

Evaluation Summary.

Sandra Jarrett, Conference Co-organiser

The SHASTD Annual Conference 2002 took place at the Royal Station Hotel, Newcastle. There were 93 delegates, both day and residential.

66 evaluation forms were returned.

CONFERENCE FACILITIES

These were rated by nearly all delegates as good to excellent. There were a few delegates who rated the facilities as fair to poor.

Opinions varied as to the benefits of having the conference in the city centre – some were favourable and others complained of the noise from the station and stuffy rooms. The overwhelming complaint was the lack of a microphone, so that the sound in the main conference room was very poor for those sitting near the back. Some also commented on the uncomfortable chairs.

The organisers agreed wholeheartedly regarding the sound, but unfortunately when the venue was booked we were informed that the sound was adequate and would not need amplification. We did attempt to hunt down a microphone for the rest of the conference but were unable to do so, and our apologies if this detracted from the excellence of the presentations. This will be remedied at future conferences.

CONTENT

The programme was overwhelmingly rated as excellent to good.

Delegates felt the presentations followed a logical sequence, and highlighted the changing role of the health adviser as well as positive validation of the role in the National Strategy for Sexual Health. Delegates felt that it was important politically for Cathy Hamlyn to be present, and the talks regarding the new Manual for Health Advising Practice and the future work around training and registration were highly regarded.

Delegates commented on the fact that the talks emphasised practice development and research by health advisers and wanted this to continue at future conferences.

Some delegates felt that the programme was too packed, that there was too little time for questions and discussions, and that there were too many sessions.

Some commented about the lack of posters by health advisers – however, the conference can only provide this if health advisers are willing to present their work.

Any suggestions as to how to encourage health advisers to do this would be welcome!

PROGRAMME MANAGEMENT AND ORGANISATION

This was rated by delegates as excellent to good, and only one who rated it as poor.

Most delegates praised the organisation (apart from the sound problems!), and both new and established health advisers commented on the high standard of presentations and workshops, as well as the feedback regarding professional development. All delegates thought the Saturday dinner and entertainment at the Centre for Life was excellent, (bar one, who pronounced it as a ghastly evening and the worst they'd been to.) By all accounts, a good time was had by all (the conference organiser has the photo evidence!).

PRESENTATIONS

The presentations were, on the whole, seen as very relevant to health advising. There were some sessions that delegates found quite relevant, but these differed for individuals, which perhaps highlights the different emphasis on particular roles within individual clinics. There were only a few delegates who found a couple of sessions not relevant.

Particular presentations that were singled out for praise included the medico-legal issues; the Handbook and HA training needs; the research projects on chlamydia, and the debate. There were also comments regarding the whole progression of the talks and how the Sexual Health Strategy had identified Health Advisers as key providers of sexual health services. I think delegates found this exciting, as well as a confidence booster.

The debate was rated highly by nearly all delegates, although, as last year, there was some confusion about the exact wording of the title. However, it raised a lot of stimulating discussion and was obviously a topical issue that many clinics are struggling with at present.

Again, most people felt the AGM was very relevant, but there were a number of delegates who did not attend and some who felt it was not relevant to their work as a health adviser. It is rather disheartening to think that SHASTD members feel the AGM is not relevant. This is the opportunity for members to catch up on what is happening on SHASTD Council, what has been done over the year, and for Council members to get feedback, and agree a mandate for the next year. However, recruitment to the Council was actually very successful, so we have a lot of new blood on board! There are still some vacancies so it is an ongoing problem to recruit enough health advisers to help take the work forward.

Unfortunately, the focus groups/workshops were not identified separately on the evaluation forms, but the written and verbal feedback was very positive, and some useful discussions and recommendations emerged from these.

SUMMARY

The overall feedback from delegates, sponsors, and speakers was extremely positive. People felt that the conference addressed current events and the changing role of the

health adviser, particularly with the new National Strategy for Sexual Health, and the implications for our profession.

The standard of presentations were rated as very high, and delegates were impressed with the emphasis on practice development and new research, as well as the range and diversity of speakers.

Delegates felt that the conference was relevant, informative and inspiring, and both new and established health advisers were enthused and excited by the new developments. Delegates reported that the conference was friendly, relaxed, and a number also stressed the importance of networking and sharing ideas and good practice with others.

The main criticisms of the conference were the poor sound, and the fact that some people felt the programme was too packed and intense and would have liked more time for discussion, informal networking, and more workshops. However, this latter is often expressed by delegates at conferences, and it can be a delicate balancing act to try and fit a lot of information into a limited time.

The feedback is always useful, and helps to inform the next conference. It also hopefully inspires health advisers to get involved and present their own work at conference.

With thanks to all the delegates, sponsors and speakers/facilitators for providing the feedback, and ensuring the high standards and friendly atmosphere of the conference continue.

My thanks also to the other organisers, Chris Faldon, Debbie Burnett and Lynn Wilson, and all the people who offered their help behind the scenes.

SUGGESTED FUTURE TOPICS FOR CONFERENCE

RESEARCH

GONORRHOEA – INCREASE AND RESISTANT STRAINS

ROLE OF HA

DOCUMENTATION

MEDICO-LEGAL ISSUES (MORE OF!!)

CULTURAL ISSUES

AFRICAN PATIENTS/ASYLUM SEEKERS

CHILD PROTECTION

HEPATITIS C

FAMILY PLANNING

MANAGEMENT SUPERVISION

PSYCHOSEXUAL ISSUES

SEXUAL ASSAULT

COUNSELLING

CYTOLOGY

TIME MANAGEMENT

PARTNER NOTIFICATION

GENDER ISSUES