RHRC CONSORTIUM MONITORING AND EVALUATION TOOLKIT

TRAINING ASSESSMENT PROTOCOL

Purpose The purpose of assessments of participants in a training program is to obtain information on participants' knowledge, attitudes and practices upon entry into the training program and at the conclusion of the training program. Training assessments allow you to measure the effectiveness of the training program in improving participants' competency to conduct their work.

Description Training assessments may take many forms depending on the task to be assessed. They can range from written tests of knowledge, to focus group discussions of attitudes, to observed demonstrations of skills.

In planning training assessments, you must consider:

- the relevant characteristics of trainees: Are they non-literate (e.g. traditional birth attendants), highly educated (e.g. post-graduate physicians) or somewhere in-between?
- the content of the training program: For example, are you training people in family planning counseling techniques, in manual vacuum aspiration for incomplete abortion, or another content area?
- how pre- and post-training assessment data will be collected, recorded and analyzed.
- how results will be reported and to whom.
- how to provide feedback to the participants.

Note: This protocol is intended to help you assess the effectiveness of your training. It assumes you have already designed a training program to address the competencies staff need to do their jobs. For guidance on designing a competency-based training program, click *here*.

Ethical Considerations

Approvals
Before you collect data from participants, you may need to obtain certain permissions for ethical, political and logistical reasons. However, it is generally accepted that an assessment of learning needs or educational accomplishment does not require an approval process.

Informed Consent
As above, the criteria that apply to informed consent from interviewees do not apply to training program participants.

Privacy
If oral examinations are used, they should be conducted in a private setting. No one other than the examiner(s) should be able to hear the participant's responses.

Confidentiality
It is not necessary to know individuals' names for simple workshop pre-training and post-training assessments. Trainees can label their papers with a "unique identifier" so the pre- and post- training scores can be compared while trainees remain anonymous. (For example, if a trainee chooses "Mango" as her unique identifier, then her pre- and post-assessment scores can be matched without revealing her name.)

An assessment leading to certification or other decision-making process based on performance, however, does require the name of the candidate. The examiner(s) may only discuss the findings of an individual participant with others responsible for the participant's work assignment. For example, if a participant fails a certification exam, the examiner is obliged to inform the certification board.

Data Collection Forms

The questions and methods in any training assessment should be based directly on the competencies which are required by the participants' jobs and which are the topics of the training program.

In an assessment, knowledge is generally assessed through a question and answer format which can be written or oral. Skills and behaviors are best assessed by a facilitator using a checklist to observe a demonstration. Attitudes can be assessed through role plays, facilitated small group discussions or participants' responses to a series of questions regarding attitudes toward the topic of interest.

The best method of assessment in a particular situation is one that can be shown to be valid and reliable, carried out with the resources available and tailored to the trainees' language and culture.

All assessment tools should be pre-tested.
The questions and methods should be pilot tested with a group of participants similar to the ones to be trained.

Click here for a sample pre- / post- training assessment.

Sampling Plan

Normally, all participants in a training program will complete a pre-training assessment at the beginning of the training workshop. A post-training assessment will be completed by all participants at the conclusion of the training workshop.

In a longer training course covering multiple topics, you may choose to conduct a pre-unit and post-unit assessment for each topic in addition to the overall pre-training and post-training assessments.

A training assessment also could be conducted among a general population of health workers to determine their needs for in-service education to up-grade or refresh job skills. Sampling of large numbers of health workers should follow the standard guidelines for the methodology undertaken, i.e., population-based survey or focus group discussion where the category of health worker is the population of interest.

Data Collection Procedures

Location

Written training assessments should be held in a room with sufficient tables, chairs and space to allow trainees to be comfortable and to complete their assessment without interference.

Demonstrations of skills should be conducted one-by-one in a simulation laboratory using dummy teaching models. It is inappropriate to ask students to demonstrate new skills on human subjects until the students have demonstrated satisfactory ability using teaching models.

Role-plays and focus group discussions to assess attitudes and sensitive skills such as counseling should be conducted in a private setting with only a few trainees at a time.

Note:

It can sometimes be challenging to avoid students' sharing of answers. In a short training workshop this may not be of significant concern. However, in programs preparing health workers for certification and licensure strong efforts must be made to avoid copying.

Facilitator/ Trainer Characteristics

The training team should discuss the characteristics needed by a facilitator or trainer. They should consider:

- minimum required education or certification level,
- language and communication skills in appropriate language(s),
- good facilitation skills,
- comfort level with reproductive health topics,
- excellent familiarity with topics to be assessed,
- fundamental respect for the dignity of participants,
- previous experience with training activities.

Training of Facilitators / Trainers

Allow at least two full days of training for facilitators to learn training assessment techniques. If you have a large training project then it is recommended that you allow five full days. The training should include practical exercises in developing training assessment forms and in administering training assessments.

Time frame

The time set aside for assessment depends on the method to be used, the number of participants and the content to be covered. A written assessment for a short training course should take about an hour or less. Skills demonstrations may take 30 minutes per trainee. Role plays or facilitated group discussions for assessing attitudes would take about an hour per small group of trainees.

Examinations for licensure or certification may take several days.

Analysis Plan

After each assessment activity, the training team should meet to debrief. Quantitative data should be compiled, analyzed and summarized. Qualitative experiences should be summarized and patterns of responses noted. If specific participants require additional attention, the facilitators should follow up. Standard scoring systems and rankings should be devised during pre-testing that are then applied to results of actual assessment activities.

Use of Data An assessment conducted at the beginning of the training activity (the "pre-training assessment") will provide information on the strengths and weaknesses of trainees and can help the facilitator tailor course content and methodology to suit their needs.

The "post-training assessment," which should be the same tool as used in the pre-training assessment, is done at the end of the training activity. It measures what trainees know after they have participated in the training. By comparing the pre- and post-training measures, you can determine whether the training program has successfully addressed participants' areas of weakness. If many participants still show weaknesses at the end of the program, then the training program may need revision. The weaknesses that remain at the end of training should be addressed during follow-up on-the-job training with individual participants.

Results from the assessments should be reported as they reflect the objectives of the training activity. All the information collected should be relevant to the creation or modification of training programs to meet the competencies required by health workers in their everyday jobs.

Dissemination

Findings from the pre-training assessment should be communicated to the participants as soon as possible, preferably on the second day of training.

At the conclusion of training, comparison of pre-training and post-training assessment scores should be documented in the training report. This information should then be used to plan future activities – perhaps in-service training for strengthening competencies shown to be less than optimally learned in the workshop – and revisions to achieve more successful workshops in the future.

Additional Resources

Click here for a sample training handbook: *Guide to Participatory Training for TRAINERS of Primary Health Care Workers*.

If you have internet access, check www.rhrc.org for access to the RHRC Consortium's *Moving from Emergency Response to Comprehensive Reproductive Health Programs: A Modular Training Series.*