Evidence-Based Rationale for the Follow-Up Questionnaire

Purpose of the Questionnaire

This follow-up survey, distributed one month after delivery of The Moment That Matters workshop, has been designed to evaluate longitudinal learning transfer and real-world behavioural change. It provides evidence at Kirkpatrick Level 4 (Results), measuring whether increased confidence within the session translates into actual speaking-up behaviours on clinical placement (Kirkpatrick & Kirkpatrick, 2009).

The questionnaire is explicitly aligned with validated evaluation frameworks, current patient safety literature, and inclusive education research, ensuring both rigour and accessibility.

Evidence Base for Questionnaire Design

Confidence and Self-Efficacy

- Confidence ratings are grounded in self-efficacy theory, which demonstrates that perceived competence predicts future action (Bandura, 1997).
- Pre- and post-training confidence comparisons are established indicators of training effectiveness at Kirkpatrick Level 2 (learning) (Kirkpatrick & Kirkpatrick, 2009).

Behavioural Frequency and Narratives

- Healthcare trainees frequently identify safety issues but withhold voice due to hierarchical and cultural barriers (Schwappach & Richard, 2018).
- Behavioural frequency items (“Have you spoken up since the session?”) combined with open-text narratives allow mixed-methods evaluation, capturing both measurable trends and context-rich insights (Creswell & Plano Clark, 2017).

Barriers and Enablers

- Documented barriers to speaking up include fear of negative consequences, hierarchy, and lack of confidence (Okuyama, Wagner & Bijnen, 2014).
- Capturing enablers supports continuous quality improvement and aligns with NHS Freedom to Speak Up guidance (NHS England, 2022).

Longitudinal Programme Impact

- Multimodal speaking-up programmes have demonstrated sustained improvements in safety culture and behaviour over time (Walther et al., 2022).
- A one-month follow-up survey aligns with evidence on reinforcement and behaviour change, ensuring evaluation extends beyond immediate reactions (Gollwitzer & Sheeran, 2006).

Psychological Safety

- Psychological safety is a critical predictor of voice behaviour in healthcare teams (Edmondson, 1999).
- Including questions on barriers/enablers indirectly assesses psychological safety, providing insight into placement culture (Bahadurzada et al., 2024).

Accessibility and Dyslexia-Friendly Design

- The British Dyslexia Association (2023) recommends clear sans-serif fonts, uncluttered layouts, and reduced text density.
- Recent open-access research confirms that letter and word spacing significantly improves reading performance for dyslexic learners, more so than specialised font shapes (Prado et al., 2025).
- The survey has therefore been designed using Universal Design for Learning (UDL) principles to ensure inclusivity for all learners (Meyer, Rose & Gordon, 2014).

Conclusion

This questionnaire is a research-informed evaluation instrument, not a generic feedback form. Its design is:

Valid – based on established theories of self-efficacy, psychological safety, and training evaluation.

Relevant – aligned with HCPC standards, NHS Freedom to Speak Up, and current safety culture literature.

Inclusive – formatted in accordance with dyslexia-accessible design research and UDL principles.

Impact-focused – capturing behavioural transfer (Level 3) and longitudinal results (Level 4).

By embedding this questionnaire and rationale within the submission, the programme demonstrates a commitment to robust evaluation, inclusivity, and measurable patient safety outcomes.

References

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Confidence and Behaviour

Since attending the session, how confident do you feel about speaking up if you observe unsafe practice on placement?

	1	2	3	4	5	
Not at all confident	○	○	○	○	○	Extremely confident

Since the workshop, have you had an opportunity to raise a concern in practice?

- ○ Yes
- ○ No

If yes, please describe (briefly) the situaition and how you approached it.

Your answer

Barrier and Enablers

What barriers (if any) did you encounter when speaking up?

- ◯ Fear of negative consequences
- ◯ Hierarchy / seniority
- ◯ Lack of confidence
- ◯ Time pressure
- ◯ Unclear processes
- ◯ Other: _____

What factors helped you to speak up effectively?

Your answer

Impact of the workshop

Which elements of the workshop have you found most useful in practice?

- ◯ SBAR framework
- ◯ Escalation ladder
- ◯ CUS
- ◯ Pocket cue card
- ◯ Other: _____

Have you shared any of the tools with peers or colleagues?

- ◯ Yes
- ◯ No

Ongoing Support

What further training, resources, or support would help you to continue developing this skill?

Your answer

Overall Impact

Overall, how valuable has this workshop been to your professional development?

	1	2	3	4	5	
Not valuable	○	○	○	○	○	Extremely valuable

Since the session, have you changed your approach to unsafe practice?

Your answer