

# Lessons learnt from a complex, multi stakeholder, online survey

Andrea Hurwood<sup>1</sup>, Catherine Barrett<sup>2</sup>, Mark Minnery<sup>3</sup>

1 Allied Health Professions' Office Queensland, PO Box 2368, QLD, 4006, [andrea.hurwood@health.qld.gov.au](mailto:andrea.hurwood@health.qld.gov.au)

2 Allied Health Professions' Office Queensland, PO Box 2368, QLD, 4006, [catherine.barrett2@health.qld.gov.au](mailto:catherine.barrett2@health.qld.gov.au)

3 Allied Health Professions' Office Queensland, PO Box 2368, QLD, 4006, [mark.minnery@health.qld.gov.au](mailto:mark.minnery@health.qld.gov.au)

## Background (52)

A survey was developed to assess changes in key performance indicators for allied health professionals performing expanded scope of practice activities in the Queensland public health system. Responses were mixed and the survey received wide criticism. The survey experience has been collated in order to help inform future iterations and wider audiences.

## Methods (55)

Draft surveys were developed in word then transferred to survey monkey. Following pilot testing by key stakeholders, surveys were distributed to Directors of Allied Health in all Hospital and Health Services (HHSs). Responses were collated, including feedback on the survey. Interviews, open comments and external stakeholder analysis were then received post-implementation on the survey experience.

## Results (107)

Despite high response rates various issues were identified with the survey and its collection process. Primary criticisms revolved around long times needed to both collect data and fill in the survey. Key missing functionalities, such ability to enter decimal places in figures, the ability to access the survey more than once, and the ability to sub-sample the survey to different functional areas were identified as barriers to completion and quality data collection. Key definitions throughout the survey were unclear causing confusion and necessitating clarification. Due to a lack of question clarity data generation was difficult increasing time needed for analysis and also increasing the risk of misreporting.

## Discussion (74)

Survey design can greatly affect not only response rates, but also the quality of the collected data and, the efficiency in which results can be generated. Several strategies were identified to improve survey design. These included: reduction of total questions, ability to skip irrelevant questions, increasing survey pilot sample size, individual support for large/complex HHSs and, a data collection template distributed prior to survey implementation to assist preparing data over a longer time period.