative score change



Relative change between pre course and post course scores for MCQ of the five modules for all participants

Relative score change

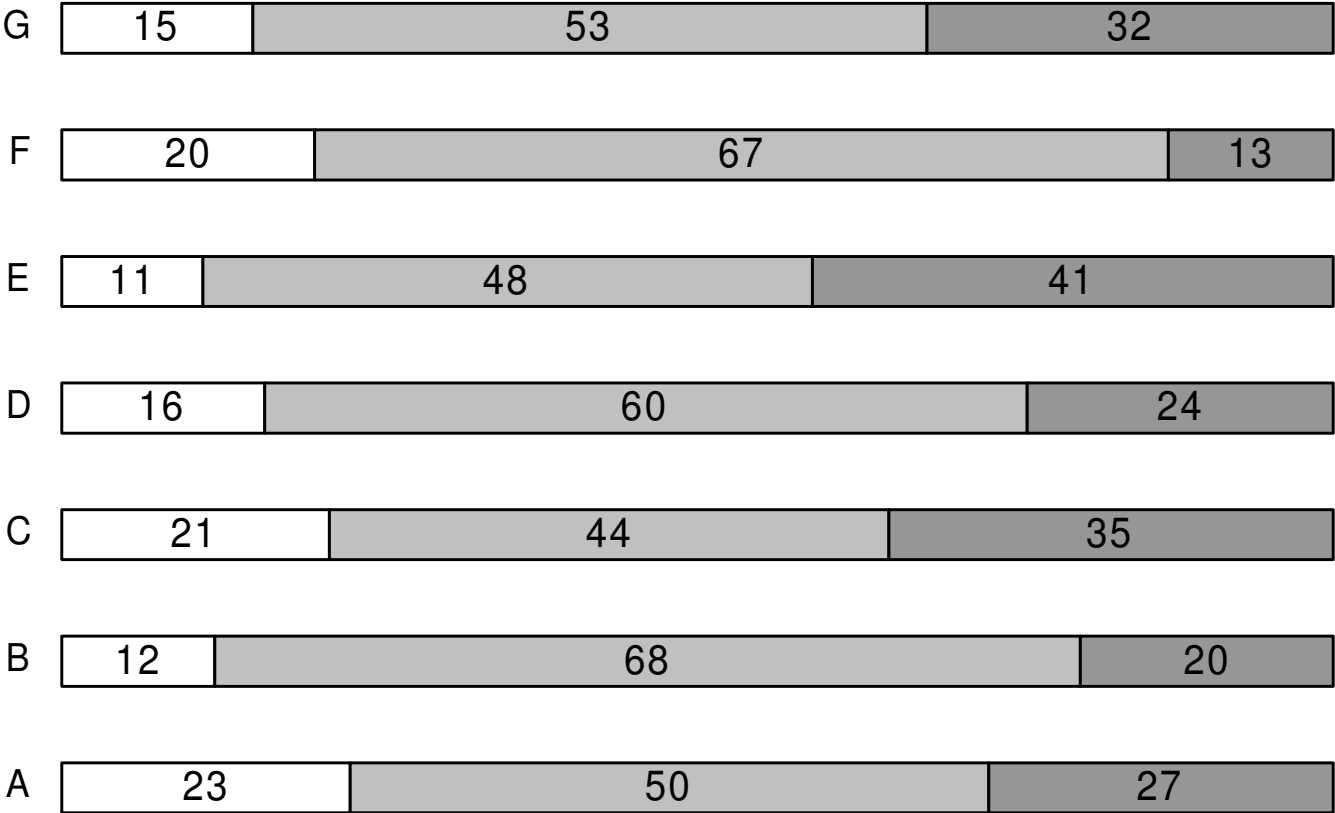


Relative change between pre course and post course scores for MCQ of the five modules according to centre.

Attitudinal questionnaire

- (A) Original research is confusing
- (B) Study design is important in article selection
- (C) Evidence-based decision making is ‘health care by numbers’
- (D) Contracts for health care professionals should include time taken away from patient care for reading and appraising the literature
- (E) I am confident that I can assess research evidence
- (F) Systematic reviews play a key role in informing evidence-based decision making
- (G) The health care system in my country should have its own programme of research about clinical effectiveness

Attitudinal changes



0% 20% 40% 60% 80% 100%

□ Loss □ Unchanged □ Gain

Qualitative feedback

- Slides, audio and visual components clear understandable
- Adequate difficult level
- Some sessions are too long
- Sometimes interruptions (internet connection)
- Useful to have further courses

Strengths and weaknesses

- Different
 - countries
 - languages
 - medical disciplines
- Absence of a control group
- Sample size

Conclusions

- Quality of materials found to be good and at adequate difficulty level
- Multilingual e-EBM materials that can be helpful in providing unified EU certification in EBM

