TRAINING OF STAFF AND VOLUNTEERS OF THE BELGIAN RED CROSS-FLANDERS WHO ARE UNFAMILIAR WITH EBP: EXPERIENCES FROM A NEWLY DEVELOPED WORKSHOP

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INTRODUCTION

Evidence-based practice (EBP) has become an integral part of the activities and programmes developed by the Belgian Red Cross-Flanders. The Belgian Red Cross-Flanders works with volunteers and staff which are for the most part unfamiliar with EBP. Effective communication and training is essential to avoid misunderstandings about the concept of EBP and to engage them towards EBP.

OBJECTIVES

Our main goal was to generate a change in mind in lay-people. By introducing a workshop on EBP, we want to motivate people to have a critical attitude towards the validity and usefulness of information, to teach them the basics of the evidence-based method and to point out the advantages and limitations of evidence-based work.

METHODS

A 3h workshop was designed to introduce EBP to a public with different backgrounds. We used highly interactive adult learning principles of 'learning by doing' combined with brief presentations to facilitate the learning of the critical components of EBP (see overview Table 1). The workshop has been developed in collaboration with didactical experts. A questionnaire has been created to gain information about the attitude and knowledge of the participants towards EBP and to evaluate their self-reported ability to recognise valuable information. Anonymous survey questionnaires were given to all participants at the start and the end of the workshop.

TABLE 1 ▶ OVERVIEW OF PROGRAMME AND DIDACTICAL APPROACH OF THE 3H WORKSHOP

PROGRAMME	DIDACTICAL APPROACH	TIME
Introduction		10'
The philosophy of evidence-based practice	Interactive lecture, Exercise	20'
Examples of fallacies of health issues	Interactive lecture, Quiz: true or not true	20'
The steps to evidence-based practice (EBP):		
1) Define the problem (PICO)	Interactive lecture, Assignment, Exercise	10'
2) Find the best information	Game, Interactive lecture, Assignment	20'
3) Judge the information on value and usability.	Interactive lecture, Assignment, Exercise	15'
4) Implement the information in the correct context and evaluate	Assignment, Exercise	5'
The strengths and limitations of EBP	Role playing, Discussion	10'
EBP at the Belgian Red Cross-Flanders	Interactive lecture, Assignment, Video	10'

QUESTIONNAIRE

We adapted a survey questionnaire (McColl, BMJ. 1998 Jan 31;316(7128):361-5) to our setting. The questionnaire was drawn up with a range of questions concerning: attitude towards EBP, use of information sources, basic EBP knowledge and skills, and barriers. Several questions were added in order to get information about the general attitude and beliefs regarding the usefulness of EBP in the Belgian Red Cross-Flanders.

TABLE 2 ▶ RESULTS OF THE PARTICIPANTS ATTITUDES TOWARDS EBP BEFORE AND AFTER THE EBP WORKSHOP

ATTITUDE	PRE-MEAN	SD	N	POST-MEAN	SD	N	P-VALUE
I have a positive attitude towards EBP	4,29	0,76	7	4,57	0,53	7	0,42
EBP is usefull in my daily activities	3,71	0,76	7	4,29	0,49	7	0,09
In my unit, the use of EBP leads to better decisions and advices	3,00	1,26	7	3,57	0,98	7	0,34
The use of EBP leads to an additional work-load	2,33	0,52	7	3,00	0,82	7	0,07
EBP is important for the Belgian Red Cross-Flanders in general	3,83	0,75	7	4,43	0,53	7	0,08
EBP is important for the blood services of the Belgian Red Cross-Flanders	4,50	1,00	7	4,83	0,41	7	0,42
EBP is important for the humanitarian services of the Belgian Red Cross-Flanders	3,80	1,10	7	4,29	0,76	7	0,33
EBP is of limited value in my field cause of a lack of scientific evidence	3,40	0,89	7	3,17	0,75	7	0,60
Other sources than scientific evidence are of superior value	3,33	0,52	7	2,86	0,90	7	0,23
The opinion of experts is the most important for the development of guidelines	4,14	0,38	7	3,29	0,95	7	0,03

Scale for questions: 1= strongly disagree to 5= strongly agree; SD: standard deviation, N= number of participants

TABLE 3 ▶ RESULTS OF THE SELF-REPORTED EBP SKILLS OF THE PARTICIPANTS BEFORE AND AFTER THE EBP WORKSHOP

SELF-REPORTED SKILLS	PRE-MEAN	SD	N	POST-MEAN	SD	N	P-VALUE
Recognise intervention questions	1,43	0,79	7	3,93	0,84	7	<0.00001
Formulate a PICO	1,14	0,38	7	3,93	0,84	7	<0.00001
Explain 'randomisation'	2,14	1,07	7	4,21	0,81	7	<0.0001
Recognise a randomised controlled trial (RCT)	1,71	0,95	7	3,64	0,48	7	<0.00001
Recognise a systematic review	1,71	0,95	7	3,93	0,61	7	<0.00001
Recognise evidence-based guidelines	1,71	0,95	7	3,36	0,48	7	<0.0001

Scale for questions: 1= novice to 6= expert; SD: standard deviation, N= number of participants

RESULTS

A pilot study allowed us to evaluate the newly developed 3h workshop. In general, the attitudes towards EBP improved, though the difference was not statistically significant (Table 2). For the self-reported EBP basic skills the post-test scores were significantly higher than the pretest score ($p<0.0001$) (Table 3).
Further, the survey data indicated that a wide range of information sources are used by the participants: handbooks, experts, scientific studies, internet (google, governmental sites,...), journals, experiences of volunteers and databases. As the most important barriers to EBP the participants list: no knowledge of the procedure how to use EBP in the Belgian Red Cross-Flanders, no time and lack of evidence in the participant's field. The satisfaction with the course was also assessed and the results showed 93% of satisfaction.

DISCUSSION

An EBP workshop based upon interactive learning principles was successful in meeting our educational objectives. After the workshop, people had a better understanding of the usefulness of EBP for projects and activities of the Belgian Red Cross-Flanders. The centre of expertise of the Belgian Red Cross-Flanders will continue to give this 3h workshop on a regular base. The content of this workshop can be a reference for designing an EBP training programme by other organisations working with laypersons.

EVIDENCE-BASED PRACTICE
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