

22nd
April
2017

Moving Ahead in Women's Health Care & Prevention

REPORT



Comment from participant: "I found today's content entirely relevant, informative, research based, collaborative & paced to my learning needs".



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1.0 Executive Summary

The 'Moving Ahead in Women's Health Care & Prevention' update, held on Saturday 22nd April 2017 at the Education Centre of the Royal Brisbane and Women's Hospital (RBWH), was designed by Iris Education in collaboration with the Cancer Screening Unit, Preventive Health Branch, of the Department of Health to inform the health workforce about the National Cervical Screening Program (NCSP) Renewal. Iris Education was tasked with this work through a competitive tender process. Iris Education provides a broad range of professional development and more information may be found at www.iriseducation.com.au. This was the inaugural staging of this update and was the first of its kind to discuss the NCSP Renewal in Australia.

This update was developed for health professionals working in the area of Women's Health. The focus of the update was designed to be at the level of GP management. This update introduced participants to the contemporary evidence and professional skills needed to implement the renewed NCSP and examined broader topics in women's health care and prevention.

Iris Education provided the platform for the design, staging and evaluation of this new update and a team of experts led the design and development of the update. These were Dr Caroline Harvey, Dr Kay Strom, and Ms Lisa Peberdy.

Advertising for this inaugural update was extensive. As well as advertising through the comprehensive networks of Iris Education and Queensland Health, the following groups and organisations distributed information extensively:

- National Cancer Screening networks and organisations
- National Family Planning Organisations
- The Sexual Health Society of Queensland (SHSQ)
- The Australasian Sexual Health and HIV Nurses Association (ASHHNA)
- The Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM)
- GP Registrar training organisations
- Primary Health Networks
- Numerous Aboriginal and Torres Strait Island health services, sexual health services, GP Practices and community organisations

Participants primarily found out about this workshop through email lists attached to these organisations. Paid advertising was also undertaken in 'Australian Doctor' across a fortnight approximately one month before the event.

The update was live streamed using the services of GigTV. This organisation was selected from four Expressions of Interest because of its demonstrated expertise in the area, its familiarity with Queensland Health procedures and the venue, and the commitment to staffing before and during the update.

344 participants registered for the update (prior to and on the day of the update): 144 through live streaming and 200 in person. The latter was double the budgeted limit. 298 (87% of registrants) participated in the update: 123 through live streaming and 175 in person. 137 medical practitioners registered, of whom 137 were GPs or GP Registrars. 150 nurses registered with an even mix of disciplines and levels of experience. 31 Midwives also registered. Of the 25 remaining registrants, several were educators and policy officers while 3 were pharmacists.

The majority of registrants originated from Queensland (n=318) however there were representatives from every state and territory in Australia (n=23). Most Queensland registrants originated from the south east of the state (n= 252) however there was strong representation from all areas of the state, including 21 from Far North Queensland and the Torres Strait. Of note, there were 5 from the Torres Strait Islands themselves.

Engagement through live streaming reflected the geographic spread of registration. While some in the South East Corner of Queensland joined via live streaming (28%) this was reversed for all other geographic areas. 81% of those from Far North Queensland and the Torres Strait joined via live streaming, 71% from Darling Downs and the west of the state, and 78% of those from interstate joined via live streaming.

The GP cohort was mostly from Queensland (95%). The GP cohort was over represented in the live streaming group from regional Queensland and interstate. While the percentage of GPs who joined via live streaming in the South East of the state was similar to the remainder of the cohort (26.8% vs 28.1%), almost all GPs who attended from regional Queensland (or interstate) participated through live streaming (93% vs 75.5%). This demonstrates the usefulness of live streaming for GPs in regional Queensland.

201 individuals provided some evaluation feedback. This represents 68% of the cohort that participated in the update (n=298). This is a very strong evaluation rate for this type of activity, especially with the large participation rate via live streaming. Of these 201 individuals, 94 completed every question of the electronic tool (46%). GPs were the strongest represented group in the evaluation with 91 providing feedback through the evaluation process.

Even though this was the first time an update covering the NCSP topics had been organised in Australia, the feedback and ratings from participants was overwhelming supportive and positive. The update was relevant to everyday practice. 94% of Medical Practitioners; 73% of midwives and 82% of nurses indicated this update was entirely relevant to their daily practice. This was evident across all professions and disciplines represented in the participant cohort.

Overwhelmingly, participants indicated they achieved both their own personal objectives for the day and the objectives set by the organisers. 85% (n=132) indicated they achieved their own objectives and 97% (n=151) indicated they are now able to describe the rationale for the change in the National Cervical Screening policy.

It is evident that this workshop has made a difference. Participants were asked to rate their confidence levels in two general topics prior to the update and immediately after the update. Although the confidence levels of many participants were already high, all participants expressed an increase in confidence as a result of attending this workshop. For Cervical Screening, the overall average moved more than 1.5 points along a 5-point Likert Scale (from 3.02 to 4.56). All professions noted an increase in confidence with the greatest increase being among midwives. For Preventive Health issues, the increase in confidence levels was less striking but still significant. The overall average moved more than 0.8 points along a 5-point Likert Scale (from 3.62 to 4.32). All professions noted an increase in confidence with the greatest increase being among medical practitioners.

All sessions were rated highly with no session receiving an average rating below 4.00 (on a scale of 1.00 – 5.00) for either content or delivery. These high ratings were consistently demonstrated across both those who attended in person and those who attended via live streaming.

Thanks are expressed to the Queensland Health team who worked tirelessly to ensure the success of this event, to personnel from GigTV who provided the expertise for live streaming, to all presenters, panellists and facilitators for sharing their knowledge and skill in these important areas, to the event management team from the Education Centre of RBWH for their very smooth behind the scenes work, and to the 298 participants who gave up their day for this important update.

2.0 Background

Iris Education was contracted by Queensland Health to design, deliver and evaluate an update for health workers, with a focus on General Practitioners, on women's health topics that incorporated discussion about the National Cervical Screening Program (NCSP) Renewal. As background, Iris Education provides a broad range of professional development: courses and workshops, clinical skill review, small group learning and education and program development consultancy. Iris Education focusses on reproductive and sexual health (RSH) as well as women's health in general practice and other primary care settings. The five Directors of Iris Education are Dr Caroline Harvey, Dr Fiona Mack, Dr Kay Strom, Dr Steve Lambert and Mr Brad Reuter. Dr Harvey, Dr Mack and Dr Strom are all well-known expert RSH clinicians, and experienced clinical educators. All are active in clinical practice and have worked extensively providing education and professional development for GPs, GP registrars, international medical graduates and nurses for well more than a decade.

Iris Education successfully tendered for this project in early 2017 and was tasked with:

- Project Planning – including meetings with Cancer Screening services
- Program development- medical education input into program and learning objectives planning
- Speaker coordination, engagement, payment
- Registrations of participants
- Preparation of evaluation tools, evaluation reporting
- Full Coordination on the day of seminar including 2 admin staff all day, all day facilitation, session chairing, speaker costs, resources, ID badges
- Preparation of resource folders for participants
- Marketing and advertising

Queensland Health remained responsible for:

- Venue and catering booking and coordination
- Live streaming booking and coordination
- Marketing and advertising
- Speaker travel costs and arrangements

Collaborative planning meetings began in mid-February 2017 with advertising beginning soon after. Advertising was primarily through existing Queensland Health and Iris Education networks and email lists however included advertising across a two week period in 'Australian Doctor'.

GigTV were recruited to provide live streaming services for the event. After registration for live streaming, individuals were linked to a test site in preparation for the day to check bandwidth and local connection concerns. Personnel from GigTV met with Iris Education and Queensland Health personnel throughout the preparatory process and provided 2 support staff on the day of the event at the venue and a further support team member answering concerns and tracking the live streaming discussion.

Registrations opened in early March. Registration was online through the Iris Education website. If a registrant indicated they wished to join via live streaming they were sent further instructions and links. Originally, costing of the project assumed registrations for the face-to-face component of 100. Due to a very strong immediate registration surge,

this number was doubled to 200 by Queensland Health. This limit was reached on the Thursday prior to the event. While the Iris Education website indicated that the event had reached maximum numbers on Friday 21st April, acknowledging an assumed 'no show' rate of approximately 10%, actual face-to-face registrations reached slightly above this number.

3.0 Program

The program was divided into two sections. The morning sessions prior to lunch were devoted to the National Cervical Screening Program (NCSP) Renewal and the afternoon sessions were devoted to broader women's health care and prevention. Participants were able to register for either half of the day or for the full day and while the vast majority of participants registered for the full day some nominated to attend only the first half (n = 9) and some nominated to attend only the second half (n = 6).

3.1 Development

The program was designed collaboratively between the experts from Iris Education and personnel from Queensland Health. The program was finalised six weeks prior to the event and advertised on the websites and across networks of both organisations.

The components of the discussion about the NCSP Renewal were designed to provide a detailed discussion of the upcoming NCSP Renewal by unpacking the rationale and evidence driving the changes, and applying these in practice. Each topic built upon the previous and was drawn together with a panel discussion of all the experts. The pitch of the content was focussed toward General Practitioners. Areas covered included:

- Understanding the role of HPV: Prevalence and patterns, natural history of infection, types and consequences, role of vaccination, talking to women about HPV
- Unpacking the evidence: Australia and international - The big picture view of the NCSP renewal
- Applying the evidence: Clinical application (decision making, sample collection), dealing with women's concerns and questions, explaining the evidence, special groups and pathways

The emphasis of the afternoon sessions was on Preventive Women's Health Care in General Practice and presented emerging and relevant information on the following topics:

- Breast Health
- Obesity, Smoking and Fertility
- Contraception and Weight: Is there a relationship? What are the risks?
- Women and STIs

The program outline is presented on the next page.

3.2 The day at a glance

Time	Topic	Presenter
8:00 – 8:30	Arrival, registration, coffee	
Session 1: The National Cervical Screening Program Renewal		
Unpacking the evidence		Chair -Dr Caroline Harvey
8:30 – 8:45	Opening address	Dr Heidi Carroll
8:45 – 9:30	Understanding HPV <ul style="list-style-type: none"> - Prevalence and patterns - Natural history of infection - Types and consequences - Role of vaccination 	Dr Kay Strom
9:30 – 10:15	The big picture view of the NCSP renewal	Professor Ian Hammond
10:15– 10:35	MORNING TEA	
Session 2: The National Cervical Screening Program Renewal		
Evidence into practice		Chair- Dr Kay Strom
10:35 – 11:30	The new cervical screening guidelines: <ul style="list-style-type: none"> - Clinical application (decision making, sample collection) - Dealing with women's concerns and questions - Explaining the evidence 	Dr Caroline Harvey
11:30 - 11:50	The National Cancer Screening Register (NCSR)	Dr Leane Christie
11:50 – 12:45	Panel session for Q&A: <ul style="list-style-type: none"> - Case scenarios - FAQs - Audience questions Panel facilitator: Dr Giselle Donaldson	Professor Ian Hammond Dr Caroline Harvey Dr Kay Strom Dr David Papadimos Ms Cheryl Bletchly Dr Leane Christie
12:45 – 1:30	LUNCH	
Session 3: Women's Health Care and Prevention		
		Chair- Dr Fiona Mack
1:30 – 2:30	Women and STIs: infections old and new <ul style="list-style-type: none"> - Bacterial Vaginosis - Mycoplasma Genitalium - Syphilis 	Dr Stuart Aitken
2:30 – 3:10	Breast Health update	Dr Kate Taylor
3:10 – 3:30	AFTERNOON TEA	
3:30 – 5:00	Obesity, Smoking and other Preventive Health issues in Fertility Contraception and Weight <ul style="list-style-type: none"> - Is there a link? What are the risks? 	Dr Ben Kroon Dr Caroline Harvey Dr Kay Strom

3.3 Presenters

Presenters, panellists and facilitators were drawn from the experts in Cervical Screening and Women's Health across Australia. The background of all involved are described, in alphabetical order, below.

Dr Stuart Aitken: MBBS, Dip Ven, FACHSHM is a specialist sexual health physician in private practice at the Evandale Practice on the Gold Coast, and at True Relationships and Reproductive Health in Brisbane. His areas of interest include HIV medicine, sexually transmissible infections, skin conditions affecting the genitals, and gender medicine. His philosophy for clinical care is one of evidence based medicine delivered with compassion and respect.

Dr Aitken completed his specialist training in 2006, and was admitted as a Fellow of the Australasian Chapter of Sexual Health Medicine, Royal Australasian College of Physicians. He currently holds the title of senior lecturer in medicine at Griffith University. He has published several chapters in textbooks and journal articles, as well as contributing to various national guidelines. He is currently majoring in infectious diseases epidemiology as he completes his Master of Public Health and Tropical Medicine degree.

Dr Cheryl Bletchly: Cheryl was awarded her PhD in Virology from the University of Queensland in 2002. She is the Supervising Scientist of the Molecular Diagnostic Unit within Microbiology for Pathology Queensland. The unit utilises real-time PCR to detect the presence of infectious agents in patient samples. Cheryl spent several years working in medical research, then in a public health virology laboratory prior to taking up her current position 12 years ago.

Dr Leane Christie: Professional Doctorate (Health Sciences), M Nursing, Ba Nursing, Grad Cert Management, RN. Dr Christie is a registered nurse with over 30 years experience working in the healthcare setting in both Government and non-Government sectors. Leane is committed to consumer-focused cancer prevention and sexual and reproduction health program delivery and was the Program Director, Queensland Cervical Screening Program for over eight years until 2012. Leane completed a professional doctorate on the impact of primary and secondary cervical screening prevention strategies on Queensland women and was a member of two National Cervical Screening Program (NCSP) committees, the NCSP Renewal Committee and the NCSP Safety Monitoring Committee until 2012. Her current role is Cervical Program Manager, National Cancer Screening Register, Telstra Health

Dr Giselle Donaldson: Giselle has been a practising GP since 1997. She has worked in Brisbane, the Sunshine Coast and Tasmania. She has been an examiner for the RACGP since 2000, and was an examiner for the Australian Medical Council for several years. Giselle worked as a GP adviser for Brisbane North Division of General Practice in the maternity services area for 10 years. She was employed in this role to co-ordinate the implementation of GP Shared Care at RBWH, and contributed to the new pregnancy health record. Giselle currently works at Griffith University Health Service.

Professor Ian Hammond: Ian Hammond retired in 2012 after 30 years in clinical practice as a Gynaecologic Oncologist in Perth, WA. In 2000 he developed (with John Taylor and Paul Mc Menamin) the Anatomy of Complications Workshop, that continues to assist colleagues avoid and manage complications of surgical practice. Since his retirement, he has been actively involved in the Renewal of the National Cervical Screening Program. He Chaired the Renewal Steering Committee from 2011-2014, and since then has Chaired the Steering Committee for the Renewal Implementation Project.

Last year Professor Hammond chaired the Cancer Council Australia Guidelines Working Party that developed the new 2016 Management Guidelines that will support the renewed National Cervical Screening Program. In 2011 he was awarded the President's Medal of the RANZCOG for services to Women's Health.

Dr Caroline Harvey: MBBS (Hons) MPM MPH DRANZCOG FRACGP. Caroline completed her medical degree and GP training in NSW where she worked until moving to Qld in 1998. She has worked in Sydney, Cairns and Brisbane in various settings including general practice, Aboriginal Medical Services, Family Planning Qld (FPQ) and FP NSW and Qld Health. She currently works for the Institute of Urban Indigenous Health as Senior GP Sexual and Reproductive Health. As well as being active in clinical practice and teaching for the past 25 years she is a recognised expert in contraception, and has published research on implants and IUDs.

As Medical Director at FPQ from 2002-2014, Caroline led a decade of expansion and innovation of education programs to medical and nursing professionals including the delivery of courses and workshops to regional areas, the development of an IUD insertion clinical training program, the annual Reproductive Refresher conference, the introduction of flexible tailored clinical attachments and the Pap Smear Provider module for nurses. The development of partnerships with organisations and training providers was key to this work and she maintains a strong passion for responsive and collaborative approaches to health professional education.

Dr Ben Kroon: Ben is a Brisbane based obstetrician and gynaecologist with a subspecialty in reproductive endocrinology and infertility. He is clinical director of The Fertility Centre, a senior fertility specialist at Queensland Fertility Group and co-director of Eve Health.

Dr David Papadimos: MBBS(Hons) University of Queensland 1976 Fellow Royal College of Pathologists of Australasia 1984 Fellow International Academy of Cytology 1992. Current position: Partner in charge - Histopathology and Cytology Departments Sullivan Nicolaides Pathology. (Position held since 1998). President, Australian Society of Cytology 2009-2011 RCPA representative Quality Management committee Queensland Cytology Screening Program 2009-2012. Chair, RCPA Cytopathology advisory committee 2011- Present Member of the Steering Committee for the Implementation Renewal Project(SCRIP), National cervical Screening Program since 2014. Chair, RCPA National Cervical Screening Program Workforce Project Steering Committee 2016 – Present.

Dr Kay Strom: MBBS (Hons) FRACGP. Kay completed her medical degree at the University of Queensland, graduating with first class honours. She is currently working as a medical officer at the Griffith University Health Service. Kay is also a tutor at the University of Qld School of Medicine, and Senior Lecturer at the Griffith University School of Medicine. She has worked as an educator and examiner for International Medical Graduates with the Communication Program Team, Clinical Skills Development Service, RBWH. Kay worked predominantly in Sexual and Reproductive Health for more than 20 years until 2014, in both clinical and education roles. As Medical Education Coordinator at Family Planning Qld, she developed, delivered and oversaw numerous courses and education programs for medical and nursing professionals including the development of innovative educational models.

Kay is widely recognised for her expertise and teaching excellence and has lectured for RACGP, RANZCOG, ACRRM, GP Training consortia and Health Workforce Qld. She was coordinator of the Qld GP Cervical Screening Skills Update Project from 2007 – 2013, a program which assisted experienced GPs and international medical graduates to acquire practical skills across all aspects of cervical screening, including communication and examination.

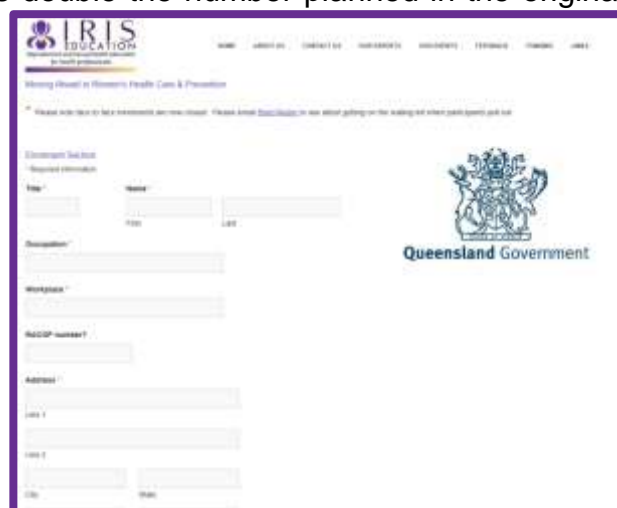
Dr Kate Taylor is the Medical Director of BreastScreen Queensland Brisbane Southside Service, the largest public screening and assessment facility in the state of Queensland. The service screens 46 000 women within the Metro South area annually. In her role, Dr Taylor performs mammographic screen reading for the programme, examining and counselling women recalled for assessment, performing biopsies, and providing managerial oversight for a multidisciplinary team of radiographers, radiologists, surgeons, nurses and administration staff. This has also entailed further postgraduate training as a breast physician in breast medicine, screening mammography, and breast biopsy procedures, leading to Fellowship of the Australasian Society of Breast Physicians in 2015. Dr Taylor attended the University of Queensland graduating with a MBBS in 1996. Following an intern year at Logan Hospital, Dr Taylor returned to Rockhampton Hospital to complete her resident years. In 1999 Dr Taylor completed a Joint Diploma of the College of Obstetrics/Gyneacology and General Practice at Rockhampton Hospital prior to commencing her General Practice training with the RACGP. This was completed in 2000 and she worked in General Practice in Rockhampton from 2000-2006. During this time she also held positions at the Rockhampton Hospital Sexual Health Clinic and Family Planning Queensland – completing her FPQ Certificate in Sexual and Reproductive Health in 2005. Her career at BreastScreen Queensland started as a Senior Medical Officer before stepping in as the Acting Clinical Director of the Rockhampton Service. She then returned to Brisbane as a Senior Medical Officer at the BreastScreen Queensland Brisbane Southside and Northside Services in 2006 and was offered her current position as the Medical Director in 2013. Dr Taylor worked concurrently in General Practice until 2008.

4.0 Registration

Registration was through the Iris Education website, shown below. Participants were asked to nominate attendance either in person or through live-streaming. Live streaming registrations remained uncapped until the day of the update however the face-to-face registrations were capped at 200. This was double the number planned in the original discussion and project plan.

4.1 Method

Potential registrants were contacted through Queensland Health and through Iris Education networks. This was usually undertaken via email. Information about the update was included in various electronic newsletters, including Primary Health Networks and GP Training Organisations. Queensland Health distributed information about the update through its internal networks. This included to specific groups (Eg women's health, BreastScreen) and through specific mechanisms (Eg highlights on computer terminal default screens across the state).



4.2 Registration demographics

Overall 344 individuals registered for the update, or joined on the day. 298 (87%) of these attended some component of the day in-person or through live streaming. More information of attendees is available in the next section. Accurate demographic data is known for all 344 and is presented below. There are no known differences between the full cohort of registrants and the sub-cohort of attendees.

4.2.1 Profession

Profession		Face to Face	Live Streaming	Total
Medical	GP	70	33	103
	GP Registrar	6	9	15
	O & G	1	1	2
	Sexual Health	3	-	3
	JMO	2	-	2
	Other	8	6	12
Medical Total				137
Nursing	EN / EEN	3	5	8
	Clinical Nurse	27	9	36
	Registered Nurse	37	29	66
	Practice Nurse	9	15	24
	Nurse Practitioner	4	4	8
	CNC or NUM	4	2	6
	Other	1	1	2
Nursing Total				150
Midwife		21	10	31
Other		15	10	25
Total				343

4.2.2 Geographic Origin

Location		Face to Face	Live Streaming	Total
Queensland	Brisbane Region	147	55	202
	Gold Coast Region	17	9	26
	Sunshine Coast Region	15	7	24
	Darling Downs & West	4	10	14
	Wide Bay & Central	5	15	20
	Northern & North West	3	8	11
	Far North & Torres Strait	4	17	21
Queensland Total				318
NSW	Northern NSW	2	-	2
	Other in NSW	3	5	8
NSW Total				10
ACT		-	2	2
Victoria		-	5	5
Tasmania		-	1	1
South Australia		-	1	1
Western Australia		-	2	2
Northern Territory		-	2	2
Total				341

4.2.3 GP and GP Registrar origin

Profession		Face to Face	Live Streaming	Total
Queensland	Brisbane Region T	57	22	79
	Gold Coast Region	6	2	8
	Sunshine Coast Region	8	2	10
	Darling Downs & West	-	1	1
	Wide Bay & Central	-	3	3
	Northern & North West	-	3	3
	Far North & Torres Strait	-	1	1
Queensland Total				105
NSW	Northern NSW	1	-	1
	Other in NSW	1	1	2
NSW Total				3
ACT		-	-	-
Victoria		-	3	3
Tasmania		-	-	-
South Australia		-	-	-
Western Australia		-	-	-
Northern Territory		-	-	-
Total				111

5.0 Attendance

298 individuals participated in the update. Of these 175 attended in person and 123 participated through live streaming. There was variance in the attendance rates compared to the registration rates and these are described in the sections below.

A certificate of attendance was provided to all those who attended and for whom Iris Education had contact details.

5.1 Face to Face

Of the 200 who registered to attend in person, 44 did not show up on the day, while 19 individuals who had not registered by the time of printing sign in sheets (Thursday evening) turned up on the day. Of note, 7 of those who registered but did not arrive on the day, viewed the update through live streaming.

Participation rates were sampled at different stages of the day. These are presented in the table below.

Session	Number in the room
At the beginning of the day, during the opening session	162
Panel discussion prior to lunch	169
Session on STIs after lunch	152
Last session of the day	116

5.2 Live Streaming

Of the 144 who registered to view the update online, 23 did not participate in any live streaming and another 18 (including the 7 noted above who had registered for face-to-face attendance) registered on the day.

Participation rates were sampled at different stages of the day. These are presented in the table below and demonstrate a sustained following on live streaming.

Session	Number viewing via live streaming
At the beginning of the day, during the opening session	88
Panel discussion prior to lunch	78
Session on STIs after lunch	66
Last session of the day	51

Data from GigTV, the company responsible for the live streaming processes, indicate that individuals chose particular sessions to watch and logged in and out for those discrete sessions. Some individuals remained logged in for the entire day but this was a minority of the cohort.

5.3 The GP Cohort

124 GPs registered to participate in this update day. While 19 of those who registered to attend in person did not arrive on the day, it is known that a number of these are included in the 7 who chose to participate through live streaming. An accurate estimate is that on the day 111 GPs participated. Of these, 43 participated through live streaming (39%) and 68 participated face to face. The number of GP registrars within this cohort is unknown as not all GP registrars enrolled themselves as a 'GP registrar'.

5.3.1 RACGP QI & CPD Points

As Iris Education is an accredited education provider of the RACGP, to encourage participation by General Practitioners, 14 RACGP QI & CPD category 2 points were able to be offered. The number of GPs and GP Registrars in attendance supported the benefit of applying to have the update registered as an RACGP Accredited Activity. The following logo and notification was displayed on all advertising.



Iris Education organised and funded the submission of attendance at this event for all GPs involved.

6.0 Trade Displays

Organisations with an affiliation to the topic of the update were invited to staff a trade display across the day of the update. The following organisations displayed material and / or had staff present to discuss topics with those who attended the update:

- QML Pathology
- Sullivan Nicolaides Pathology
- Sexual Health Society of Queensland
- Children by Choice
- Queensland Health Cancer Screening Program

The following organisations were invited to display but were unable to attend:

- Mater Pathology
- True Relationships and reproductive Health Clinical Education Unit

Anecdotal feedback at the end of the day demonstrated that both participants and those involved in the trade display appreciated this addition to the day.

7.0 Evaluation Outcomes

An electronic evaluation tool was prepared by Iris Education and distributed to the email addresses of all who registered for the update on Friday 21st April. All participants were encouraged to provide feedback through this electronic evaluation tool across numerous points of the day. Information about the email and access to the tool were displayed on the screens during each break and at the end of each session. Approximately 50% of respondents completed the evaluation in real time on the day.

As some participants did not register prior to the day (both face-to-face and live streaming) these individuals were provided with a unique identifying number to access the electronic tool during the update. To assist those having difficulty accessing the electronic evaluation tool, two members of Iris Education had copies of each person's unique access identifier. Six different people requested this information during the day.

Additionally, 28 printed copies of the evaluation were distributed to individuals who chose not to use the electronic resource. These 28 evaluations were uploaded to the electronic tool after the event.

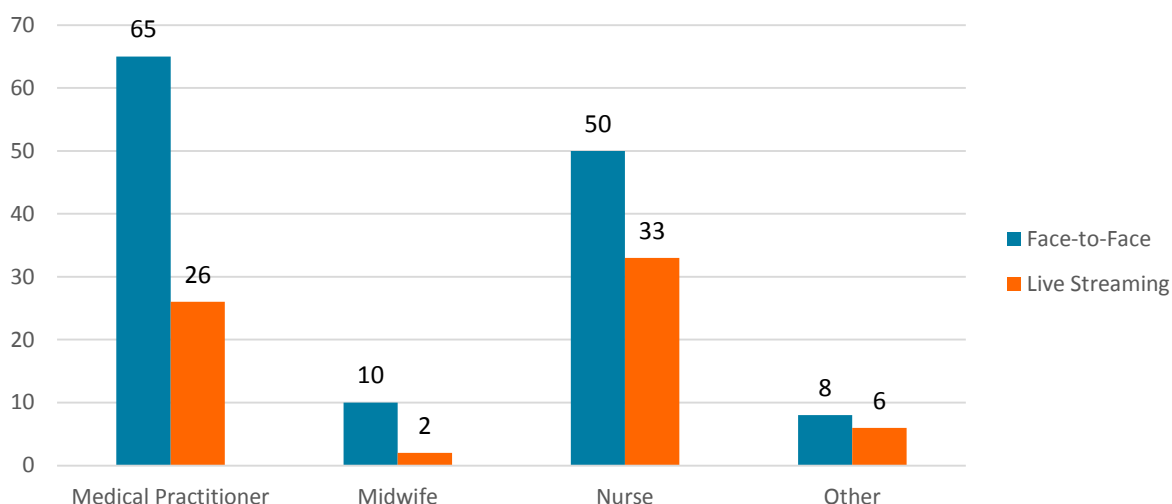
An email reminder was sent on the Tuesday following the update requesting those who had not yet completed the evaluation to add their comments.

7.1 Overall Cohort

201 Individuals provided some evaluation feedback. This represents 68% of the cohort that participated in the update (n=298). This is a very strong evaluation rate for this type of activity, especially with the large participation rate via live streaming. Of these 203 individuals, 94 completed every question of the electronic tool (46%).

7.1.1 Demographics

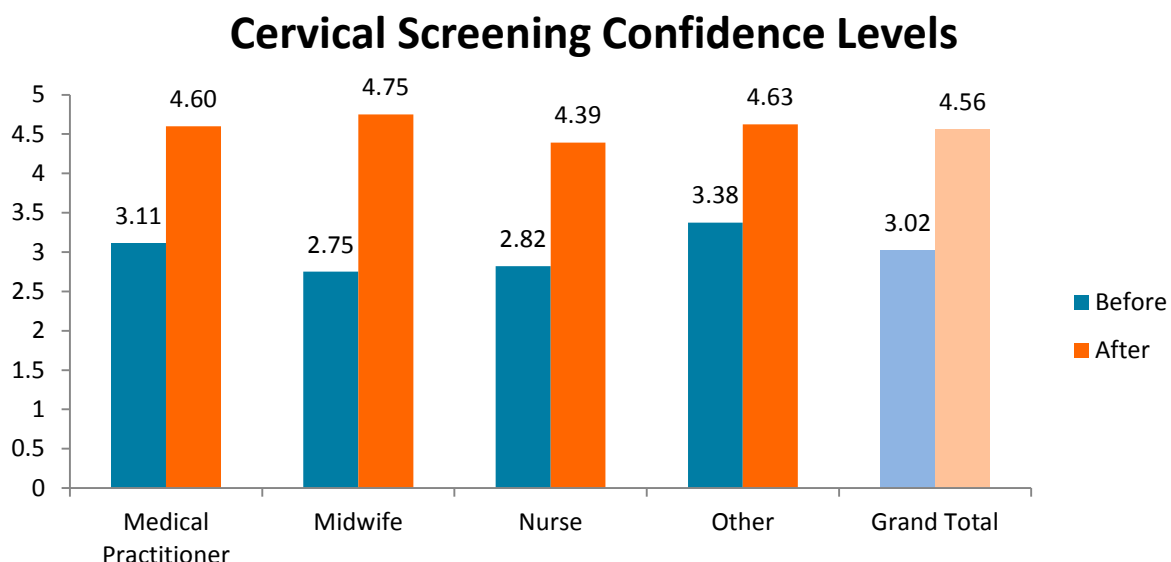
The majority of participants who completed the evaluation documents were medical practitioners. There is a higher representation of GPs and GP Registrars in the evaluation cohort than in the overall attendance cohort. The graph below describes the evaluation respondents by profession and by attendance.



7.1.2 Confidence levels

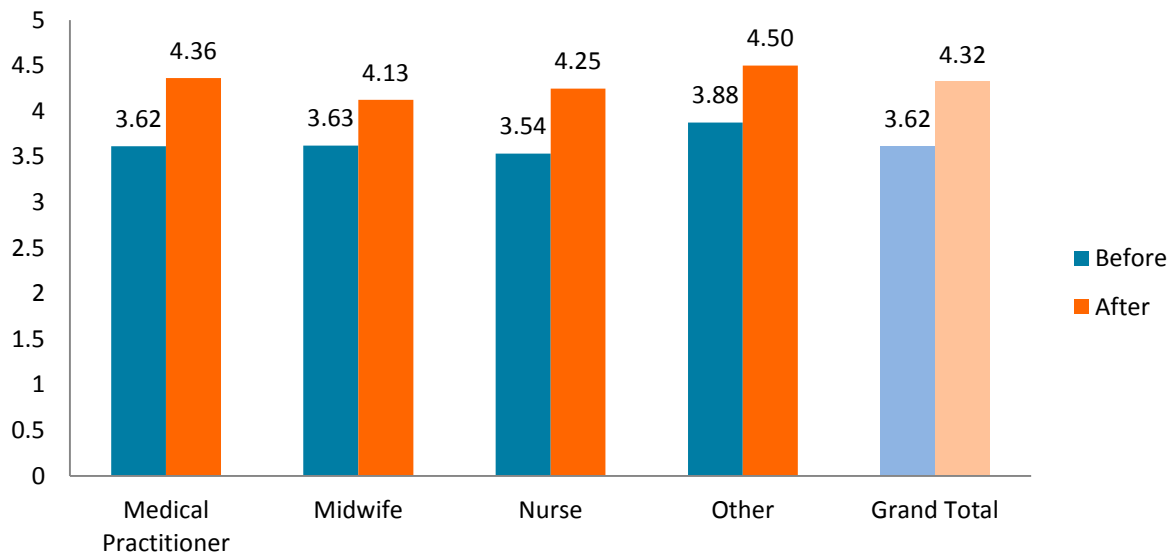
It is evident that this workshop has been an effective educational event. Participants were asked to rate their confidence levels in two general topics prior to the update and immediately after the update. Prior to the update, participants were able to answer this question the day before. Although the confidence levels of many participants were already high, all participants expressed an increase in confidence as a result of attending this workshop.

For Cervical Screening, the overall average moved more than 1.5 points along a 5-point Likert Scale (from 3.02 to 4.56). All professions noted an increase in confidence with the greatest increase being among midwives. The graph below presents the change in confidence levels for each profession.



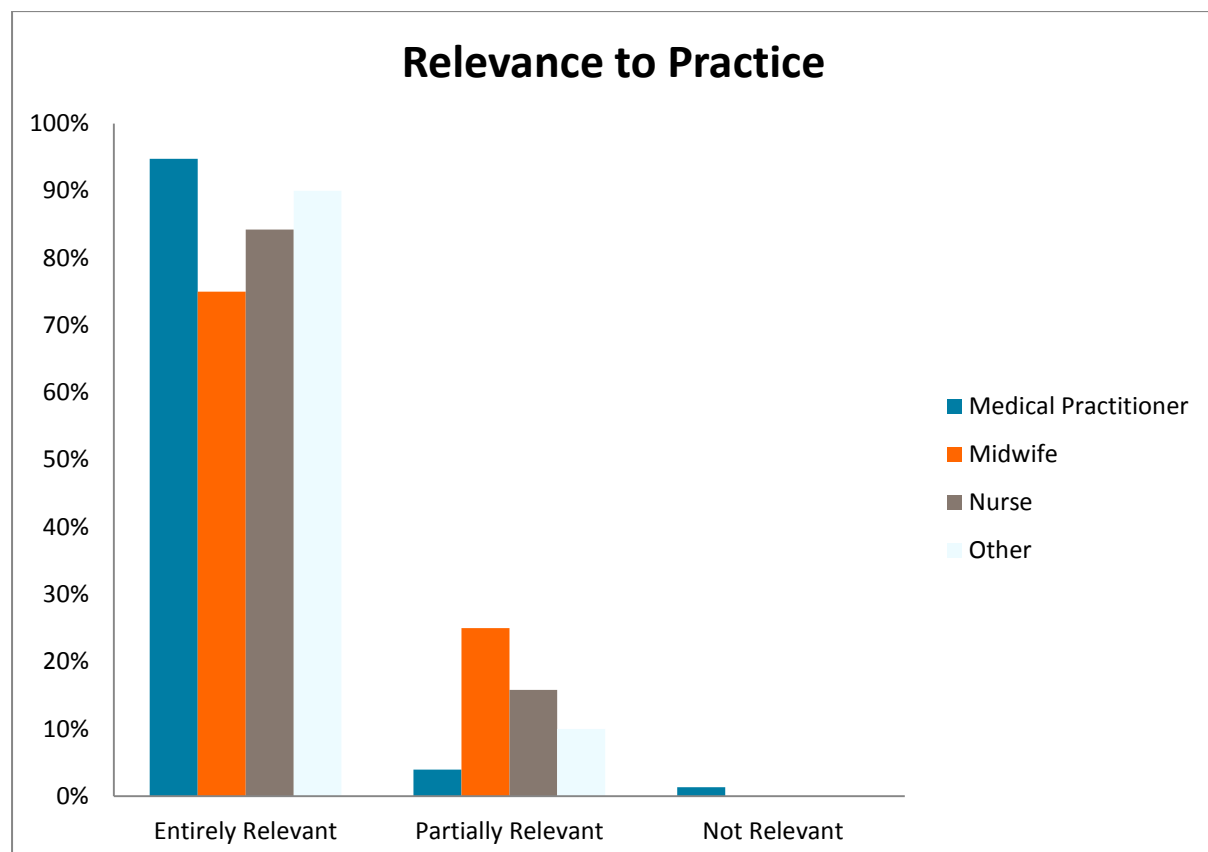
For Preventive Health issues, the increase in confidence levels was less striking but still significant. The overall average moved more than 0.8 points along a 5-point Likert Scale (from 3.62 to 4.32). All professions noted an increase in confidence with the greatest increase being among medical practitioners. Some participants noted no change in confidence levels (n = 13) however no participant registered a decrease in confidence levels. The graph below presents the change in confidence levels for each profession.

Confidence Levels - Preventive issues relating to women's reproductive health



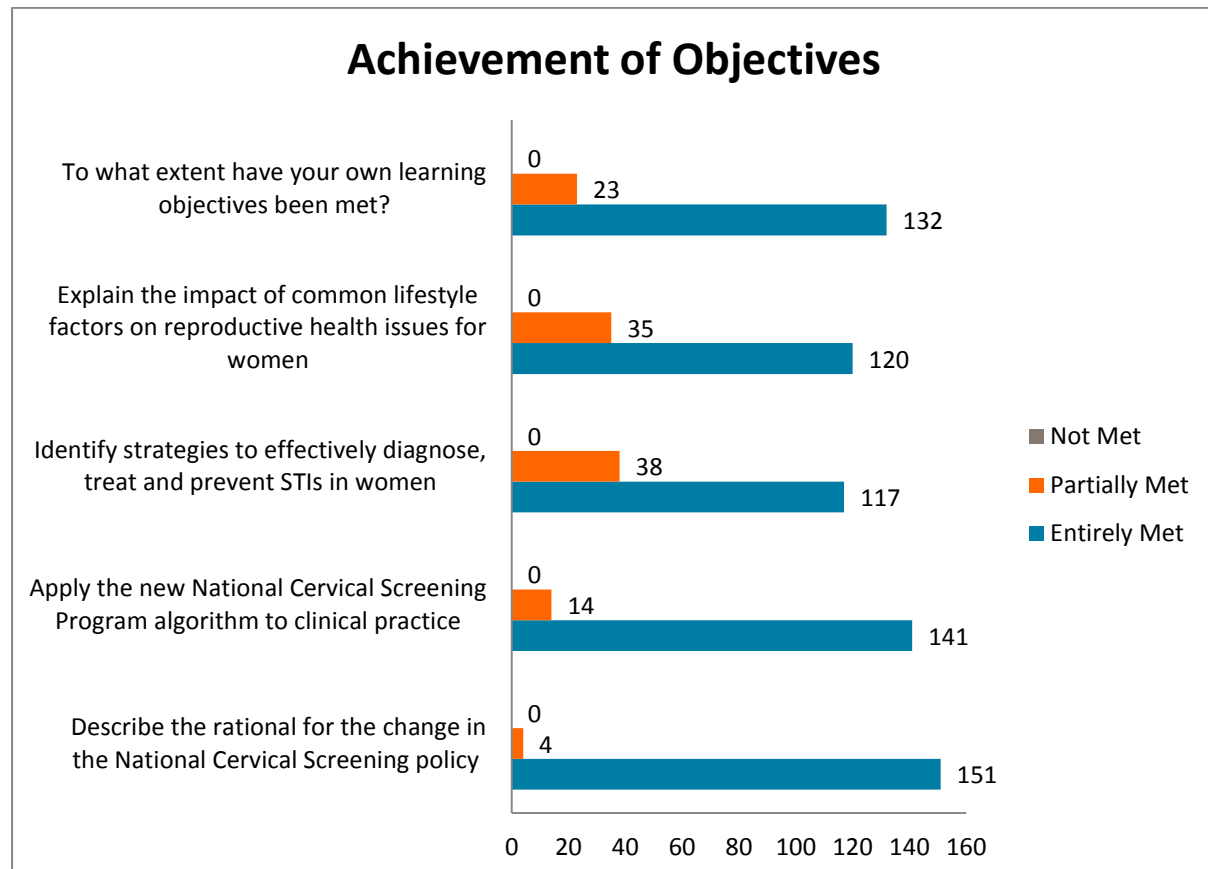
7.1.3 Relevance to Practice

Almost every participant indicated that this update was relevant to their daily practice. Only one person, a GP, indicated the day was not relevant to their practice. The graph below demonstrates the level of relevance to the entire cohort.



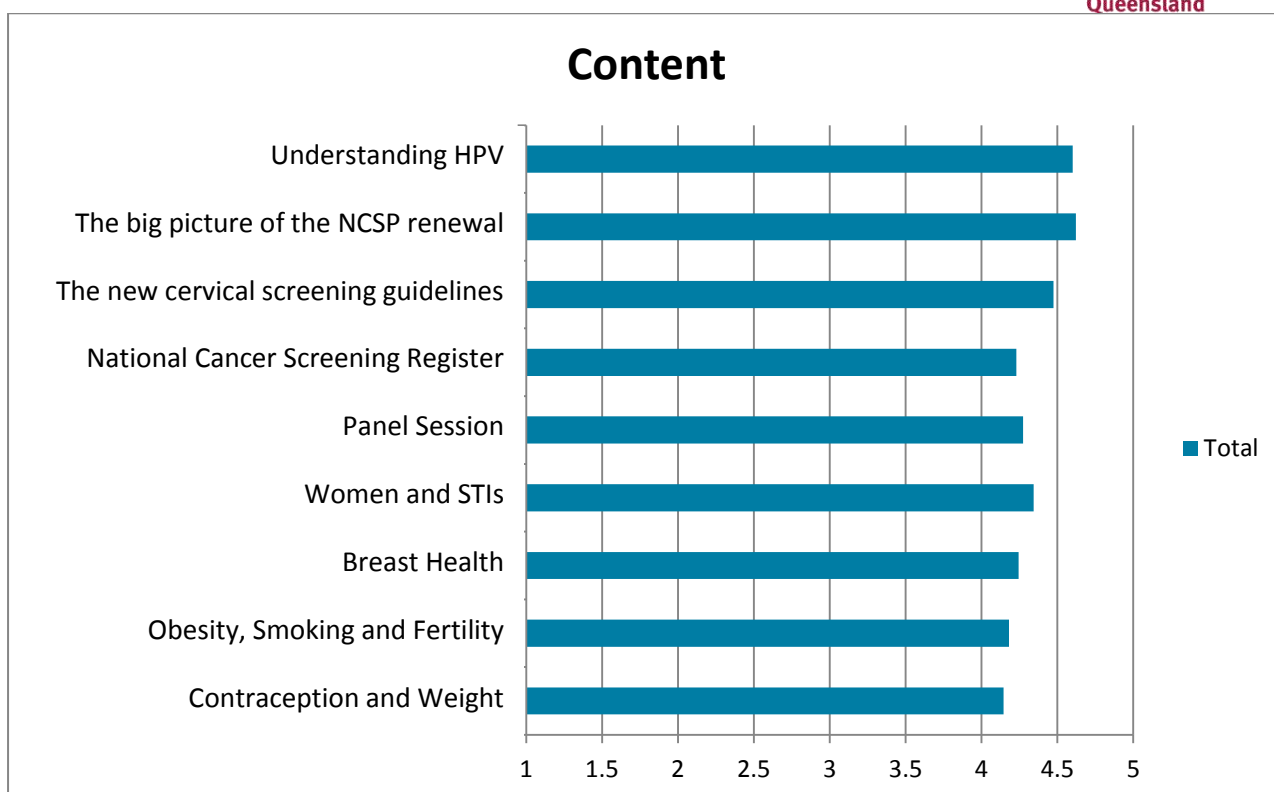
7.1.4 Achievement of Objectives

Participant were asked to rate their achievement of the objectives of the day. The objectives were listed in the update workbook. Participants were also asked if they achieved their own personal learning objectives. The graph below illustrates responses with the first bar showing the achievement of own objectives.

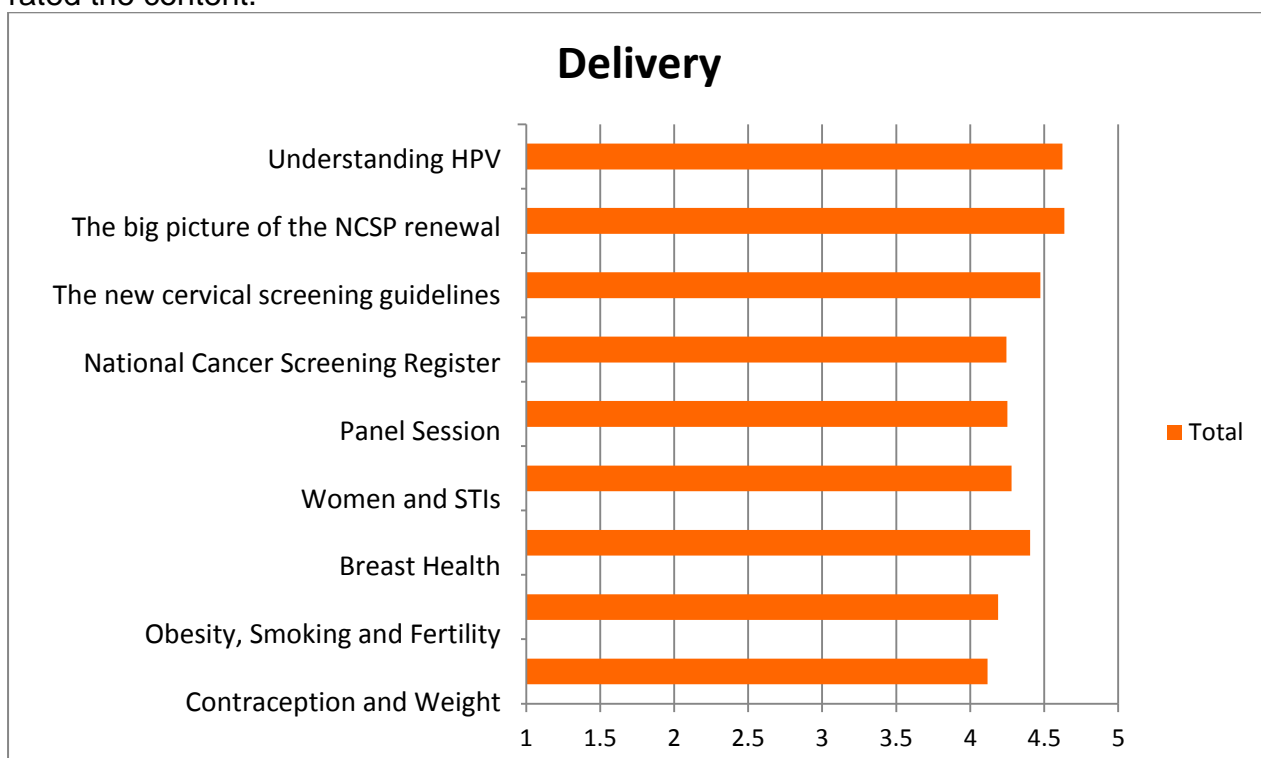


7.1.5 Summary of Evaluation of Content and Delivery for each session

The content of each session was rated by participants on a 5-point Likert Scale. The content of all sessions was rated highly by all participants. The comments, later in this report, also reflect this very positive rating. The graph below presents the average rating for the content of each session. While not all participants rated every session, the minimum response rate was 157 for the content questions. This included both those who attended in person and those who attended via live streaming. There was no discernible difference between these two cohorts in how they rated the content.

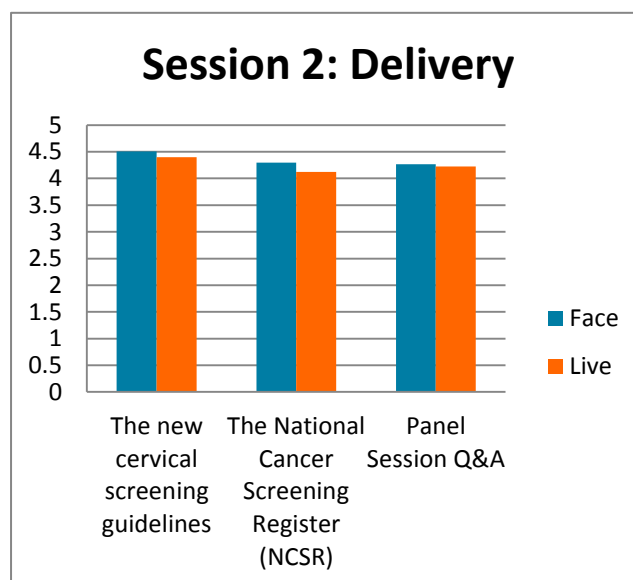
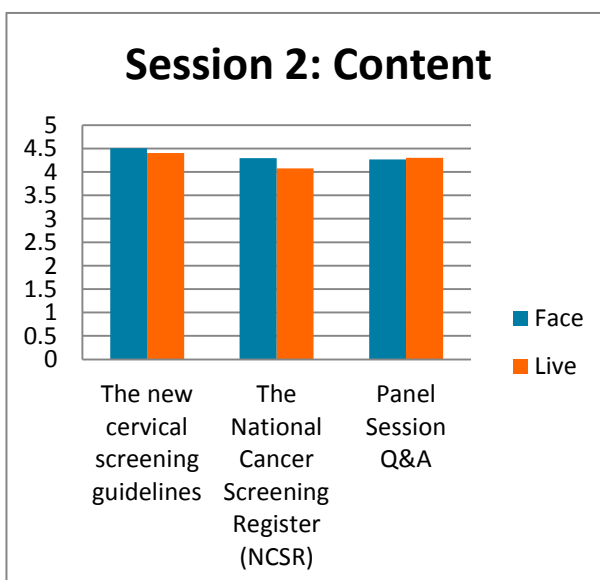
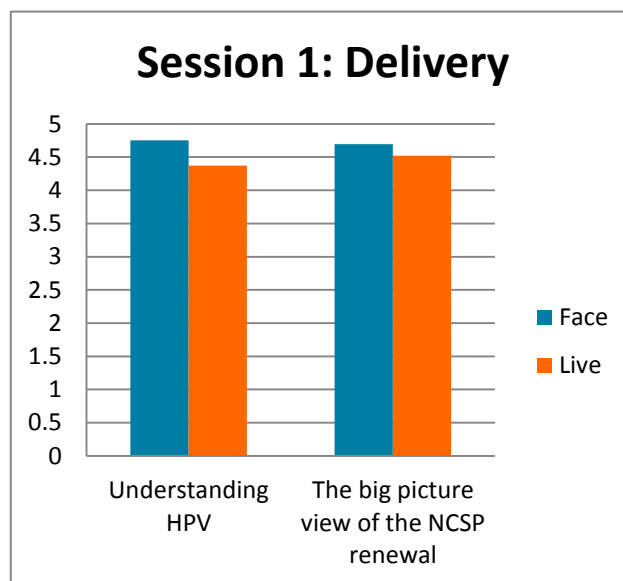
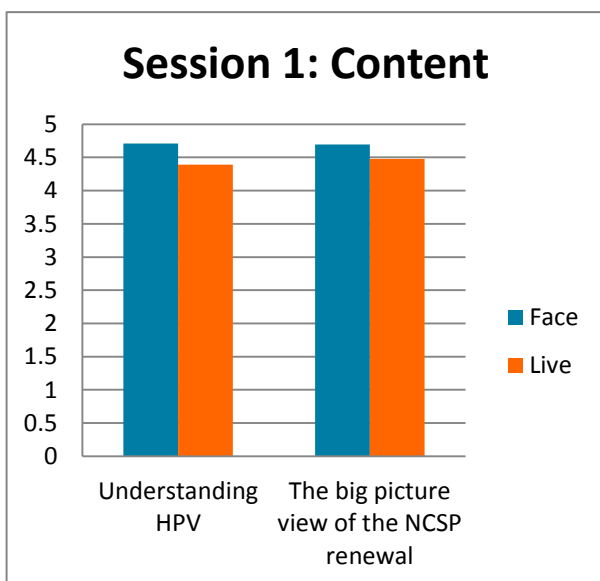


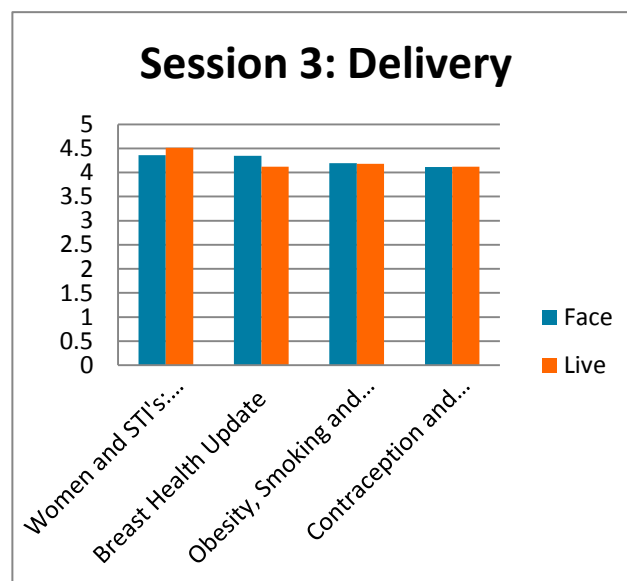
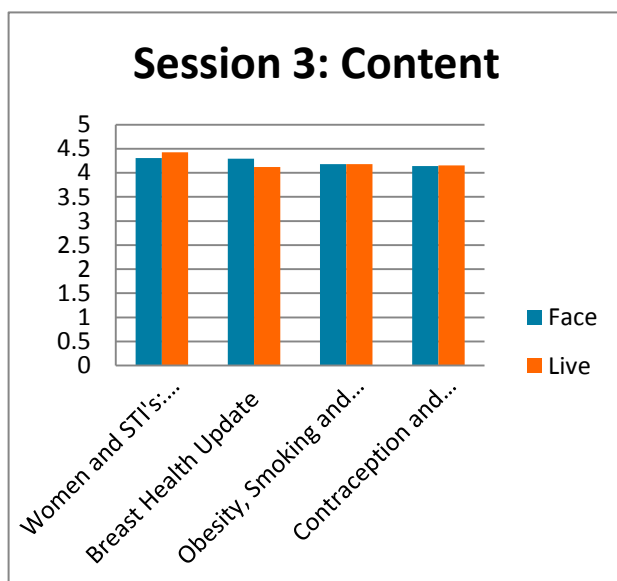
The delivery of each session was also rated by participants on a 5-point Likert Scale. Again, the delivery of all sessions was rated highly by all participants. The graph below presents the average rating for the delivery of each session. While not all participants rated every session, the minimum response rate was 149 for the delivery questions. This included both those who attended in person and those who attended via live streaming. There was no discernible difference between these two cohorts in how they rated the content.



7.2 By attendance mechanism

134 of the 175 individuals who attended in person (77%) provided an evaluation response and 66 of the 123 individuals who participated through live streaming provided an evaluation response (54%). The lower response rate from those live streaming is expected. There was no difference in evaluation responses between those who attended through live streaming and those who attended in person. All participants rated the update very highly. To demonstrate this, the graphs below delineate content and delivery responses by mechanism of attendance.





There was no difference in ratings by those who attended in person or those who attended via live streaming. The comments divided by mechanism of attendance are presented below.

7.2.1 Comments by those who attended Face to Face

Comments about the 'Understanding HPV' session (8.45am) from those who attended in person are presented below:

GPs (and all Medical Practitioners)

- Wonderful useful lecture on HPV
- Good 'grounding' content to start the NCSP renewal morning with. Well done Kay.
- A very clear and concise explanation of everything I needed to know about HPV, excellent
- Great topic. Great speaker.
- Made virology easier to understand.
- Virology was a bit too detailed.
- Excellent
- Really improved my understanding and new guidelines
- Well organised and thorough presentation
- Dr Kay Strom delivered an excellent easy understanding of H PV. Thank you.
- Really interesting and well delivered talk
- Great speaker and content
- Explained well
- Great learning experience. Appropriate level of information

Midwives

- Very clearly delivered
- Excellent presentation

Nurses

- Fantastic explanations into HPV
- Great speaker and talk. Really enjoyed content and found it easy to follow
- Very informative easy to understand presentation
- This presentation was outstanding!
- Great complex subject that was easy to follow.

Other (Including educators)

- Complex issues were easy to understand , well presented
- Well presented, very clear

Comments about the 'Big Picture view of the NCSP Renewal' session (9.30am) from those who attended in person are presented below:

GPs (and all Medical Practitioners)

- Great hearing from and to be able to discuss as a group with Prof Hammond because he has been such a huge contributor to the new NCSP.
- Again, clear, concise and relevant information
- Great session!
- I would argue with the use of the word 'protective' for a negative HPV test for the next 5 years.....it has an excellent negative predictive value but in and of itself it doesn't protect you from cervical cancer - you are just very unlikely to get it.
- Well presented
- Excellent speaker and information clearly laid out.
- So good -easy to understand, clearly presented Excellent
- Interesting and useful presentation. Well organised
- Strong reassurance of safety 5 yearly screening. Thank you.
- Excellent talk
- Another great presentation
- Great Excellent Speaker
- Made me confident about NCSP

Midwives

- Brilliant

Nurses

- Extremely informative, very well delivered
- A marvellous speaker with an easy going manner
- Excellent speaker. Patient-focussed clinician.
- Thank you Ian! You were so fabulous to listen to.

Other (Including educators)

- The deliveries flowed smoothly

Comments about the 'New Cervical Screening Guidelines' session (10.35am) from those who attended in person are presented below:

GPs (and all Medical Practitioners)

- The session was very informative
- Comprehensive great talk
- The approach of "What isn't changing" versus 'What is new" was good. Also discussion of the practical aspects of how to take samples, self-testing and transitioning were very practical and helpful.
- Very well explained, relevant graphical data demonstrating how conclusions were drawn. Excellent summary.
- Very practical session - topic well dissected.
- Targeted to GPs well done
- Clear and concise
- An excellent session- informative, easy to follow
- Thank you for the excellent clarification.
- Excellent talk
- Clear view about the guidelines
- Very clear and relevant presentation. Perhaps some overlap with other speakers.

Midwives

- *Nil comments*

Nurses

- Excellent speaker, holistic approach

Other (Including educators)

- Was most impressed with the flow of the morning - then evidence then into the renewal then into the register - it flowed really well
- The examples of reporting were very clear

Comments about the 'National Cancer Screening Register' session (11.30am) from those who attended in person are presented below:

GPs (and all Medical Practitioners)

- Excellent
- Very useful
- Very interesting as I didn't really know about this at all. Good to hear what is planned.
- Very informative
- Glad I came
- Excellent talk
- Very good program

Midwives

- *Nil comments*

Nurses

- Good to hear about the behind the scenes. Good speaker, well done for making it here to talk to us, thanks!

Other (Including educators)

- The presentations were good but Commonwealth seem to be a little disorganised still

Comments about the Panel session (11.50am) from those who attended in person are presented below:

GPs (and all Medical Practitioners)

- Excellent
- Very useful teasing out some of the less common and trickier points of the NCSP. Great panel.
- This session is one of the best parts of this conference
- Often couldn't hear both the questions and answers clearly
- Helpful questions & covered a lot of ground
- It will be nice to provide A4 size of all flow charts. The miniature size hardly able to read.
- Interesting questions and good panelists with range of expertise
- Good discussion
- Good opportunity for Q & A

Midwives

- Great format / questions

Nurses

- It was brilliant to have the opportunity to ask questions but also to hear responses and points of views on the questions
- Great interaction with the audience and interesting questions asked.

Other (Including educators)

- generally very good though some topics such as delivery to migrants and refugee communities was not explored. This is a group of women who will start experiencing cervical cancer in significant numbers in the next 10 years or so
- some great questions from the floor and online

Comments about the 'Women and STIs' session (1.30pm) from those who attended in person are presented below:

GPs (and all Medical Practitioners)

- Interesting talk, engaging speaker, some great new material
- Interesting and refreshing approach. Fun too.
- Useful information, delivered in an interesting presentation
- Really practical
- Good speaker
- Very relevant
- Good STS review plus some new information Very interesting & well presented
- Interesting and well delivered
- I do have better understanding after this education
- Excellent info and presentation
- Very relevant. Useful resources.

Midwives

- *Nil comments*

Nurses

- An excellent talk
- Excellent speaker, very informative and non-judgemental.
- Good presentation for those not actually experienced in sexual health

Other (Including educators)

- *Nil comments*

Comments about the 'Breast Health Update' session (2.30pm) from those who attended in person are presented below:

GPs (and all Medical Practitioners)

- Good speaker but information would be presumed knowledge for most GPs working in women's health.
- Well done. Very helpful structure with the three main areas. Very helpful update and reminder of key issues to do with screening and managing symptomatic women. Helpful approach to areas such as over-investigation.
- Really helpful
- Good talk
- Clear view about breast screening
- More case history. Excellent presentation

Midwives

- *Nil comments*

Nurses

- Interesting and well presented
- More info on research into cause of the increasing rates of breast cancer would be helpful to help educate the population to prevent breast cancer.
- Interesting to hear re. teaching women to do self examination not recommended.

Other (Including educators)

- I thought that I knew what there was to know about breast cancer and breast cancer screening. The presentation was a good update

Comments about the 'Obesity, Smoking and other Preventive Health issues in Fertility' and 'Contraception and Weight' sessions (3.30pm) from those who attended in person are presented below:

GPs (and all Medical Practitioners)

- Good revision of risks of contraceptives. Some new info such as the single dose morning after pill.
- Maybe a bit quick speaking +/- a bit hard to hear sometimes. Some of the statistics Ben started to share or did share, would have been interesting to hear.
- Very amusing presentation, hysterical graphics to accompany information - perfect for a mid-afternoon session when we were all flagging a little! Oh, and the information was good too.
- Excellent
- Many theoretical information .I wonder if it could be more summarised as it was near ending the conference and everybody was tired and in this situation
- Covered all the issues. Thanks
- Clear view
- Good presentation. Old topic with not much new information.
- Great speaker, good presentation of quality trials, useful to be able to relay to patients and offer reassurance.
- A bit hard concentrating by then, but well done. Such a 'full' and high quality day preceding the last two talks, hence a bit of brain overload by then.
- To be honest, I'd lost focus by this presentation. Will be relying on the print out of the slides in the handbook. I stayed, but had hit saturation point for new information by that stage.
- Next time, can we put this at an earlier spot when my brain is still working? It was a very practical session but brain almost dead. Thanks
- Useful information but perhaps too much emphasis on numbers and stats for late in the day. Nonetheless some useful take home messages
- Brief and complete
- Worthwhile day
- Very well thought out. Thanks
- Understanding about whether overweight & obese needs higher dose or not
- Little rushed. Too much info for time

Midwives

- *Nil comments*

Nurses

- *Nil comments*

Other (Including educators)

- The information was complex and from the presentation it was difficult to know what to tell patients. It was obvious though that obesity is an issues in fertility and each individual will respond in different ways
- Another difficult issue. Creation of awareness about this issue is worthwhile to avoid patient's disappointment

Comments were also requested about 'what was of most value about the update?' Responses were received from almost all participants and the comments received by those who attended in person are presented below:

GPs and Other Medical Practitioners

- New guidelines. Refreshed knowledge
- Understanding of the new cervical screening guidelines
- The new Guidelines for screening Cervical cancers.
- Discussion of new cervical cancer screening guidelines in great detail. Really appreciated the talk on HPV pathogenesis - explained very well.

- Detailed explanations & discussions around all aspects of the NCSP renewal process, clinical and implementation components, the science, practical aspects and shared clinical aspects.
- The explanation of the Cervical Screening Program changes.
- The topics esp the way the HPV virus was explained and the new program dissected for us GPs to understand and implement it better.
- The information provided on the new changes to the cervical screening program.
- All was relevant
- New cervical cancer screening program.
- new cervical screening guidelines
- Clarification of new cervical screening changes
- to understand how the new cervical screening program works
- Implementation of the new cervical screening guideline
- Updated info
- Catching up on the NCSR and understanding the reason behind the changes.
- The detailed information provided about the reasons behind the changes to the cervical screening program
- Change to cervical cancer screening program
- confidence in explaining the new cervical screening programme
- Understanding HPV better
- Learning new guidelines for cervical screening test
- Discussion regarding the change of cervical screening as well as STI and Breast cancer screening.
- Getting an understanding of the new cervical screening guidelines
- Gaining more detailed information regarding the cervical screening changes and how to discuss this accurately with patients
- The HPV talk was very helpful - the best I have heard. In fact, all the morning talks I found relevant and accessible. I am so glad I attended.
- Cervical screening and HPV
- Cervical guidelines. Interesting talk by Dr Aitken
- Seeing how good GP education is conducted!
- Fantastic in depth explanation of the science and evidence behind the changes to the NCSP
- Update on the new cervical screening guidelines and their rationale.
- New cervical screening test. Mycoplasma genitalium, Bacterial vaginosis.
- All the stuff relating to the new cervical screening test.
- understanding HPV
- Updating changes in our system for pap smear
- Going through the development and implementation of the new screening guidelines
- Cervical screening changes -understanding why
- excellent first two presentations
- able to discuss and listen to colleagues discussing issues related to new guidelines of cervical cancer screening.
- Learned more about HPV itself, the screening, referral based on the results: straightforward.
- Panel discussions
- Specific details and the fine print of the new HPV guidelines was provided clearly, and all the possible diagnostic conundrums were discussed.
- All
- All aspects were good
- All the topics
- background information HPV. Information cervical screening testing

- Understanding science of HPV infection and benefit of HPV screening, NPSC rationale, at 5 yearly interval
- gain more knowledge about new guidelines of cervical cancer screening program
- Nutting out the details re the new cervical screening programme
- STI management and mycoplasma G info. Understanding AMH relevance
- Cervical screening program
- Fertility and NSCP
- The changing from 2 yearly to 5yrly
- Learning about CST Renewal and how it fits in with General Practice.

Midwives

- Conference content and networking opportunities
- The update regarding cervical cancer screening
- Program was fantastic very well organised. Excellent presenters.
- The information about the HPV cervical screening. As a midwife it is useful information to have to provide the correct information to women and their families. (need to the facts and figures)
- Comprehensive update from excellent presenters
- Understanding the change to the National Cervical Screening Program, the new guidelines and its expected impact.
- Time allowed to explore concerns about bringing in the new guidelines.
- Very well organised presentations
- New cervical screening guidelines. HPV

Nurses

- Professor Ian Hammond's presentation on the NCSP
- was good to have clarification about the new changes
- The morning sessions on the new guidelines have been the most helpful
- Learning more about self-collect option for women.
- NCSP renewal; STIs, understanding HPV
- Education around the new National cervical screening program
- The up to date knowledge and how it impacts on my patients.
- Fantastic update for current clinical Practice
- Update & clarity of the New cervical screening program
- Update of new women's health screening to be effective Dec 2017.
- The comprehensive explanation of new policy of cervical screening and the rationale behind for change.
- Attending with my workmates so we know that we are all on the one level and have up to date information.
- The HPV and STI update, as well as the new guideline information.
- Gaining a better understanding of HPV and its role in the cervical screening. I feel really enthused that this is finally a step forward and improvement in care for women
- Learning about the changes to the Cervical Screening Program and Networking with Peers
- New CST guidelines
- New guidelines
- The information on new guidelines and women who will be due screening prior to 1/12/17
- The changes to the National Cervical Screening program.
- Update on cervical screening
- Greater understanding of new guidelines
- Understanding HPV
- Understanding the national cervical screen program renewal
- Cervical screening update
- Pap smear guideline changes

- Learning about the new Pap smear guidelines.
- Networking with other colleagues
- All questions answered regards roll-out of changes to screening and how to discuss and educate patients on changes, and how to be confident in the changes
- The first session explanation of HPV with Kay.
- The transition guidelines effective from 1/12/17
- Hearing directly from people involved with creating new cervical guidelines.
- Information regarding the NCSP renewal and understanding the significance of HPV.

Other (Including educators)

- I found today's content entirely relevant, informative, research based, collaborative & paced to my learning needs. All presenters were highly entertaining, well placed in our health circle to provide best practice guides.
- Explanation of different procedures that need to be followed after detection of HPV in a sample or a swap
- Professor Hammond's presentation
- The evidence behind screening and the virology
- Information regarding the National Cervical Screening renewal.
- Update
- HPV testing, obesity smoking

The last question of the evaluation asked if there was anything missed or further information. Below are the final comments from those who attended in person:

GPs (and all Medical Practitioners)

- A very comprehensively presented conference and very relevant to clinical practice, excellent speakers well done and many thanks!!
- Excellent presenters with a wealth of experience which they shared in very clear easy to understand manner. Great sharing discussions and experience. Breast screening refresher also appreciated.
- I thought this was an invaluable session. I feel confident moving forwards into the new program, and intend to do a presentation of the information I have learned here to my GP colleagues. I would definitely recommend this course.
- Should have been more interactive. Good venue and speakers
- A very informative, practical and efficiently run conference. Many thanks!
- Would attend again. Very well organized More Gunnar topics please
- Good location excellent speakers, . High quality education and much appreciated.
- An excellent day. Well worthwhile attending
- I couldn't attend the afternoon session.
- Very informative and well delivered talks. Thanks
- Some problems with HPV programme will really only reveal themselves a few years down the track.
- Very good education
- Mainly attended for information about cervical screening, but other topics were also valuable.
- Excellent presentation
- All the session's topics were really important. I wonder if there is any chance to divide the meeting into 2 sessions. Uptake is very low.
- Excellent symposium. Low cost.

Midwives

- Thank you, well organised & excellent facility
- Very impressed by speakers. A great day
- Increased Confidence to share with other staff and counsel woman the latest information clear up lots myths.
- Thank You for a highly organised, valuable learning experience.
- Venue very good. Food plenty and good variety.

Nurses

- Great conference, great venue! Thank you for making it free and providing food too. Much appreciated!
- high calibre of speakers and participants
- This conference was well presented and well organised with excellent presenters. Having the opportunity to video-stream, as well as watch recordings at a later date is very handy. Thank you.
- This has been a fantastic and extremely valuable information day on the changes to the cervical screening programme, giving full explanations and justification for the new program. Roll on Dec 1st
- This was a great conference. Well organised, professional, great content and very relevant to my practice
- Great work, enjoyed the whole day
- I felt that it would have been good to have up to date epidemiology on STI's in that presentation, to allow GPs to think carefully on screening. Especially as we are seeing an increase in gonorrhoea and syphilis in heterosexual males and females this year.
- Interesting and vibrant delivery of conference content. Great speakers Enjoyed the entire day Thanks
- Fantastic Day - Thank you
- Well orchestrated conference - congrats
- Great presenters.
- Many thanks to the Iris team.
- Well organised day - good venue.
- Could skip afternoon tea so that day finishes earlier.
- Look forward to further Iris programs

Other (Including educators)

- Thanks
- Congratulations to Iris and Qld Health. Great presenters, clear information, good venue, fabulous organisation. Perhaps slightly shorter - great day.

7.2.2 Comments by those who attended by Live Streaming

Comments about the 'Understanding HPV' session (8.45am) from those who attended by live streaming are presented below:

GPs (and all Medical Practitioners)

- really enjoyed the session
- clear and concise
- very good information about HPV
- slides difficult to see generally
- This is a really good presentation and would be useful for on-line teaching by the colleges eg RACGP/ACRRM
- Very informative and clear explanations

Midwives

- *Nil Comments*

Nurses

- well presented & understandable
- well presented
- very informative – a lot of info that can be explained to the client
- Content complex in nature so found it hard to follow at times but picked up some new information that will be useful when educating clients
- great to have this refresher
- Excellently presented in an understandable manner

Other (Including educators)

- When speakers referring to parts of slide couldn't see if they were pointing to something, just a minor point.
- Very thorough and certainly increased my knowledge of the area.
- Easy to understand and relate to my area of practise.
- Very informative

Comments about the 'Big Picture view of the NCSP Renewal' session (9.30am) from those who attended by live streaming are presented below:

GPs (and all Medical Practitioners)

- Good
- Prof Hammond is such an excellent speaker!!!!

Midwives

- *Nil comments*

Nurses

- Great understanding achieved !
- enthusiastic speaker, motivating--though I am already a convert
- Very clear and well presented
- made it easy to see why the switch will benefit everyone - one of the best presentation every :)
- Good to have the various aspects of the new cervix screening program so clearly described.

Other (Including educators)

- I think a lot of this was basic knowledge
- Progressive changes to come easily understood again relevant to my area of practise
- Very informative

Comments about the 'New Cervical Screening Guidelines' session (10.35am) from those who attended by live streaming are presented below:

GPs (and all Medical Practitioners)

- some nice hints re ways to phrase things to explain new system to people
- Differing circumstances and presentations identified and explained

Midwives

- *Nil comments*

Nurses

- Well presented
- Great speaker
- 12 pages of notes this was a very informative and understandable presentation
- Some of the slides were repeated from previous speakers

Other (Including educators)

- Think I'm getting the sessions mixed up. If this was Prof Hammond, excellent. Very interesting
- I agree the direction change for 'looking for the causal agent' message important to progress with new program. Love the humour and ease of speaker Dr. Caroline.
- Excellently delivered

Comments about the 'National Cancer Screening Register' session (11.30am) from those who attended by live streaming are presented below:

GPs (and all Medical Practitioners)

- well presented
- I feel that there is still some aspects of the Register that are uncertain. I guess this is to be expected, as it is yet to roll out (and I note this is the cause for delay in transition to the new screening program). However, as a practitioner, I have some reservations and lack of certainty, whereas I had hoped to be crystal clear and able to discuss it with confidence with patients.

Midwives

- *Nil comments*

Nurses

- Clear understanding of the new guidelines and register. Thank you.
- understood what can be accomplished with one register hope we get there
- very useful information, I did not realise that there would be a new register

Other (Including educators)

- Found this boring and slides too busy.
- Clear message and easily understood, great speaker, Dr. Leane.

Comments about the Panel session (11.50am) from those who attended by live streaming are presented below:

GPs (and all Medical Practitioners)

- this section cut off at second last question in the session, so this was annoying.
- Dr PAPadimos is quite funny! Panel session is a very good idea. Nice to see lots of experts in one row sharing their expertise

Midwives

- I didn't think my on-line question was asked correctly so I didn't get the information I wanted in the answer.

Nurses

- Great to hear the views of the various panellists and participants
- Very informative
- good questions - ones that were of interest but not thought of.
- Found it hard at times to hear on the live stream as questions not into microphone all the time
- there were some excellent questions that i had not thought to ask.

Other (Including educators)

- Terrific opportunity, even with more medical professional question focus was very informative as we are all heading in the same direction for women and men
- All questions answered well

Comments about the 'Women and STIs' session (1.30pm) from those who attended by live streaming are presented below:

GPs (and all Medical Practitioners)

- enjoyed STI section
- needed more humour at the beginning but warmed up as the session progressed
- Dr Aitken is a fantastic speaker! Quite humorous too. Loved the presentation :)
- Excellent presentation

Midwives

- *Nil comments*

Nurses

- Clearly presented
- I liked this presenter's manner, he spoke nicely and concisely, with humour. The content was useful and interesting.

Other (Including educators)

- Great speaker, loved the humour throughout the presentation. New info very relevant to my area of practice, well presented. Absolutely 'watch this space'.
- Very informative

Comments about the 'Breast Health Update' session (2.30pm) from those who attended by live streaming are presented below:

GPs (and all Medical Practitioners)

- nice explanations related to screening and diagnostic tests. A little repetitive.
- Informative session

Midwives

- *Nil comments*

Nurses

- Very well presented
- I really appreciated this presentation, it was very clear and concisely spoken. Very easy to understand, thank you.

Other (Including educators)

- Good update, enjoyed speaker.
- Very informative

Comments about the 'Obesity, Smoking and other Preventive Health issues in Fertility' and 'Contraception and Weight' sessions (3.30pm) from those who attended by livestreaming are presented below:

GPs (and all Medical Practitioners)

- clarity, humour made a potentially dry topic good. The statistics were very sobering.
- Good session!
- starting with the summary was helpful. Possibly would rate higher if this presentation at beginning of day, rather than as the last session of the meeting. It was a information and data heavy program, and equally draining whether completed via webinar or in situ at the venue. This session also cut off prior to the summing up which was incredibly annoying!
- Really interesting and relevant presentation from each of the speakers.

Midwives

- *Nil comments*

Nurses

- Interesting
- very interesting, a subject that I don't encounter very frequently so i really enjoyed it.
- this subject was a bit heavy for this time slot, it would have been better earlier in the day when my brain still worked, i really struggled to keep up and maintain interest.

Other (Including educators)

- Fast delivery but good content . Very informative to see IVF perspective, and relationship to natural conception hurdles.
- Great review of STAT results. STATS can always be a dry topic but well presented. Liked the contraceptive/obesity review, very relevant to my clientele of adolescents as well as women generally

Comments were also requested about 'what was of most value about the update?' Responses were received from almost all participants and the comments received by those who attended by livestreaming are presented below:

GPs and Other Medical Practitioners

- New cervical screening program
- National cervical screening program
- New screening program
- Clarity of data presented and explanation of reasons for change
- CST & STI & HPV lectures

- The clinical examples of applying the new guidelines and the clear explanations of how to implement the changes
- Understanding the perspectives and concerns of GPs with the impending changes to testing of women for HPV.
- meeting the expectations
- Presentation of evidence regarding the bases for changing the current guidelines on cervical cancer screening.
- changes in cervical screening program, HPV cytology
- cervical screening info
- New cervical screening program
- STI discussion
- National Cervical Screening Program Renewal
- Review of the new NCSP guidelines. Contraception discussion was also very useful
- The Cervical Screening Test
- Overall understanding of new cervical screening guidelines and confidence will improve with implementation
- being able to stream, great relevant material
- lecture by Dr Kay Strom on cervical screening
- Evidence backing the change from current to new guidelines regarding National Cervical Screening Program.

Midwives

- Prof Ian Hammond's session (9.30-1015)
- The National Cervical Screening information and not having to travel - doing this from home has been awesome!

Nurses

- Changes to the National Pap Smear register
- Understanding the concepts relating to the program in order to educate patients and facilitate lifestyle changes (where applicable)
- the changes to the NCSP
- Networking with other practitioners while live streaming as we could discuss issues raised.
- Understanding HPV - great refresher. Rationale for changes Impact of HPV vaccination Specimen collection Overview of NCSR - look forward to Providers portal.
- Getting clear guidelines of the changes and how we are going to make it work in the clinic.
- Live streaming was fantastic. Great support to set up, no issues on the day, sound clarity excellent.
- being given more information about the new national cervical screening program - I now feel I will be able to answer my patients questions and being able to introduce it to my co-workers with confidence. I have also learnt new information about all the areas covered today - thank you
- Great to be able to link in via VC. High quality speakers.
- Fantastic webcast viewing - nil concerns with this at all. Due to this all learning aspects were met. High quality speakers. Thank you for putting presentation slides onto Iris website.
- Explanation of the update of the National cervical screening program.
- Obtaining current information in the area of women's health which will assist me in caring for women attending our practice
- Rationale for 5yr time frame and how to educate patients
- Session 1&2
- new cervical screening guidelines
- Cx screening.
- Understanding HPV
- Learning the reasons why the national screening program is changing

- Clarification of the more technical and applied practical aspects of the cervical smear itself as well as the "big picture" international rationale for HPV screening. Algorithms for interpreting results was extremely helpful.

Other (Including educators)

- Renewal of the cervical screening update
- learning about new screening test for cervical Cancer
- Clear direction of upcoming NCSP. Gaining a greater understanding of HPV and how this can now be incorporated into my area of practice. Update on obesity and women's health and STI's
- The new cervical screening guidelines

The last question of the evaluation asked if there was anything missed or further information. Below are the final comments from those who attended by live streaming:

GPs (and all Medical Practitioners)

- Good presentation
- Congratulations to the organisers. Excellent conference.
- Thank you for allowing us to listen and participate online.
- Handouts provided with the presentations are very useful, thanks.
- Enjoyed this education! Thank you very much :)
- Very useful update
- the online streaming was excellent
- I joined via live streaming. Unfortunately I could only see the slides and not the presenter, so I have called delivery very good, but in reality I couldn't see the live presentation. This comment applies to all subsequent comments. Delivery was poor because I couldn't see the actual presenters, only the slides. I did try out my device prior to the conference as instructed and sent an email indicating I was concerned about not being able to see the test link, but did not receive a reply prior to the day.

Midwives

- A great deal of the data used was out of date - have a look at the slides used to illustrate the reduction in prevalence of HPV in relation to the introduction of the HPV virus vaccine. Many statistics were >3years old. Some were >10. Tertiary references must be current within 5 years. I understand some of the early statistics are relevant and it is difficult to collate data quickly.

Nurses

- Very informative topic
- Thought the day was too long. Suggest half day sessions. Overall, the presenters were great & I am grateful that livestreaming was available. Thank you to the organisers & presenters
- Really appreciate not having to travel. Great explanations re changes & rational. thanks to all involved.
- Valuable conference Thank you
- Congratulations - well done.
- This was a great program. Well done !The live stream was perfect as I wasn't able to attend in person. Thank you to everyone involved in making the day such a great success. Look forward to the next one !
- Excellent and timely.
- Fantastic I could attend via live streaming, and not have to come to Brisbane. Will definitely attend again if this is made available for further events

Other (Including educators)

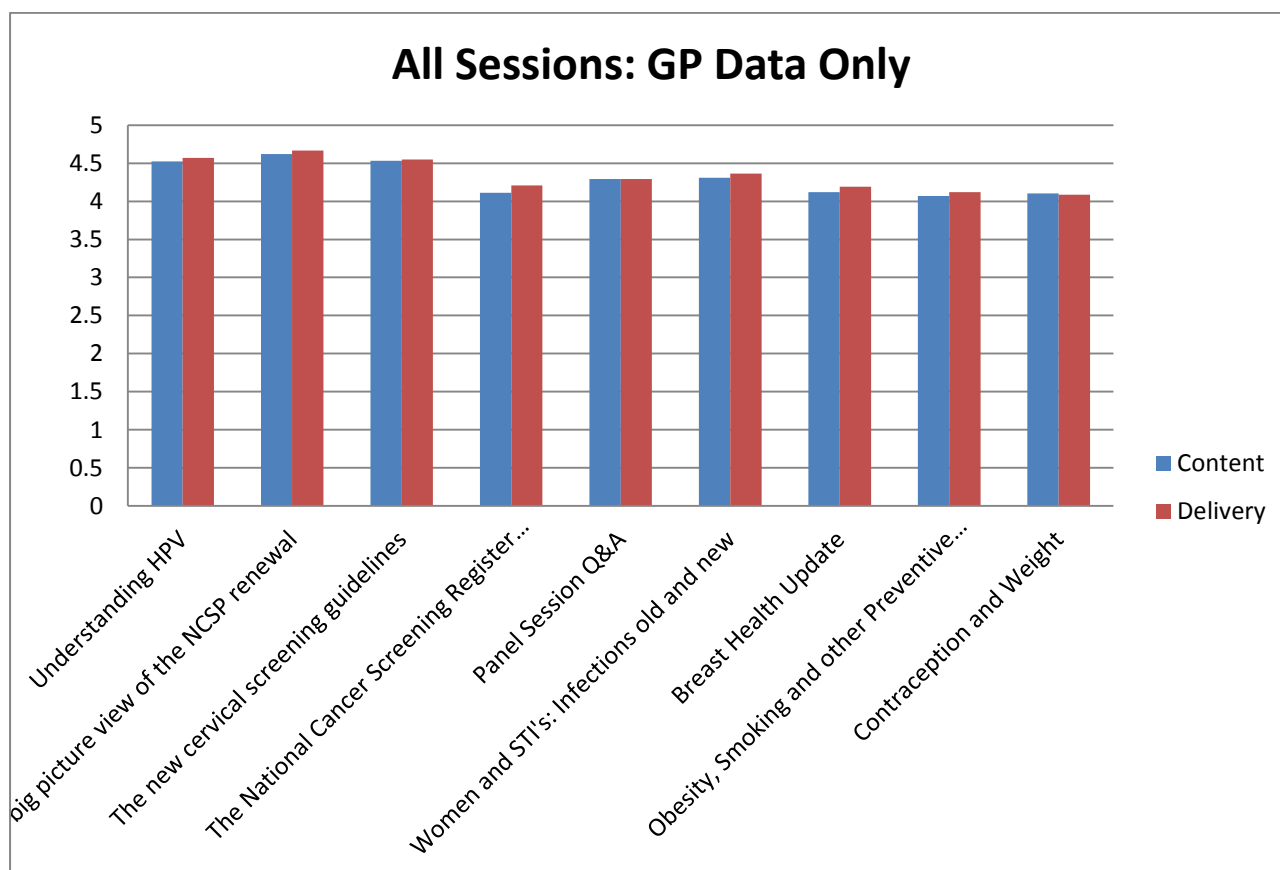
- I had an email everyday for about 5 days leading up to the webcast. Just an explanation of why I was getting an email everyday would have allayed my anxiety about having not completed something. Otherwise, this was most enjoyable, informative and entirely valuable.

- The IT used was great, very easy to use. Thank you for answering the questions I submitted. I would love to participate in another webcast again if offered. Thanks again, it was great!
- Well run, well chaired, very enjoyable. Minimal IT issues for me as was video streaming from home. Just small issue on how to find evaluation (though prompt reply to my query, thank you) and now having to pursue certificate and PD points but I shall endeavour. Can't wait for next one.

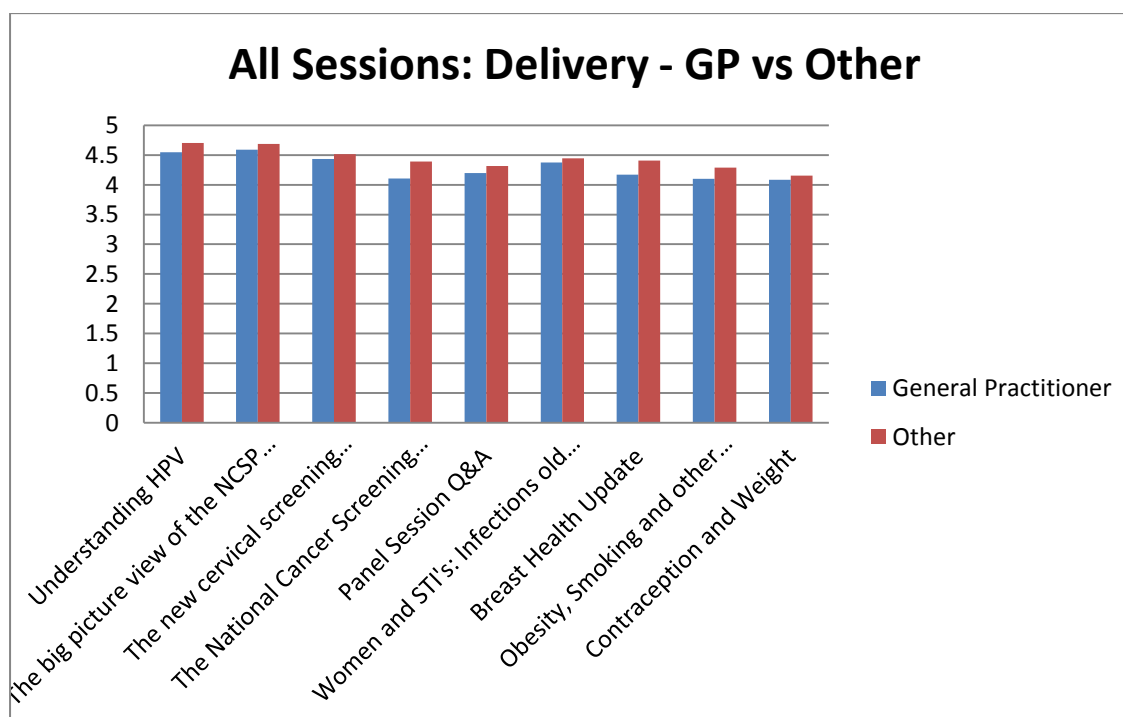
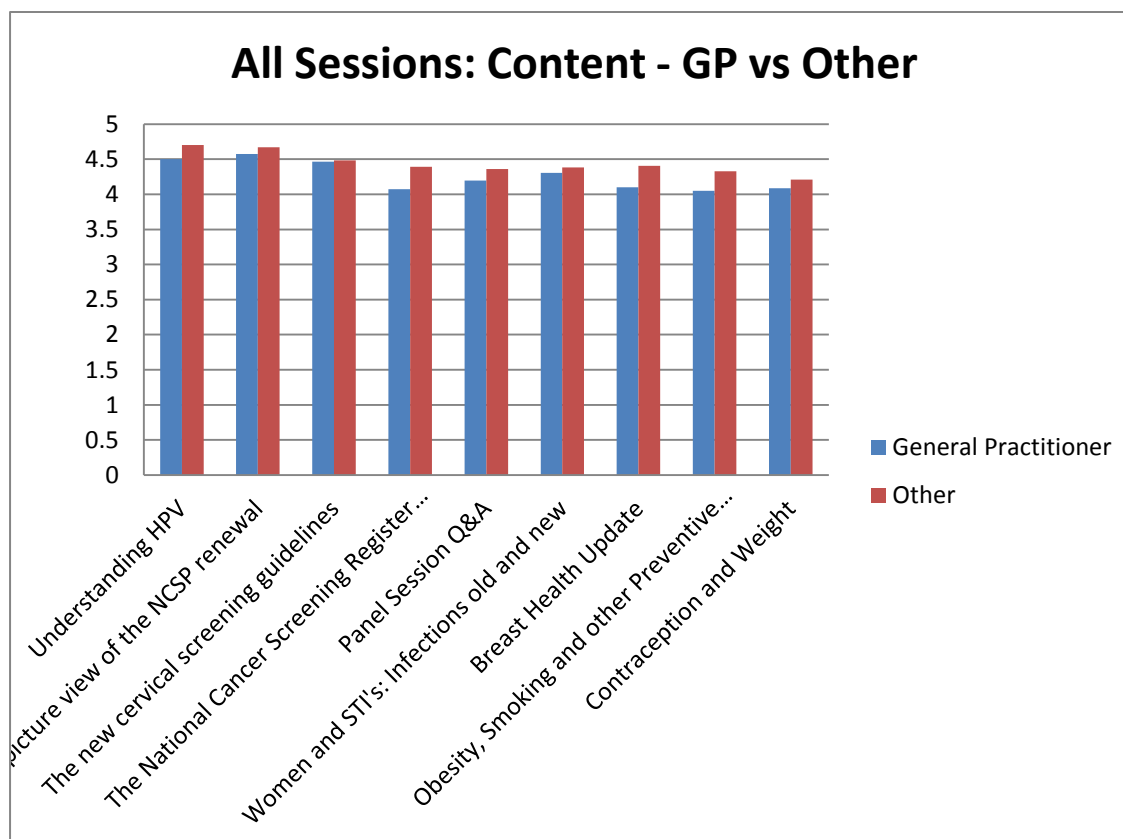
7.3 The GP Cohort Evaluation

84 of the 111 GPs who participated in this update day provided information through the evaluation mechanism (76%). This is a very strong response from GPs. 60 of the 68 GPs who attended in person (88%) provided an evaluation response and 24 of the 43 GPs who participated through live streaming provided an evaluation response (56%). The response rate of GPs is high compared to the overall cohort, and particularly so for who attended face-to-face.

GPs consistently rated all sessions very highly. The graph below illustrates the response rates for all sessions (content and delivery).



Of note, GPs rated the content of the sessions slightly lower than the remainder of those who attended the update however they rated the delivery almost exactly the same.



8.0 Lessons learnt

While the response to this inaugural workshop has been overwhelmingly positive, every event offers areas for reflection and improvement. The following paragraphs illustrate lessons learnt from staging this inaugural update.

Live streaming is useful and cost effective. Participation rates demonstrate that live streaming is helpful for those unable to attend in person. This was especially relevant for GPs from areas other than the South East corner of Queensland. Additionally, the cost of live streaming, per person, is less than the cost of food and venue hire when the number of live streaming registrants moves above 60.

Interactive sessions are necessary. Even with the large number of participants in the room, there was value in the panel discussion and the time devoted to questions at the end of each session. Some participants suggested they would have preferred more interaction with group discussions however the structure of the day did not warrant this level of participation.

Electronic evaluation works if well structured. The response rate of the evaluation of the update was strong. This was assisted by the mechanisms put in place to introduce participants to the concept and by sending links on the day prior to the event. Additionally, having ready access to the individual links to the electronic evaluation, by Iris Education personnel, was an effective back-up for those who had difficulty finding the links. Also, having paper-based evaluation documents ready for those who found the electronic tool difficult was useful and contributed to the strong response rate (28 paper versions were distributed). Finally, access to an electronic platform (eg smart phone, tablet) during the event or after the event was not a barrier to completion of the evaluation.

Assistance with use of technology is required to be built into the costing of any event. This update used technology for its registration, for live streaming, and for evaluation. Whilst the majority of participants interacted with this technology seamlessly, there were phone calls, emails and 'corridor tutorials', covering all these types of activities with a small number of participants. It is estimated that 10% of the registrant cohort made contact with administrative personnel about some aspect of use of technology (eg registration online not submitting; evaluation link not working; tablet not working etc) before, during and after the event. While Iris Education anticipated this level of interaction and included it in the costing for the event, the ability to use technology in the manner assumed through this update shouldn't be overestimated.