TUFTS UNIVERSITY SCHOOL OF MEDICINE OFFICE OF CONTINUING EDUCATION

Outcomes/Follow-up Survey - SurveyMonkey Set-Up Instructions

Go to www.surveymonkey.com to create a free account. The questions contained in this instruction manual are required to be included. You the survey template attached to populate the answer choices for each question. Feel free to include any other questions, specific to your Series, at the end of survey.

Creating the Survey

- Click on **Create Survey** on the top right of your screen, then click '**Start from Scratch**'
- You will be prompted to type the title for the Survey - use the current AY, Series Name that is being evaluated, and Follow-Up Survey as the name (ex. *2017-2018 Medical Grand Rounds Follow-Up Survey*) and click **Create Survey**
- Click on **Add Page Title.**
- For *Page Title*, please add the Series title and the date range of the Series. (*Medical Grand Rounds: September 2017 – June 2018)*
- For *Page Description*, please enter: ***Please take a few moments to complete our short outcomes survey. The information you provide us with is valuable in terms of determining the educational value of this series and areas of improvement. Your response would be greatly appreciated.***
- Click on **Save.**

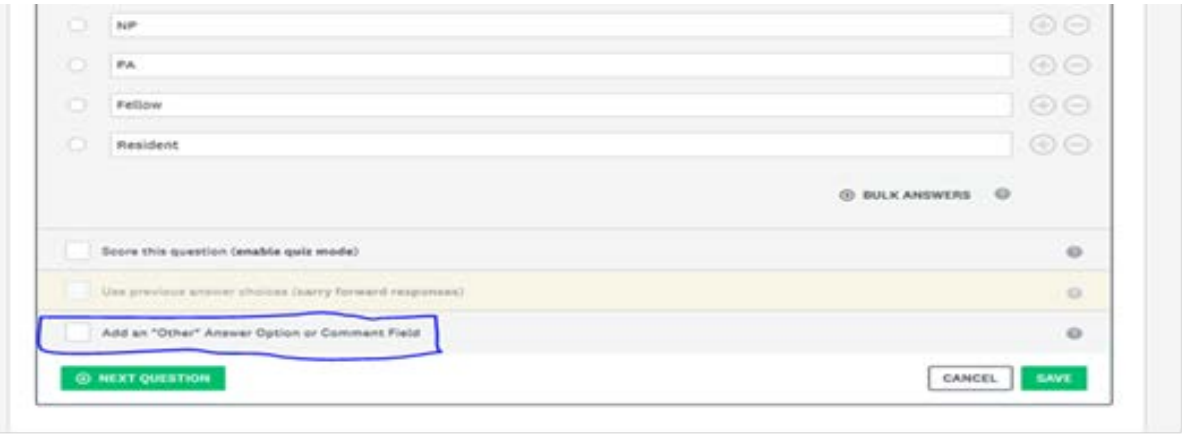
How to Add Questions

- On the left-hand side, there is a gray box labeled "**Builder"** with a list of items (multiple choice, dropdown, matrix/rating scale, etc.) These are the question types you will be adding to the survey.
- Add the question type in one of two ways:
  - Hover over the item with your mouse, and click on the "**+Add"** button that appears.
  - Or, click and drag the item into the white space
- Please take note that if you drag an item above a previously set question, the item will appear above that question.

You are now ready to work on the questions:

QUESTION #1 - What is your profession?

- Add or drag **Multiple Choice** into the survey
- Add the question text
- Input Answer Choices
  from survey template. To add more rows, click on the **+ Button**.
- Select **Add "Other"**



- *Label* should remain, “Other, (please specify)”
- Select **Display as an answer choice**
- Set *Size* to **single line of text, 50 characters wide**
- Click on the **Options** tab at the top
- Select **Require Answer to This Question**
- Click on **Save**

QUESTION #2 - Please state if this series had an impact on your competence and performance.

- Click **+ New Question** and choose **Matrix/Rating Scale**
- Input *Question Text* from the survey template
- Input *Row Choices* form survey template. To delete extra Rows, click on the **-- Button**.
- Input *Column Choices* (Yes, No, Unsure). To delete columns, click on the **-- Button**.
- Click on **Options** tab at the top
- Select **Require Answer to the Question** and choose ***Number of rows respondents must answer: ALL***
- Click on **Save**

QUESTION #3 – Have you made any changes in your practice based on what you learned in this series?

- Click **+ New Question** and choose **Multiple Choice**
- Input *Question Text* from survey template
- Input “Yes*” and “No” as *Answer Choices*
- Select **Add “Other” or a comment field**
- For *Label,* type*:* *If YES, please provide an example of how you were able to apply what you learned from this series to your current work setting (e.g., Created/revised protocols, policies and/or procedures; changed management or treatment of patients.)
- Select **Display as comment field**
- *Size:* **Paragraph of Text, 5 lines, 100 chars wide**
- Click on **Options** tab at the top
- Select **Require Answer to the Question**
- Click **Save**

QUESTION #4 – In what ways have you used what you learned from this series for quality improvement?

- Click **+ New Question** and choose **Multiple Choice**
- Input *Question Text* from survey template
- Input *Answer Choices* from survey template (N/A)
- Select **Add “Other” Answer Option or Comment Field**
- *Label* should say, “If applicable, please describe.”
- Select **Display as answer choice**
- For *Size*, set to **paragraph of text, 4 lines, 100 characters wide**
- Click on **Options** tab at the top
- Select **Require Answer to the Question**
- Click **Save**

QUESTION #5 - What barriers have you encountered when trying to implement knowledge/strategies gained through this series? (Check all that apply)

- Click **+ New Question** and choose **Multiple Choice**
- Input *Question Text* from survey template
- Input *Answer Choices* from survey template
- Select **Add “Other” or a comment field**
- *Label* should remain, “Other, (please specify)”

- Select **Display as answer choice**
- For *Size*, set to **paragraph of text, 4 lines, 100 characters wide**
- Click on **Options** tab at the top
- Select **Require Answer to the Question**
- Click **Save**

QUESTION #6 - Please list topics you would like to review or any other suggestions you have for future sessions.

- Add or drag **Comment Box** to survey
- Input *Question Text* from survey template
- Click on **Options** tab at top
- This is an optional question. **DO NOT** select the "Require Answer to Question" option.
- Select **Adjust Question Layout** and choose **10 lines and 100 chars wide** for box size
- Click **Save**

You have now finished creating the survey! ☺

You can view the survey by clicking on "*Preview & Test*" on the top right of your screen. If you need to edit a question, hover over the question you want to edit and click "Edit."

Collecting Responses

- Click on the **Collect Responses** tab on the top of the screen
- Click **Web Link Collector** and then click **Next**
- A web link will be generated. Copy this link.
- Compose your own email to send to all the participants in that quarter. We would recommend using the language below:

  Dear Participant,

  *You participated in the series titled, (**INSERT SERIES TITLE**). We request that you click on the link below and take a few moments to complete the survey. We would greatly appreciate your response by (**ENTER DEADLINE –** we recommend a week or two from date of email). The information you provide us with is valuable in terms of determining the educational value of this activity and areas of improvement.*

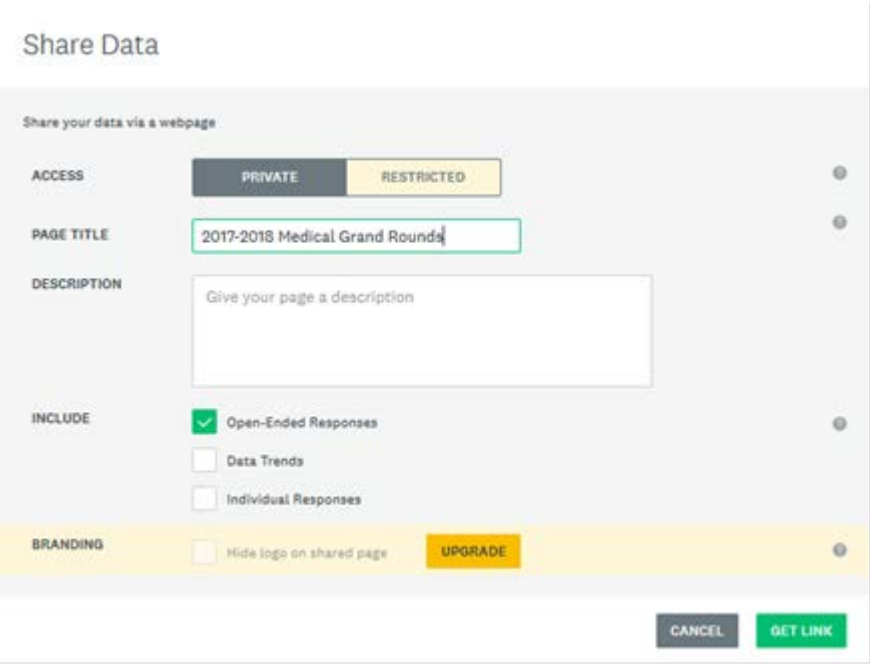
  Here is the link to the survey:
  *(**COPY AND PASTE LINK FROM SURVEY MONKEY HERE**)*

  Best Regards,
  (INSERT YOUR NAME)

- Send out the email.

Analyzing Results and Sending to TUSM

- Once you are signed into your account, click on the **bar graph symbol** under **Analyze** beside the title of survey you want to work on (this brings you to the survey summary)
- You will see a **SAVE AS** drop-down with an option to **Share data link,** click this.
- This will pop open a new tab and a box will appear with the title of the Survey you are sharing and some other information.
- Always select **Open-Ended Responses**
- Click **Get Link**
- A web link will be generated. Please copy the link email the OCE with this link. OCE will then be able to access the summary of results.



<u>After one or two weeks, you should CLOSE your survey (see details below):</u>

- Once you are signed into your account, click on the **Collect Responses** icon **Actions** beside the survey you want to close.
- Under status, click on **<u>Open</u>.** In the pop up window, click on **Close Collector** (this closes the survey for participants), the status should now read **<u>Closed</u> .**

Please note that this survey will be saved in your account under "*My Surveys*" and you will be able to reuse the template for your next activity. However, you might need to add/revise some questions depending on any changes by TUSM OCE.

Please aim for a 20-30% response rate. If you only receive a couple of responses, we would recommend sending the survey out again for a higher response rate. However, if you only receive a few responses even after a 2nd attempt, that is normal. Please send us the summary of the responses you were able to obtain.

Please contact TUSM OCE if you have any questions and we will be more than glad to assist you.

(See next page for Survey Template Example)

RSS Follow-up Survey

Please take a few moments to complete our short follow-up survey related to this Regularly Scheduled Series (RSS). The information you provide us with is valuable in terms of determining the educational value of this series and areas for improvement. Your response would be greatly appreciated.

* 1. What is your profession?

- ○ MD
- ○ RN
- ○ NP
- ○ Other (please specify):
- ○ PA
- ○ Fellow
- ○ Resident

* 2. Please state if this educational activity had an impact on your competence and performance.

	Yes	No	Unsure
This activity increased my competence.	○	○	○
This activity increased my performance.	○	○	○

* 3. Have you made any changes in your practice based on what you learned in this series?

- ○ Yes*
- ○ No

*If yes, please provide an example of how you were able to apply what you learned from this series to your current work setting (e.g., Created/revised protocols, policies and/or procedures; changed management or treatment of patients.)

* 4. In what ways have you used what you learned from this activity for quality improvement?

- ○ N/A
- ○ If applicable, please describe:

* 5. What barriers have you encountered when trying to implement knowledge/strategies gained through this series? (Check all that apply)

- ☐ Clinician lack of time to assess or counsel patients
- ☐ Clinician lack of consensus on professional guidelines
- ☐ Clinician allegiance to old standards/Old habits
- ☐ Clinician lack of time to assimilate large amounts of new knowledge
- ☐ Clinician insufficient cultural competence
- ☐ Clinician fear of punishment/malpractice litigation
- ☐ Clinician lack of reinforcement of new professional guidelines
- ☐ Insufficient patient adherence to treatment plan
- ☐ Patient communication/language barriers
- ☐ Institution/System Policies
- ☐ Other (please specify):
- ☐ Insufficient administrative support/resources
- ☐ Insufficient clinical staff
- ☐ Insufficient technical resources
- ☐ Insufficient interdepartmental communication/uniform level care between departments/sub-specialties
- ☐ Organizational culture/Disorganized systems
- ☐ Insurance/reimbursement issues
- ☐ Cost of treatment
- ☐ Co-payment issues
- ☐ Insufficient accessibility/availability of treatment
- ☐ Have not encountered any barriers

6. Please list topics you would like to review or any other suggestions you have for future sessions.