

Chronic Kidney Disease Management: Post-workshop Questionnaire

Improving chronic kidney disease (CKD) care in the community using health information technology: The CKD Pathway, Nephrology eReferral, and enhanced electronic Comprehensive Annual Care Plan (CACAP)

This reflective tool is intended to be completed individually, immediately following the workshop. Please record your responses to the following questions:

This questionnaire is anonymous

1. Please rate how comfortable you are able to:

	Very Low <input type="radio"/>	Low <input type="radio"/>	Moderate <input type="radio"/>	High <input type="radio"/>	Very High <input type="radio"/>
Identify a patient with CKD					
Administer guideline-concordant medication therapies for CKD patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Know when a referral to a Nephrologist is indicated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provide resources and suggest guideline recommended goals for CKD patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. How likely are you to:

	Very Unlikely <input type="radio"/>	Unlikely <input type="radio"/>	Neutral <input type="radio"/>	Likely <input type="radio"/>	Very Likely <input type="radio"/>
Use the CKD Pathway					
Use eReferral Consult Request	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Use eReferral Advice Request	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Continued on reverse -->

Reflective Questions:

4. Describe opportunities for improvement that you have identified during the process:

5. Describe an action plan to implement improvements, noted above, including overcoming any anticipated barriers:

Thank you for completing this questionnaire

Participant Evaluation Form: Improving chronic kidney disease (CKD) care in the community using health information technology: The CKD Pathway, Nephrology eReferral, and enhanced electronic Comprehensive Annual Care Plan (CACP)

Date: _____

Location: _____

EDUCATIONAL OBJECTIVES: The program met the stated objectives.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. Access the online CKD Pathway and identify, medically manage, and appropriately refer patients with CKD, based on evidence-based guidelines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Access the Nephrology eReferral portal through NetCare and understand when to initiate a referral request and how to complete one.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Use the Complex Disease Management (CDM) EMR dashboard to proactively identify and recall Comprehensive Annual Care Plan (CACP) eligible patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Access and utilize the enhanced CACP template to streamline workflow and ensure guideline-concordant care delivery for patients with CKD.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

PROGRAM CONTENT AND DELIVERY

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
The content was relevant to family medicine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The content enhanced my knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The content met my expectations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The content was well organized	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disclosure of potential conflicts of interest was clearly communicated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Faculty members were effective in delivering and facilitating the program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There were adequate opportunities to interact with program faculty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I will use the information I learned in my practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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- Please indicate which CanMEDS-FM roles you feel were addressed during this workshop:
- | | | |
|---|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Family Medicine Expert | <input type="checkbox"/> Communicator | <input type="checkbox"/> Collaborator |
| <input type="checkbox"/> Manager | <input type="checkbox"/> Scholar | <input type="checkbox"/> Professional |
| <input type="checkbox"/> Health Advocate | | |

Did you perceive a degree of commercial bias in any of the following? Yes No

Describe two ways in which you will change your practise as a result of attending this program:

What was the **least effective** part of this program? Why?

Please list any topics you would like to see in future programs: