EVALUATION ABSTRACT: The Second National Conference on Patient Safety and Health Information Technology in Ambulatory Primary Care, October 1-3, 2008

There were 68 conference participants and 29 completed evaluation surveys (despite multiple requests for completed evaluations over the three days of the conference). This abstract is based on the 29 completed evaluations. Within the Likert Scale used for this evaluation, 1=poor, 5=excellent. Almost two thirds of conference participants reported over 15 years in their professions, 80% were more than 35 years old, 82% were based at universities, 37% were pediatricians, 15% internists, 11% family physicians, remainder were in nursing, behavioral health or research.

Overall value of the conference was rated a 4 or 5 by 81.4% of participants and almost 90% believed (4 or 5) that the conference met its stated objectives. Knowledge gained via the conference, appropriateness of speakers, knowledge of speakers and communication skills of speakers were all rated 4 or 5 by 80%-90% of participants. The plenary sessions were very well received with value and overall effectiveness of those sessions receiving 4 or 5 from 80-100% of participants. The exception was the final plenary on education in patient safety/HIT which received 40-50% 2 and 3s, this may be due, in part, because the invited speaker was unable to make the session (personal health concerns) and his comments were shared with meeting participants by a colleague from the same college. The concurrent sessions were also well received. Most received 80-90% 4 and 5s. The Medication Safety concurrent session was the most highly rated with over 90% 4s and 5s.

There were 23 comments regarding “most helpful aspects of the conference”. They included: “good opportunity for networking”, quality of presentations high”, “This conference was enormously helpful to me”, “this conference is a must for future repeats”, “it was great, happy I came”, “conference size was perfect-it allowed lots of Q/A and networking”. Many comments on networking across institutions and disciplines.

There were 15 “least helpful” comments including: “topics seem to be very different”, “too small with variable presentations”, “I had to choose between two great sessions running at the same time”, “rushed a lot, room was too large….too warm”, “educational plenary was dull”, “There are not enough conferences that focus on patient safety in the ambulatory care setting, I was very excited to receive (sic) in on this”.

There were 17 comments/suggestions for future conferences, including: “you need a wider audience”, “increase focus on EMR and patient safety”, “more bedside patient safety issues”, “Add patient home concept to meeting”, “do it again in two years”, “more what to do”, “it would be helpful to include speakers on how to implement patient safety”, “do this, but separate it temporally from AHRQ OR have it as a ‘theme’ within AHRQ meeting OR one day add-on to AHRQ”