Wound **CARE** Instrument 2.0:

The Next Step in Promoting National Standards for Health-related Education

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n relation to wound prevention and care, Canadian health-care professionals (individuals and care settings) seeking professional development currently have a variety of health-care-related educational options to choose from. These options may include programs at accredited educational institutions, online courses, hands-on workshops, conferences, corporate-sponsored wound care education and online opportunities, such as webcasts and webinars. Because of the variation in depth, content and delivery of these educational offerings, it can be challenging to determine which programs meet acceptable quality standards and, therefore, which ones are worth the investment in terms of time and resources. (Note: Throughout this document, the term *program* will be used to refer to educational options of any type.)

To address this challenge, in 2010, representatives of Wounds Canada (formerly the Canadian Association of Wound Care) and Nurses Specialized in Wound, Ostomy and Continence Canada (NSWOCC) (formerly the Canadian Association for Enterostomal Therapy) created the Wound CARE Instrument, a framework to assess the quality of existing educational programs as well as a tool to use to develop new programs.

The tool seeks to answer the question:

"How can we be assured that healthrelated knowledge developed and delivered at an educational event or in a program meets the highest standards?"¹



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Who should use it?

- Developers creating educational courses, programs, workshops, live events, conferences and webcasts
- Individuals making professional development decisions for themselves
- Administrators allocating resources to personnel training and education
- Program implementers/administrators investigating whether they have gaps in their environment that would hinder or elements in their environment that would facilitate learning and practice change
- Policy makers seeking/making recommendations regarding training and education
- Purchasing departments making decisions about value-added incentives for product purchase



Like many aspects of health care, the Wound Care Instrument is an evolving tool. The initial tool was developed 10 years ago. Since that time pedagogy has evolved and educational programs are now frequently based on external reviews, core competencies, standards of practice, a means for standardized testing and inclusion of a means for ensuring transition of knowledge into practice. The following components will be included into an updated Wound Care Instrument. This will include re-validation of the tool.

Component	Rationale
External Program Review	A program review is a rigorous, systematic, objective, impartial, expert-based evaluation and self-evaluation of an educational program to ensure that standards are being met and that the competencies are addressed.
Program Based on Core Competencies	Core competencies provide educational programs with a blueprint to ensure that graduates of the program develop the knowledge, skills, judgment and attributes required to work at the level promised by the educational program. Core competencies are developed based on extensive literature searches and peer review.
Standards of Practice	Practice standards not only define, but also set out professional expectations for health-care practitioners. Standards of care should inform the programs' core competencies. ²
Certification Examination	Certification exams provide an impartial, third-party attestation that an individual has the knowledge and proficiency in a given profession.
Clinical Preceptorship and Knowledge Translation	Clinical preceptorship provides a means to ensure that students have clinical mentorship, which assists students in applying knowledge into practice. Preceptorship provides educational programs to monitor the student's ability to apply standards of practice in clinical situations and demonstrate they have gained the knowledge, skills, judgment and attributes required to work at the level promised by the educational program.



The Wound CARE Instrument was "designed to provide a set of standards to support health-care providers, wound management leaders, educators, purchasing managers, administrators, organizations and health authorities to undertake a comprehensive, evidence-informed appraisal process" to assess the strengths and weaknesses before registering for, developing, adopting or adapting an educational program.¹

Since that time, the instrument has seen limited use in evaluating education, despite the rigour with which it was developed and the important needs it was designed to address.

Because of the value of the tool to clinicians, health decision makers and education developers, Wounds Canada and NSWOCC are collaborating once again with an aim to raise the profile of the Wound CARE Instrument through the following strategies:

- Changing the name of the instrument to better reflect its purpose
- Providing a quick reference guide (QRG) under the new name to make it easier to use
- Rating our respective educational programs

using the parameters outlined in the instrument

 Encouraging widespread adoption of the instrument for those making decisions about registering for, developing or purchasing health-related education

1. Changing the Name

We propose changing the name to the "Health Education Development and Evaluation Tool" (HEDET) to reduce confusion.

The main reason for the name change from the "Wound CARE Instrument" is to better reflect the purpose of the tool. Most readers are unaware that the "CARE" in the name refers to "Collaborative Appraisal & Recommendations for Education" and may assume the tool is designed to evaluate the clinical practice of wound "care" rather than education programs. As well, the word "Wound" in the name suggests it is appropriate only for wound-related education, when, in fact, the parameters in the tool are suitable for evaluating any type of health-related education.

Note: It is only the name that will change; the

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tool itself will remain as it was developed and validated, until the next round of revisions (see box, page 51).

2. Quick Reference Guide

The original Wound CARE Instrument document contains a great deal of information covering the rationale behind its development. This is a necessary part of any development process, but it does nothing to ensure widespread adoption. Therefore, the next logical step to promote the tool is to create and disseminate a more user-friendly version that users can understand quickly and use effectively. For those seeking the reassurance of the research and rationale behind the tool, the original long-form document is easily accessible. The essential elements of the instrument in the form of a quick reference guide (QRG) are presented on page 55.

The quick reference version contains notes to facilitate its use for different audiences—program developer, purchaser/implementer—as well as a compact "scorecard" that reviewers can use when communicating the results of program evaluations.

3. Rating Our Programs

Both Wounds Canada and NSWOCC have been creating and delivering high-quality health-related educational programs for decades. As part of our efforts to promote the use of HEDET, we will begin to evaluate all our existing educational programs using this tool and publish the results. In addition, all future programs will have their evaluations publicized simultaneous to their launch using a scorecard specifically designed for this purpose (see Figure 1). The intention is to provide an example of how programs should be created, evaluated and sustained using a single set of standards that others can easily use and adopt. The scorecard will demonstrate the merits and deficits of any educational program in its five phases of development/implementation.

4. Encouraging Widespread Adoption

Wounds Canada and NSWOCC are making a collaborative public declaration that this tool should become the standard by which all health-related education is rated. We propose:

 Organizations offering education adopt the tool to develop, evaluate and re-evaluate their programs; they are encouraged to publicize the scores for each program so decision-makers can use the information (see Figure 1)

"The parameters in the tool are suitable for evaluating any type of health-related education."

- Individuals making decisions about which educational programs to access for themselves can ensure their options meet the standards outlined in the tool (see Figures 1 and 2)
- Individuals making decisions about which educational programs to access for their staff or colleagues can ensure their options meet the standards outlined in the tool as well as determine whether their environment will support staff education effectively (see Figures 1 and 2)

Conclusion

There have been legitimate concerns about the lack of common standards employed to evaluate educational programs that have potential impacts on patient outcomes and financial and human resources. Although a set of standards has indeed been available since 2010, in the form of the Wound CARE Instrument, it has not been adopted widely. Therefore, Wounds Canada and NSWOCC have renamed the instrument the Health Education Development and Evaluation Tool (HEDET) and provided a quick-reference ver-

Figure 1: Health Education Development and Evaluation Tool Scorecard for Developers*

PHASE:	STANDARDS FOR PRELIMINARY PLANNING	SCORE
1	Standards for Preliminary Planning	/9
2	Standards for Preparation and Development	/8
3	Standards for Implementation	/6
4	Standards for Evaluation and Outcomes	/3
5	Standards for Sustainability and Post-implementation Planning	/2
Total Sc	ore:	/28

Note: We encourage all educational program developers to use the tool to guide the development of their programs and to publicize the score to all potential users.

Figure 2: Health Education Development and Evaluation Tool Scorecard for Purchasers/Implementers*

PHASE:	STANDARDS FOR PRELIMINARY PLANNING	SCORE
1	Standards for Preliminary Planning	/9
2	Standards for Preparation and Development	/8
3	Standards for Implementation	/6
4	Standards for Evaluation and Outcomes	/3
5	Standards for Sustainability and Post-implementation Planning	/4
Total Sc	ore:	/30

Note: We encourage all purchasers/implementers to use the tool to:

- a. evaluate programs based on their Health Education Assessment Tool score
- b. determine if the parameters required for successful implementation of educational programs have been met in their own environments

sion to encourage use. The two groups strongly believe that now is the time for the standards in the tool to be applied whenever and wherever health-related education decisions are being made. Successful completion and implementation of the four steps outlined above—instrument name change, QRG development plus application and promotion of the tool—will advance this standard method of evaluating health-related education programs in Canada.

References

- Canadian Association of Wound Care and Canadian Association for Enterostomal Therapy. The Wound CARE Instrument: Collaborative Appraisal and Recommendations for Education. Available at: www. woundscanada.ca/health-care-professional/resources-health-care-pros/library/183-resources-industry-part-ner/24-cw-instrument and https://nswoc.ca/wp-content/uploads/2017/08/caet-wound-care-instrument.pdf.
- Canadian Nurses Association Specialty Core
 Competencies. Available at: www.cna-aiic.ca/en/certification/exam-preparation/exam-competencies-and-blue-prints.

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^{*} It is important to note that the two scorecards vary slightly. Phase 5 of the developer scorecard discounts two parameters—"5.2: Preceptorship and mentoring opportunities are in place" and "5.3: Continuous measurement of integration of learning into practice"—as these are primarily applicable to the end user and generally cannot be covered by developers except where the developers and implementers are within the same organization.

The Health Education Development and Evaluation Tool (HEDET)

To achieve optimal outcomes, the HEDET should be applied using an interprofessional collaborative method. It is recommended that a minimum of three stakeholders, with diverse responsibilities within the organization or institution appraise the educational event or program under review. Interprofessional collaboration for the appraisal and recommendations should involve representation from administration, purchasing (if required), and a clinical expert with experience in wound management and/or wound management education.

Step 1: Select an educational event, initiative and/or program to be appraised and identify appropriate stakeholders to be involved.

Step 2: Stakeholders review the proposed or existing educational event or program, considering preliminary planning, preparation and development, implementation, evaluation and sustainability.

Step 3: Each stakeholder appraises the event or program independently using the

Health Education Development and Evaluation Tool Scorecard.

Step 4: Stakeholders meet to discuss their independent reviews, achieve consensus and decide to endorse, adopt, adapt, purchase or reject the education or program.

Step 5: A "consensus" scorecard is then signed by each of the stakeholders and dated to document the appraisal and final recommendation. This record should be kept on file.

Every statement has two choices: Score 1 if the standard has been substantially met; Score 0 if the standard has not been substantially met. Tally the sub-scores and comment on areas of strength or weakness to help you determine whether to endorse, adopt, adapt, purchase or reject the program.

Note: Any conflict of interest needs to be addressed, and the person(s) or company delivering or developing the program should not be one of the appraisers. However, they can use the Wound CARE Instrument (HEDET) as a guide for the comprehensive development of their education initiative or program or for feedback on existing programs.

PHASE 1:	STANDARDS FOR PRELIMINARY PLANNING	SCORE
1.1	Organizational support obtained for:	
	1.1.1 A mandate for intended change related to new learning	
	1.1.2 Policy and procedure change based on new evidence	
	1.1.3 Alignment with organizational goals	
	1.1.4 Advocating and ensuring fair business practice	
1.2	Environmental assessment conducted	
1.3	Practice-focused needs assessment conducted	
1.4	Strategic partnerships developed to ensure system-wide stakeholders are involved in change	
1.5	Fiscal and human resources have been considered and are in place	
1.6	On-site, contracted and/or external agency educators are trained in adult learning principles and evidence-informed curriculum	
Comments:		
Sub-score:		/9

PHASE 2:	STANDARDS FOR PREPARATION AND DEVELOPMENT	SCORE
2.1	Curriculum has been developed through interprofessional collaboration	
2.2	Curriculum is: 2.2.1 Evidence informed 2.2.2 Based on adult learning principles 2.2.3 Reflective of knowledge, skill, attitude and behaviour learning 2.2.4 Current with revision plan in place	
2.3	Curriculum is unbiased, generic and non-promotional	
2.4	Physical environment is optimized to support adult learning	
2.5	Promotion and publicity plans are in place	
Comments:		
Sub-score:		





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1.4	Strategic partnerships developed to ensure system-wide stakeholders are involved in change	
1.5	Fiscal and human resources have been considered and are in place	
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Comments:		
Sub-score:		/9

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2.3	Curriculum is unbiased, generic and non-promotional	
2.4	Physical environment is optimized to support adult learning	
2.5	Promotion and publicity plans are in place	
Comments:		
Sub-score:		



