



CHEER: An approach to CBE evaluation

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- Founded in 2003
- Research team
- 9 health sciences faculties in SA
- Funded from MRC, Atlantic Philanthropies, NRF
- “What are universities doing to increase the supply of health professionals to rural and underserved areas”
- Continued collaboration despite funding ending



- 4 main initial projects:
 1. Peer review – firstly a curriculum audit to look at elements of the curricula which would contribute to graduates choosing to practice in rural or underserved areas, followed by a review of partnerships to achieve CBE objectives (SAMJ article)
 2. A Systematic review of the literature (Cochrane review; RRH article.)
 3. A Qualitative study to understand the influences on where health professionals choose to practice, as a basis for the 4th (SAMJ article)
 4. A Case-control study to evaluate the educational factors that influence health professionals with regard to their site of practice in South Africa (SAMJ article)

Peer review process: starting out

- Institution “volunteers” for Peer Review
 - CHEER member (the host) from institution negotiates with faculty
- Focus of review agreed
 - 1st vs 2nd round
 - Which programmes
 - Which partners
- Peer review team formed
 - At least 3 members plus a support person
 - Team lead chosen
- Protocol developed
 - Generic protocol used
 - Adaptation for local context
 - Submitted by host to local ethics committee (IRB)

Peer review process: Preparing

- Sample
 - Host identified participants in consultation with team
 - Respondents drawn from faculty staff who chair relevant committees, heads of programmes and relevant departments, staff involved in community-based education and curriculum development or related fields, representatives of health service, education or NGO partners.
- Pre-visit questionnaire
 - Letter detailing the project, a questionnaire and a curriculum framework spreadsheet sent to participants before the visit.
 - Host collects responses and submits to team
- Logistical arrangements made
 - Time to suit the host institution
 - Host sets up schedule with specific appointments



Peer review process: The visit

- Planning on site:
 - Pre-visit questionnaires reviewed as basis for further questions in interviews
 - Team divided and allocated to tasks
- Data collection:
 - Document reviews
 - Semi-structured interviews
 - Focus group discussions
 - Observations during site visits
- Feedback
 - Immediate feedback to host faculty, in consultation with host member (who is not part of the peer review team)
 - Subsequent report developed and submitted to faculty



11 themes



	Score:	-10	0	+10
1	Faculty Mission Statement	R/U not mentioned	Some mention or indirect reference	Explicitly supportive
2	Resource allocation	Nil	Some staff & money but not enough	Sufficient staff & money for sustainability
3	Student selection	No policy R/U	Some policy re R/U	>25% Rural origin
4	First exposure	Final year if at all	Middle years	First year
5	Length of exposure	Nil	< 25%	>25% of pracs in R/U areas
6	Practical experience	Nil	Students watch & listen to others	Students hands-on & contributing

11 themes



	Score:	-10	0	+10
7	Theoretical input	Nil	R/U Mentioned	Critical reflection on R/U issues
8	Involvement with Community	“Tourism”-type Exposure	Engagement or Intervention	Ongoing joint reflection
9	Relationship with health service	Students are a drain / burden	Students are tolerated	Students’ input is welcomed & used
10	Assessment of students	No formal assessment for R/U learning	Assessment done but not pass/fail	Pass/fail contribution from R/U component
11	Research and Programme Evaluation	No programme evaluation or reflection	Evaluation done previously but not specific to R/U	Current educational research re R/U

Curriculum framework table

	Name of module /sub-programme	Content relevant to rural/underserved areas	Educational Methods	Site of learning	Duration of activity	Depth of community-based learning	Assessment	Pass / Fail ?
Year level	A planned unit of learning activity	Major health problems Poverty and health Equity & human rights Primary Health Care Other	Lectures Tutorials Experiential learning/Pracs Project-based learning Other	University (classroom/lecture theatre/lab) Tertiary or Regional Hospital District Hospital CHC's and Clinics Community (outside of health facilities)	Hours Days Weeks	Exposure Engagement Active Participat. Collaborative Participat. Reflection Evaluation	Is the learning activity assessed or not ? (Y/N)	Can students fail the module ? Y/N
Example	Community Diagnosis & Intervention	Topic of Project to be decided in collaboration with community reps.	Project-based learning	Site to be determined in collaboration with community reps. The course requires that it must be at a CHC or Community (outside of health facilities) eg. School	1 day per week X 6 months	Collaborative Participat. plus Evaluation	yes	yes
1st year								
2nd year								

Lessons

- Helpful tools
 - Can be adapted
- Mutual learning
- Common problems identified
- Peer pressure useful
- Creates a marker for ongoing evaluation (internal or external)
- Specific focus important
 - Danger of covering too much (depth and breadth)
- Producing a report is difficult without a secretariat!

