

Transforming Learning, Revolutionizing Healthcare

This document was approved by the CFD Evaluation Operations Working Group on: December 4, 2020

Statement on Confidentiality and Data Usage

All evaluation data collected by the Centre for Faculty Development (CFD) remain confidential. Active measures are taken to ensure this as outlined below.

Confidentiality

- (1) No one is granted access to raw data except for the Program Coordinator and the core CFD Evaluation Team members.
- (2) Personal identifying information including names, and e-mail addresses is excluded prior to data analysis.
- (3) Identifying information is **never** linked with participants' feedback in reports. All evaluation reports include **only** aggregated data.
- (4) No information that discloses participants' identity will **ever** be released or published, without their consent.

The evaluation data we collect is used for quality improvement and evaluative research in accordance with the following guidelines.

Data Usage

- (1) Data are only used in aggregate in reports and studies that inform ongoing program improvement and allow for better understanding about how our educational programs work.
- (2) Data are anonymized and identified by participant numbers only.
- (3) Evaluation survey data are linked with demographic participant information from our CFD databases. This allows us to explore questions about how our programs are meeting the needs of diverse groups. As our administrative and IT capabilities improve, the collection of such data on survey forms will not be necessary.

If you have any questions, concerns or would like further information about this statement, please contact Hollie Mullins, Education Coordinator (hollie.mullins@unityhealth.to).

FAQ

1. How long will it take participants to complete the surveys?
 - It should take less than 5 minutes to complete a post-session evaluation survey.
 - It will take approximately 10 minutes to complete the post-program evaluation survey.
2. I have noticed 2-3 questions are similar or appear to relate to the same underlying idea. Why the repetition?
 - Asking more than one question in a similar way is often necessary to gain a reliable and valid measure of the underlying idea.
3. What types of evaluation data does the CFD collect from program participants, and why?
 - We collect data on participants' perceptions about the quality of implementation of our workshops and programs. Some of the questions we are interested in here include:
 - What are participants' perceptions about the quality of research-practice integration within their sessions?
 - What are participants' perceptions about how research and practice are incorporated into their sessions?
 - We collect data about participants' views of their work, and work environments. This allows us to answer questions about how work environments may influence program participation and outcomes.
 - We collect data about potential or likely outcomes of participation in our programs
 - We collect data about our participants' demographic characteristics (e.g. health profession, gender identity, hospital affiliation etc.).
 - We collect and link the aforementioned data because it allows us to examine critical questions, such as:
 - What is the frequency of participation in our programs among diverse health professions?
 - How does one's health profession relate to knowledge mobilization outcomes (e.g. expanded relational networks)?
 - How does one's gender identity relate to their experiences of knowledge mobilization processes (e.g. relationship building)?

4. Why do some evaluation tools ask for participants names?

- All evaluation data are anonymized prior to analysis and reporting.
- The CFD registration system that collects participants' demographic information is not linked with the system we use to collect participants' evaluation responses. The linking of participants' demographic information and evaluation responses has to be done manually which may require participants to provide their name/email on evaluation forms. Once these data are linked, they are anonymized prior to analysis by removing any personally identifying information.
- We link demographics to evaluation responses because it potentially allows us to ask important questions of the data, such as:
 - How does one's gender identity relate to knowledge mobilization outcomes (e.g. expanded relational networks)?
 - How does one's health profession relate to their experiences of knowledge mobilization processes (e.g. relationship building)?

5. How will the results be used?

- Feedback about programs is used to inform decisions about on-going program improvement. This allows us to be responsive to both individual-level participant needs, and system-wide needs.
- Results will be used to inform internal and external reports, and support Centre-wide evaluation in ways that help improve our understanding of how educational interventions work.