



Managing Children with Cerebral Palsy  
Open Online Course (MCCP MOOC)

# Evaluation Report

December 2016

## Summary

In September/October 2016 Physiopedia and the International Committee of the Red Cross (ICRC) successfully delivered the Managing Children with Cerebral Palsy Massive Open Online Course (MCCP MOOC) via the Physiopedia Plus online learning platform.

**Course Type** - Open, Online

**Course Co-ordinators** - Barbara Rau, Rachael Lowe

**Collaborating Partners** - International Committee of the Red Cross (ICRC) and Physiopedia

**About this course** - This online course covers basic theoretical knowledge of managing children with cerebral palsy

**Who was invited to take part** - Physiotherapy and Physical Therapy clinicians, students and assistants; other interested professionals such as prosthetists/orthotists, occupational therapists, nurses or medical doctors interested in this subject were welcomed to participate.

**Date that it ran** - 5 September to 31 October 2015

**Time commitment** - 24 hours over 8 weeks

**Requirements** - Participants were required to complete online learning activities, engage with additional resources, take part in the conversation online and complete the course evaluation.

**Assessment** - There was a final quiz and participants were asked to complete an assignment to demonstrate their learning.

**Awards** - Completion certificate plus 24 Physiopedia Plus (PP+) points.

**Accreditation** - The course was accredited by the South African Society of Physiotherapy (SASP)

## Acknowledgements

The MCCP MOOC was developed and funded as a collaboration between Physiopedia and the International Committee of the Red Cross.

Key content contributions were made by:

- Cerebral Palsy Association, South Africa
- Enablement, Netherlands

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- Ghassan Husni Ali, P&O, ICRC, Iraq
- Naomi O'Reilly, PT, Physiopedia, Ireland
- Estibaliz Garcia, OT, Handicap International, Belgium
- Lurinda Prinsloo, OT, Cerebral Palsy Association, South Africa
- Roelie Wolting, PT, Enablement, Netherlands
- Simon Lalor, P&O, Royal Children's Hospital, Melbourne, Australia
- Maarten Abeel, PT, ICRC, North Korea

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## Introduction

During September and October 2016 Physiopedia ran their fifth Massive Open Online course titled Managing Children with Cerebral Palsy (MCCP MOOC). The MCCP MOOC was developed and delivered as a collaboration between Physiopedia and the International Committee of the Red Cross (ICRC).

The aim of the MCCP MOOC was to train the distributed team of ICRC staff and partners to have a basic understanding of the theoretical knowledge that underpins the management of children with cerebral palsy. The content of the course was designed appropriately for physiotherapists in any global context, all healthcare workers were invited to participate. Being open for anyone to participate allowed for global conversation around the topic and enabled peer-to-peer learning across contexts and experiences.

The six week course presented different topics each week through a variety of learning activities to suit all learning styles. The required learning activities each week were proposed to take between 4-6 hours depending on the participant's learning style and optional activities were provided should the participant wish to take part in additional learning. A two week orientation period before the course started provided participants with an opportunity to become familiar with the delivery platform and the topic via the course textbooks.

The course was delivered through the Physiopedia Plus (PP+) online learning platform, an innovative platform specifically developed to deliver online education and provide learners with a personalised learning dashboard. Each week the new learning activities were released on a specific course page and participants were informed by email and social media. As participants engaged with each learning activity it was recorded and displayed in their own personal learning dashboard.

To complete the course participants were required to complete all the identified required learning activities, a final quiz that tested knowledge and an assignment to demonstrate their learning. On completion of the course the participants could download a completion certificate and also export a record of their learning from their activity log.

This report evaluates the experiences and engagement of the participants on the MCCP MOOC.

## Aim of the Course

This course aims to align global understanding of Cerebral Palsy. It will provide a framework to develop introductory level principles of the management of children with Cerebral Palsy relevant in all contexts. The global network formed through this course will allow for shared knowledge and experiences to support good health care and better quality of life for children with Cerebral Palsy around the world.

## Course Learning Objectives

At the end of this course participants should be able to:

1. Describe how the brain influences movement and posture in individuals with Cerebral Palsy.
2. Differentiate between normal child development and the development of a child with Cerebral Palsy.
3. Recognise and appropriately evaluate a child with Cerebral Palsy.
4. Describe the global prevalence of Cerebral Palsy.
5. Describe the roles of the interdisciplinary team working with a child with Cerebral Palsy.
6. Explain different therapeutic approaches to managing a child with Cerebral Palsy
7. Demonstrate optimal positioning for a child with Cerebral Palsy.
8. Demonstrate good handling of a child with Cerebral Palsy.
9. Describe methods for appropriate communication with a child with Cerebral Palsy and explain the clinical reasoning for these.
10. Describe methods for appropriate feeding of a child with Cerebral Palsy and explain the clinical reasoning for these.
11. Explain the importance of appropriate positioning and stimulation during everyday activities and play.
12. Demonstrate activities that promote communication, movements, social and emotional skills, and learning.
13. Explain principles underlying orthotic use and describe the most commonly used orthotics.
14. Describe specific therapeutic interventions for a child with Cerebral Palsy.
15. Recognise the challenges faced by an individual with Cerebral Palsy through the lifespan.

## Intended Audience

This course is suitable for all Health Care Professionals especially Physiotherapy or Physical Therapy Professionals including clinicians, assistant or students who have a good understanding of the key principles of Physiotherapy but little prior experience in Cerebral Palsy. It will also be of interest to any professionals (e.g. Prosthetists, Orthotists, Nurses, Occupational Therapists, Speech Therapists, Medical Doctors) motivated to upgrade their knowledge on Cerebral Palsy.

## Cost to participants

The course was free to all participants.

## Demographics of the participants

### Country

14,010 participants formally registered for the course before the end date of 31 October 2016. They represented 179 countries (see Appendix 1). The most represented countries were:

|                |       |
|----------------|-------|
| India          | 1,912 |
| Egypt          | 1,428 |
| Pakistan       | 1,048 |
| United Kingdom | 703   |
| Nigeria        | 690   |
| United States  | 635   |
| Saudi Arabia   | 560   |
| Canada         | 550   |
| South Africa   | 512   |
| Australia      | 466   |

### Profession

84% were physiotherapists.

|                         |        |
|-------------------------|--------|
| Physiotherapist         | 11,759 |
| Occupational Therapist  | 749    |
| Other                   | 722    |
| Medical Doctor          | 405    |
| Prosthetist / Orthotist | 237    |
| Nurse                   | 143    |

### Role

57% were clinicians and 25% were students.

|            |        |
|------------|--------|
| Clinician  | 11,759 |
| Student    | 3,468  |
| Educator   | 696    |
| Assistant  | 658    |
| Manager    | 559    |
| Researcher | 240    |

## ICRC staff and partners

ICRC staff and partners from countries where ICRC is running and health/physical rehabilitation projects, such as Democratic Republic of Congo, Syria, Bangladesh or Mexico were encouraged and supported to participate.

## Platform

The course was described through a page on Physiopedia ([http://www.physio-pedia.com/Managing\\_Children\\_with\\_Cerebral\\_Palsy](http://www.physio-pedia.com/Managing_Children_with_Cerebral_Palsy)). This page was visited a total of 50,311 times before the final date of the supported course on 31 October 2016. This page directed participants to set up an account with Physiopedia Plus where the course was delivered. Participants had to login to this platform to access the course.

Unique individuals that accessed at least one learning activity.....3,639  
 Total learning activities engaged with.....123,700

## Course textbooks

There were three course textbooks. The copyright owners made online access to these books free for the duration of the course:

1. Finnie NR. Handling the young child with cerebral palsy at home. Elsevier Health Sciences; 1997.
2. Shepherd RB. Cerebral palsy in infancy. Elsevier Health Sciences; 2013 Sep 20..
3. Hinchcliffe A. Children with cerebral Palsy: A manual for therapists, parents and community workers. SAGE Publications India; 2007 Feb 6.

Participants were particularly grateful for this aspect of the course. The publishers have reported that it is evident that making books available online in this way during an online course has a significant impact on direct sales of the hard copy of the book.

## Discussion Forum

Participants were required to participate in the discussion forum on a weekly basis. This was made a requirement as it provided a rich learning experience through self-reflection on learning and exposure to global discussions about cerebral palsy. This was the task that participants found most difficult to complete.

The discussion forum was hosted on the Physiopedia Plus platform where participants were asked to comment on the weekly guided discussions. It was clear that not all people engaging with the course joined participated in the discussions.

|   |        |
|---|--------|
| Number of people who introduced themselves in the forum .....     | 2,628  |
| Number of people that contributed on a weekly basis (median)..... | 1,335  |
| Total number of discussion posts.....                             | 23,074 |

## Quizzes

Each week participants were given the opportunity to assess their knowledge and understanding of the topic through multiple-choice quizzes. Participants received immediate feedback on right and wrong responses making this a rich learning experience.

In the final week participants were invited to attempt the final multiple-choice quiz. This quiz was designed to assess knowledge and no feedback was given. The pass mark was 80% and they could attempt the quiz as many times as they liked.

|   |       |
|---|-------|
| Number of individuals that attempted the quiz ..... | 1,066 |
| Number of quiz attempts .....                       | 2,397 |
| Number of individual passes .....                   | 977   |

## Final Assignment

Reflecting on their learning and using the knowledge gained throughout the course participants were asked to submit an assignment (see Appendix 2 for demographics).

|   |     |
|---|-----|
| Completed the assignment before 31 Oct 2016 ..... | 784 |
| Passed assignment .....                           | 712 |

Failed assignments ..... 72

Participants were able to choose from 5 different assignments which allowed for different academic skills and learning styles. The patient case study and the exercise programme were the most popular assignments:

|                                |     |
|--------------------------------|-----|
| Patient case study             | 320 |
| Exercise programme             | 200 |
| Knowledge translation resource | 81  |
| Physiopedia page               | 70  |
| Discussion summary             | 54  |
| Pilot project                  | 40  |
| Training resource              | 18  |

## Assessment

In week 6 participants were directed to complete 2 final tasks that were assessed. Provided that they passed the quiz and the assignment, and engaged with all the required learning activities they were considered to have passed the course.

|            | Completed | Passed |
|------------|-----------|--------|
| Final quiz | 1,066     | 977    |
| Assignment | 784       | 712    |

## Certificates

Course completion certificates with 24 PP+ points were provided by Physiopedia to all participants that passed the course.

## Course Accreditation

The South African Physiotherapy Society (SASP) accredited the course and awarded CEU points to South African physiotherapists.

## Course Evaluation

Participants were asked to complete an online course evaluation at the end of the course (see specific responses in Appendix 3).

The number of participants who completed the evaluation ..... 973

Participants responded positively about the course (see Appendix 4).

They particularly liked:

- The videos and case studies, the quizzes to test knowledge, the Physiopedia pages.
- They also like the ability to converse and learn from with peers all over the world.

Aspects that some participants did not enjoy included (see Appendix 5):

- The amount of work to complete each week, it was often stated that there was too much reading.
- The length and lack of diversity of the videos.

What is obvious from the feedback is that there are many different learning styles that partake in the course for example some people love the reading and others thoroughly object to it, some love the videos and ask for more others say they are lengthy and boring.

## **Impact of group work**

We asked people to let us know of any group work that took place in parallel to the course. We were pleased to see several dedicated groups that used group work for peer support and practical skills. One example of this can be read about here - <http://www.physiospot.com/2016/11/29/stories-from-goma-lets-continue-to-overcome-educational-barriers/>

## **Impact on clinical practice**

Many people stated that their clinical practice had been positively affected (see Appendix 6).

## **Future**

The plan is for this course to become part of the Global Health Certification that Physiopedia is developing. We are currently seeking funding to support this objective.

## **Contact details**

For further information, please contact:

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## Appendix 1 – Course participants countries

|                       |      |                           |    |                        |    |
|-----------------------|------|---------------------------|----|------------------------|----|
| India                 | 1912 | Romania                   | 61 | Suriname               | 18 |
| Egypt                 | 1428 | Israel                    | 57 | Japan                  | 18 |
| Pakistan              | 1048 | Indonesia                 | 57 | Botswana               | 18 |
| United Kingdom        | 703  | Finland                   | 56 | Czech Republic         | 16 |
| Nigeria               | 690  | Chile                     | 55 | Libya                  | 16 |
| United States         | 635  | Malawi                    | 48 | Mauritius              | 14 |
| Saudi Arabia          | 560  | Italy                     | 46 | Bahrain                | 13 |
| Canada                | 550  | Brazil                    | 45 | Guyana                 | 12 |
| South Africa          | 512  | Fiji                      | 42 | Somalia                | 12 |
| Australia             | 466  | China                     | 41 | Lithuania              | 11 |
| Malaysia              | 288  | Cyprus                    | 38 | Sweden                 | 10 |
| Palestinian Territory | 235  | Iraq                      | 37 | Papua New Guinea       | 10 |
| Jordan                | 211  | Colombia                  | 37 | Haiti                  | 10 |
| New Zealand           | 170  | Cameroon                  | 37 | Latvia                 | 10 |
| Bangladesh            | 142  | Hong Kong                 | 36 | Sierra Leone           | 10 |
| Afghanistan           | 142  | Malta                     | 36 | Korea                  | 10 |
| Myanmar               | 134  | Ethiopia                  | 35 | Iceland                | 9  |
| Ghana                 | 133  | Yemen                     | 33 | Puerto Rico            | 9  |
| Sri Lanka             | 132  | Estonia                   | 31 | Russian Federation     | 8  |
| Philippines           | 127  | Rwanda                    | 31 | Madagascar             | 8  |
| Ireland               | 120  | Albania                   | 31 | Solomon Islands        | 8  |
| Jamaica               | 120  | Hungary                   | 30 | Algeria                | 7  |
| Vietnam               | 115  | Oman                      | 30 | Swaziland              | 7  |
| Syrian Arab Republic  | 115  | Germany                   | 29 | South Sudan            | 7  |
| Kenya                 | 113  | Burundi                   | 28 | Denmark                | 7  |
| Korea, Republic of    | 104  | Kuwait                    | 28 | Bosnia and Herzegovina | 7  |
| United Arab Emirates  | 98   | Ukraine                   | 28 | Cote d'Ivoire          | 7  |
| Zimbabwe              | 95   | Switzerland               | 27 | El Salvador            | 6  |
| Nepal                 | 89   | Belgium                   | 27 | Serbia                 | 6  |
| Greece                | 87   | Croatia                   | 26 | Lao                    | 6  |
| Uganda                | 84   | Trinidad and Tobago       | 26 | Bulgaria               | 23 |
| Zambia                | 83   | Taiwan, Republic of China | 26 | Poland                 | 22 |
| Thailand              | 78   | Cambodia                  | 25 | Portugal               | 22 |
| Qatar                 | 74   | Iran, Islamic Republic of | 24 | Namibia                | 22 |
| Singapore             | 72   | Netherlands               | 23 | Congo                  | 21 |
| Turkey                | 70   | Bulgaria                  | 23 | Bahamas                | 6  |
| Sudan                 | 68   | Poland                    | 22 | Dominican Republic     | 6  |
| Tanzania,             | 67   | Portugal                  | 22 | Antigua and Barbuda    | 6  |
| Lebanon               | 66   | Namibia                   | 22 | Macao                  | 5  |
| Mexico                | 63   | Congo                     | 21 | Grenada                | 5  |
| Spain                 | 63   | Norway                    | 20 | Bhutan                 | 5  |
| France                | 62   | Costa Rica                | 20 | Slovakia               | 5  |

|  |   |                          |   |  |  |
|--|---|--------------------------|---|--|--|
| Burkina Faso                                 | 5 | Luxembourg               | 1 |  |  |
| Bermuda                                      | 5 | Micronesia               | 1 |  |  |
| Mongolia                                     | 4 | Central African Republic | 1 |  |  |
| Macedonia                                    | 4 | Gambia                   | 1 |  |  |
| Austria                                      | 4 | Moldova, Republic of     | 1 |  |  |
| Belize                                       | 3 | Greenland                | 1 |  |  |
| Argentina                                    | 3 | Cape Verde               | 1 |  |  |
| Ecuador                                      | 3 | Eritrea                  | 1 |  |  |
| Seychelles                                   | 3 | Mali                     | 1 |  |  |
| Turks and Caicos Islands                     | 3 | Tonga                    | 1 |  |  |
| Benin  | 3 | Saint Kitts and Nevis    | 1 |  |  |
| Peru   | 3 | Isle of Man              | 1 |  |  |
| Saint Lucia                                  | 3 | Georgia                  | 1 |  |  |
| Kyrgyzstan                                   | 3 | Tunisia                  | 1 |  |  |
| Slovenia                                     | 3 | Kazakhstan               | 1 |  |  |
| Mozambique                                   | 3 | Aruba                    | 1 |  |  |
| Tajikistan                                   | 2 |                          |   |  |  |
| Guatemala                                    | 2 |                          |   |  |  |
| Venezuela                                    | 2 |                          |   |  |  |
| Maldives                                     | 2 |                          |   |  |  |
| Azerbaijan                                   | 2 |                          |   |  |  |
| Togo   | 2 |                          |   |  |  |
| Lesotho                                      | 2 |                          |   |  |  |
| Morocco                                      | 2 |                          |   |  |  |
| Kiribati                                     | 2 |                          |   |  |  |
| Montenegro                                   | 2 |                          |   |  |  |
| Vanuatu                                      | 2 |                          |   |  |  |
| Brunei Darussalam                            | 2 |                          |   |  |  |
| Senegal                                      | 2 |                          |   |  |  |
| Saint Vincent and the Grenadines             | 2 |                          |   |  |  |
| South Georgia and the South Sandwich Islands | 2 |                          |   |  |  |
| Reunion                                      | 2 |                          |   |  |  |
| Barbados                                     | 2 |                          |   |  |  |
| Cayman Islands                               | 1 |                          |   |  |  |
| United States Minor Outlying Islands         | 1 |                          |   |  |  |
| Uruguay                                      | 1 |                          |   |  |  |
| Dominica                                     | 1 |                          |   |  |  |
| Niger  | 1 |                          |   |  |  |
| New Caledonia                                | 1 |                          |   |  |  |
| Norfolk Island                               | 1 |                          |   |  |  |
| Palau  | 1 |                          |   |  |  |

## Appendix 2 - Assignment Demographics

### Country

|                       |    |                              |   |                                       |   |
|-----------------------|----|------------------------------|---|---------------------------------------|---|
| India                 | 97 | China                        | 4 | Netherlands                           | 1 |
| Canada                | 60 | Lebanon                      | 4 | Lithuania                             | 1 |
| Nigeria               | 54 | Egypt                        | 4 | Belize                                | 1 |
| United Kingdom        | 45 | Norway                       | 4 | Cyprus                                | 1 |
| United States         | 40 | Brazil                       | 4 | Thailand                              | 1 |
| Pakistan              | 39 | Afghanistan                  | 4 | Guyana                                | 1 |
| Malaysia              | 37 | Switzerland                  | 4 | Burundi                               | 1 |
| Australia             | 35 | Iraq                         | 4 | Argentina                             | 1 |
| Palestinian Territory | 33 | Colombia                     | 4 | Tajikistan                            | 1 |
| Chile                 | 29 | Rwanda                       | 4 | Qatar                                 | 1 |
| Vietnam               | 24 | Finland                      | 3 | Sweden                                | 1 |
| Nepal                 | 24 | Indonesia                    | 3 | Malawi                                | 1 |
| New Zealand           | 23 | France                       | 3 | Russian Federation                    | 1 |
| Jamaica               | 20 | Macao                        | 3 | Trinidad and Tobago                   | 1 |
| South Africa          | 16 | Japan                        | 3 | Bhutan                                | 1 |
| Philippines           | 14 | Mauritius                    | 3 | Belgium                               | 1 |
| Ireland               | 13 | Jordan                       | 3 | Guatemala                             | 1 |
| Ethiopia              | 12 | Cameroon                     | 3 | Congo, The Democratic Republic of the | 1 |
| Mexico                | 11 | Bahrain                      | 3 | El Salvador                           | 1 |
| Singapore             | 11 | Uganda                       | 3 | Cayman Islands                        | 1 |
| Sri Lanka             | 8  | Estonia                      | 2 | Iceland                               | 1 |
| Malta                 | 8  | Bulgaria                     | 2 | Venezuela                             | 1 |
| Myanmar               | 7  | Tanzania, United Republic of | 2 | Mongolia                              | 1 |
| Italy                 | 7  | Somalia                      | 2 | Maldives                              | 1 |
| Germany               | 7  | Ecuador                      | 2 |                                       |   |
| Portugal              | 7  | Czech Republic               | 2 |                                       |   |
| Poland                | 6  | Zimbabwe                     | 2 |                                       |   |
| Korea, Republic of    | 6  | Hungary                      | 2 |                                       |   |
| Bangladesh            | 6  | Oman                         | 2 |                                       |   |
| Israel                | 6  | Suriname                     | 2 |                                       |   |
| Hong Kong             | 6  | Spain                        | 2 |                                       |   |
| United Arab Emirates  | 6  | Croatia                      | 2 |                                       |   |
| Greece                | 6  | Kenya                        | 2 |                                       |   |
| Sudan                 | 6  | Madagascar                   | 2 |                                       |   |

## Profession

|                                  |     |        |
|----------------------------------|-----|--------|
| Physiotherapy / Physical Therapy | 792 | 90.10% |
| Other                            | 29  | 3.30%  |
| Prosthetics / Orthotics          | 26  | 2.96%  |
| Medical Doctor                   | 18  | 2.05%  |
| Occupational Therapy             | 12  | 1.37%  |
| Nurse                            | 6   | 0.68%  |
| Occupational Therapist           | 2   | 0.23%  |

## Role

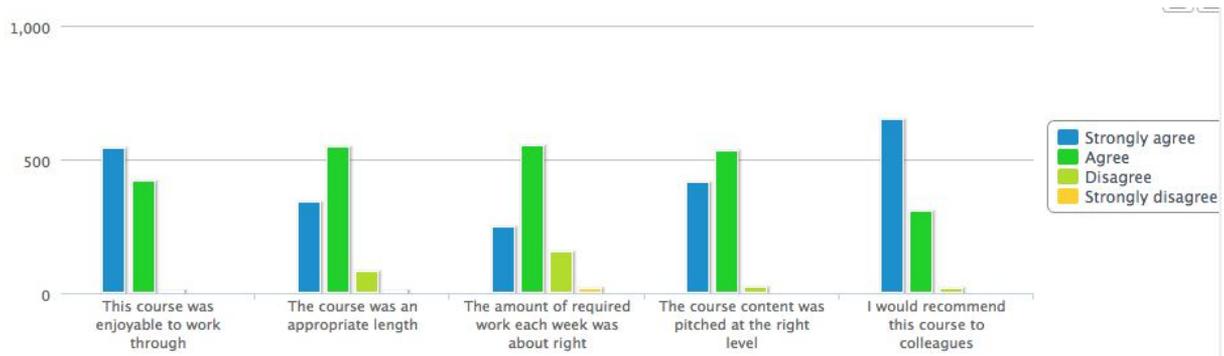
|            |     |        |
|------------|-----|--------|
| Clinician  | 546 | 62.12% |
| Student    | 130 | 14.79% |
| Assistant  | 62  | 7.05%  |
| Educator   | 61  | 6.94%  |
| Other      | 39  | 4.44%  |
| Researcher | 26  | 2.96%  |
| Manager    | 21  | 2.39%  |

## Years of experience

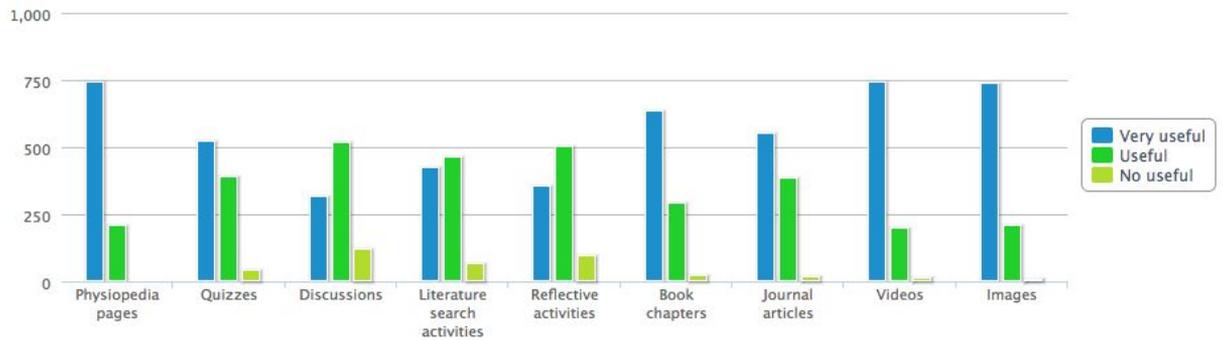
|               |     |
|---------------|-----|
| 1 to 5 years  | 270 |
| < 1 year      | 0   |
| > 5 years     | 878 |
| no experience | 159 |

## Appendix 3 – Course evaluation: specific responses

### General impressions of the course



### For learning how useful did you find the following



## **Appendix 4 – Course evaluation: what were the best elements of the course (selected responses)**

The variety of learning opportunities. Particularly liked the visual learning aids such as case study videos as this made it more clinically appropriate.

It covered a wide range of topics which were relevant to both children and adults with CP. It really made me think about my own practice and how I can use this information in my clinical setting.

I really enjoyed the case studies. The fact that I could watch and see, was very useful and interesting.

Easy to follow and record learning activities. Interesting and engaging activities such as the case studies and videos.

Everything, and I mean everything.

The forum discussion these is where the real deal is getting something useful from everyone, the positioning and handling part, the feeding and speech part, play therapy that I always overlooked.

The case studies and discussion forums.

The videos and readings.

The detail surrounding all the aspects of cerebral that needs assessing and treating. It was very detailed and explained in the best way possible, making it easy for anyone to understand and explain to others. It covered all the bases and even helped with great ideas for future treatment.

The links posted and the physiopedia pages recommended were very useful. The best element is doing this six week course, our knowledge has considerably increased.

I thoroughly enjoyed the wide range of therapies explored, rather than just focusing on physiotherapy.

Able to watch videos of hands-on intervention by experienced therapists, able to access related books, motivates me by tracking my percentage of progression.

I loved working through the case studies- it was a good way to put what we had learned in the week to use.

The quizzes at the end of each module that helps to challenge the very same information that was done. Excellently put together.

Organized well, I just open the email then can get all I need.

The video, Physiopedia pages were great and I learned a huge amount. The course was set at a good level and was very interesting.

The best elements were the different learning instruments including articles, book chapters, videos, and pages, also the holistic approach to present the topic.

I really enjoyed the tests. I believe that was the best way for us to make sure we have understand what we had studied.

I enjoyed everything during on the course but my best elements were the ones not taught to us in school such as communication, feeding, transition to adulthood, employment, orthoses, specific intervention.

I have got all the information about a holistic view on CP management in one course. This is not very common. The idea of a multi discipline and a multi level learning was very helpful. The wonderful videos were very educational.

All the information from various sources with books and articles, videos and interviews with people working in a variety of settings, especially thinking about communication, feeding, participation in ADLs and vocational activities / meaningful occupation as child grows up.

I enjoyed the physiopedia pages, they had so much information and also the discussions were very good, learned a lot from other physiotherapists and other health professionals.

The different approaches to handle cerebral palsy affected people was quite interesting. It gave a new insight and I am very eager to apply all of these in my practise and challenge myself to give all my so called patients, the best quality of life. This course was a door to all my questions and doubts. I have learnt so much and look forward to learn even more. Than You physiopedia for this wonderful opportunity and kudos to your time and effort to make this course a success.

Getting to know how different set ups are from different parts of the world is good.

The case studies and the video and image content was quite engaging.

The case studies and also the relevant journal articles we were linked to.

The discussion forums were great as I learnt a lot about different settings through this.

The videos were very interesting and informative. As well as experienced rehab professionals being part of the discussion forum.

The best element was that, it was well designed, everything was in a logical way - the reading, the watching and other things. Loved the quizzes!

I thought the layout of the course was fantastic, the information was grouped into areas that made sense and flowed easily into the next week's topics. I really enjoyed that there were a lot of different kinds of resources available, from videos to discussion forums and articles. It really helped with my learning.

the videos were very concise and easy to understand. Information was used as good refresher for many persons and gaining an insight of how others from different countries approach similar incidence.

I like the fact that nothing was assumed that we know. So basically we covered everything from scratch. There was a good balance between reading material, videos and images. For me it also covered areas that I had not had in my training eg orthotics plus assistive devices.

The course overall was very fun and helpful. The best element was the videos.

There were relevant, recent resources to back up the information. Consider it both a fantastic refresher and update. I enjoyed the more visual aspects of the course as I find it far easier to learn visually.

The required book chapter readings were long but forced me to deepen my understanding.

The videos were great for engaging the visual and auditory channels and showing the application of various concepts. Without them it would be hard to keep concentrating on just reading the material and trying to visualize its implications with the mind's eye.

The international context was excellent. Really enjoyed interacting and learning from a wide range of backgrounds and challenges.

## **Appendix 5 – Course evaluation: how could this course be improved (selected responses)**

Content was borderline too simple and repetitive at times. The course could have been less bulky by streamlining some resources and cutting out assumed knowledge of a health professional.

The forums were too large and it was impossible to read all or even most of the contributions. Consequently, it didn't feel like there is a group or a real discussion going on. To improve this the course participants must be divided into smaller groups/classes (say 20 people in each group), and the discussions should go on inside the group, starting from the initial introduction of the participants. In these intimate groups there is more possibility of interaction and group learning. Access to discussions of other groups may remain open if participants wish to read or react to posts of other group members.

I feel that this was way more than the 4 to 6 hours per week as advertised. As a working person this was a lot more than what was suggested and was therefore more than one could handle.

Videos of actual PT work in the various settings may be invaluable. This may allow the participants to witness what the course talks about as well as to compare what is seen to their own practice - an effective way to promote introspection and alteration of the clinical approach. These videos may cover parent education, assessment, hands-on treatment, use of technology or assistive devices, etc.

I also don't think that there should be so many discussions, and definitely not all the reflections.

The course is perfectly designed and user friendly it would be better if we have the option of accessing a week's course alone rather than all the course and scrolling to the desired week as we encountered problems when accessing through mobile devices

Give us more time as it's hard to keep up, especially when your working day and night.

More chapters from books made available.

Some of the physiopedia pages can be improved by enhancing resolution of images, some parts of the images were missing too.

Videos/Skype conversations were often too long and interest was lost. More emphasis on therapeutic intervention strategies/implementation and orthosis.

There was so much to get through. Some of the videos were so long and that meant they took ages to upload.

I believe the duration was not sufficient especially for young Physiotherapists who do not have enough self time.

Having more videos and case presentations.

I found it hard to fit in all the reading with working full time - would have liked some more time especially to explore more of the references.

I wish this course would have been a little mobile friendly as there were some videos which could show only half a screen and then I had to halt and switch over to my laptop which was a bit annoying

i think you should consider places like my country where internet sometimes is not that good so found it a challenge sometimes to watch the videos.

there should be more time, a lot of activities are to be completed in one week so the time is short increase the time.

Make it easier to track activity log, if you have missed something, it is difficult to see what you have missed.

More videos one treatment.

It might have been a bit too much things to do, it was difficult to find time to be more focused.

The only criticism I have is that for someone working full time, there was too much for one week. Ideal would have been the same contents but 10 days allowance! One did not want to rush it, yet one did not want to fall behind, so many additional articles were not read which I would have liked to have read.

If more videos were included. Reading can sometimes become boring and tiring.

More practical skills, online training, specific therapeutic interventions.

I would have liked actual discussion in the forums. It was actually very disjointed in my opinion, each added their own post without interacting or discussing the themes. Too many people involved for really good discussion.

The chapters from the books used were a bore mostly.

Could have been shown some treatment videos, not only theories.  
It was too much to read.

I think instead on articles and books focus on videos demonstration and images more.

I prefer having a one discussion for a week would have been better and also the reading content could have been minimized and more activities like quizzes can be helpful.

The length of the course was appropriate but the material given was too much to read, mostly for the people with jobs and hectic routine so shorts notes given on topics will be beneficial.

Internet access is required to watch the videos which can be difficult for those who do not have fast internet access.

Maybe a little bit of practical rehabilitation exercises.

Some of the readings were repetitive. And the some of the readings could be a little more concise without missing the important details of course.

More chapters from books made available.

Interview videos were far too lengthy and not able to provide a lot to the actual course materials. Physiopedia pages contained a lot of spelling and grammar mistakes. Forum unfortunately was not very helpful as it was more of a tool to get the participation rather than a true discussion as no one really had a back and forth discussion.

Try to make workshops.

If possible inclusion of more intensive video lectures on each topic component will be very beneficial both for experienced and novice practitioners.

Too big of a group to have a real discussion.

## **Appendix 6 - Course evaluation: how has the course changed your practice**

The course has helped me to feel more confident in my assessment and treatment of young adults with CP. Prior to completing this course, I always felt a bit out of my depth as the parents and the young people had spent a lot of time with physios over many many years and I felt inexperienced however this course has taught me to trust my abilities.

This course changed the entire approach towards cp, not only for me but with the application in clinical setting, also for my colleagues. I got to learn not about the treatment through material but with videos and practical approaches in different countries. especially the discussion forum really helped where different physiotherapist from all around the world shared their experiences.

Implementing so many things I learnt into my practice such as good positioning techniques and handling, the importance of a multidisciplinary approach for management, the importance of play therapy and so many other things and also making sure the parents are well educated about the condition.

Understanding of the child with cerebral palsy and given me resources to refer to when treating a patient with cerebral palsy. In my line of work it is likely CP will be a background condition of a patient admitted to hospital for an acute pathology however I now know how to approach the patient with cerebral palsy confidently with a few appropriate treatment alternatives up my sleeve

I think this course has been a great refresher for me in regards to CP in general and also allow me to think about other aspects of the child's life that a physiotherapist sometimes does not think about eg: swallowing, feeding and orthosis etc.

This course has allowed me to have a more well-rounded view of a child with cerebral palsy. As an occupational therapist working closely with PTs and SLPs I appreciated the opportunity to learn more about what they look for in children with a diagnosis with cerebral palsy. I believe this will allow me to work more collaboratively in the future.

I just feel really inspired to go and try all the things I've learnt about with the children with CP that I treat. I aim to try focus more on the family's goals, rather than my own therapeutic goals (which are often aimed at impairments, rather than activity and participation). The centre where I work does not have a ramp, and is rather inaccessible. I want to try advocate for a ramp to be built to improve accessibility for the children with CP that we treat.

It has broaden my perspective about CP patient,if they were given adequate attention from onset, the chance that they will live a good quality life is way higher.

I have learned a thousand ways to help people having children with cerebral palsy. It has made easier for me to examine the patient and get to the cause easily and the possible solution.

I learned how to apply my knowledge in broader settings and learnt more about other disciplines involved with management of CP which makes me a better equipped and more well rounded therapist.

I feel this course has opened my eyes to how I can do physiotherapy treatment that is meaningful, fits in with the daily activities and expectations of the family and child as well as incorporates all of the different aspects.

This course has widen my perspective and extend the areas of helping cerebral palsy children, not only body functions but participation, not only clinically but activities of daily living at home, not only exercises but play, not only childhood but adulthood, not only NDT but other task/goal-oriented interventions.

So much. I am changing my approaches to children, exercises, therapy, we have sponsored lots more children with CP to go to school!

The course helped me to put in a line everything I had learned and read all these years. It also provided me with some extremely useful tools like questionnaires, ICF etc. which would help me work better as a professional.

This course has clearly made my future, a base on which I can improve my skills and knowledge.

Will feel more confident advising patients when I qualify and on practice placement in things like positioning, ADLs and play. I understand more about different professional roles involved with CP.

I have been working for a long time already with CP, but the course reminded me a lot of things that I was forgetting about already - especially the communication and everyday life. It got me thinking more about the whole person again, not only one or two problems that the person has. It also gave me understanding about what is the global situation in handling CP as it was a course all over the world it very well gave nice platform to be on.

Prior to the course, I knew next to nothing about cerebral palsy, let alone how to treat and manage it. The course has changed my clinical practice in every way, as I now feel a lot more confident if I were to assess and treat a CP child.

It has taught me that the therapy part is just one aspect of our job, and we need to value the home situation and give advice on all fronts eg home, school, transportation, daily activities etc.